

STI and BBV prevention for the sex industry

Department of Health guidance to support
the decriminalisation of sex work in Victoria

To receive this document in another format,
email the Policy and Programs Branch
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In this document, 'Aboriginal' refers to both Aboriginal
and Torres Strait Islander people.

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Available from the [Department of Health website](https://www.health.vic.gov.au/preventive-health/sex-worker-health)
<<https://www.health.vic.gov.au/preventive-health/sex-worker-health>>.

Disclaimer

Please note that any advice contained within this publication
is intended only as a general guidance to the sex industry. The
Department of Health does not accept any liability for any loss or
damage suffered as a result of reliance on the general guidance
and advice contained in this publication. Nothing in this publication
should replace seeking appropriate medical and legal advice.

Aboriginal acknowledgment

The Victorian Government acknowledges the Traditional Owners of the lands on which we all work and live. We recognise that Aboriginal people in Victoria practise their lore, customs and languages, and nurture Country through their deep spiritual and cultural connections and practices to land and water.

The Victorian Government is committed to a future based on equality, truth and justice, and acknowledges that the entrenched systemic injustices experienced by Aboriginal people endure.

We pay our deepest respect and gratitude to ancestors, Elders and leaders – past and present. They have paved the way, with strength and courage, for our future generations.

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Overview

Background

The Victorian Government is decriminalising sex work to achieve better public health and human rights outcomes.

This is happening in two stages. The first stage started on 10 May 2022.

The first stage included:

- anti-discrimination protections for sex workers
- an end to mandatory three-monthly sexual health testing for sex workers
- repeal of offences for:
 - working as a sex worker with a sexually transmissible infection (STI)
 - permitting a sex worker to work with an STI
 - engaging in sexual services without the use of a condom.

The second stage is set for 1 December 2023. This stage will include the full repeal of the **Sex Work Act 1994** and the repeal of brothel and escort agency provisions in the **Public Health and Wellbeing Act 2008**.

This Department of Health (the department) guidance focuses on STI and blood-borne virus (BBV) prevention for the sex industry. It aims to support the sex industry by:

- outlining the existing public health approach to STIs and BBVs in Victoria
- recognising and building on sex workers' strong understanding of safer sex practices and history of effective peer education
- describing universal best-practice methods for STI and BBV prevention
- providing information to assist workers and business operators to transition to a decriminalised environment.

This document is part of a broad Victorian public health response to support sex worker health and wellbeing. The department has funded several other initiatives including anti-stigma training for health professionals and research on the health impacts of the reforms.

Find out more about the department's work to support sex worker health and wellbeing on the [Sex Worker Health webpage](https://www.health.vic.gov.au/preventive-health/sex-worker-health) <<https://www.health.vic.gov.au/preventive-health/sex-worker-health>>.

With decriminalisation, the sex industry will continue to have the same general occupational health and safety (OHS) rights, duties and protections that apply in all other workplaces in Victoria. Find out more about OHS on the [WorkSafe website](https://www.worksafe.vic.gov.au/sex-work) <<https://www.worksafe.vic.gov.au/sex-work>>.

How to use this guidance

This document is the main source of information for the sex industry in Victoria to support STI and BBV prevention in the move to decriminalisation.

It also provides links to a range of other useful sources of information including resources developed 100 per cent by and for sex workers.

The document is split into several key sections.

The first section provides basic information about the diversity of Victorian sex workers, about research on Victorian sex worker health and wellbeing and about services the department funds to support sex workers.

The second section outlines the strong existing public health approach to preventing, managing and controlling STIs and BBVs in Victoria.

The third section provides information for sex workers about best-practice methods for STI and BBV prevention including safer sex practices, regular testing and client health checks. This section also has information on what happens if you test positive for an STI.

The fourth section provides information for business operators about best-practice methods for STI and BBV prevention. This section also has information about brothel and escort agency provisions in the Public Health and Wellbeing Act.

The term 'business operator' covers:

- brothel owners, operators and managers
- escort agency owners, operators and managers
- private and independent sex workers (small owner-operators)
- any other owner, operator or manager of a business that offers sexual services.

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Nothing in this guidance should replace seeking individual medical advice where appropriate.
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Victorian sex workers

Diversity of sex workers

Sex workers in Victoria are highly diverse. There is diversity in gender, sexuality, age, ethnic background, languages spoken, socioeconomic background, Aboriginal descent, religion, disability, citizenship/visa status and migration history.

Sex workers can be female, male, non-binary or gender non-conforming. They can be cisgender or transgender. They can have intersex variations. They can be queer, lesbian, gay, heterosexual or bisexual. An individual sex worker's gender presentation or sexuality at work may be different from in their private life.

'Intersectionality' refers to the ways in which different aspects of identity and experience can expose a person to complex, interconnected forms of discrimination. Many sex workers in Victoria experience increased marginalisation, isolation or stigma due to these intersecting factors.

Sex workers work in many different settings and offer many different services. Types of sex work include street-based work, brothel-based work, escort agency-based work, stripping, massage parlour-based work, private/independent work, fetish work, opportunistic work and camming or online sex work. Many sex workers engage in different types of sex work at the same time.

Some sex workers work full-time, while others work only occasionally. Not everyone who provides sexual services in exchange for money or other goods identifies as a sex worker.

Sex worker health and wellbeing

The public health response to decriminalisation in Victoria has been informed by a 2021 study focusing on the health and wellbeing needs of sex workers. This department-funded study was conducted by the Australian Research Centre in Sex, Health and Society.

Key research findings included:

- Victorian sex workers saw decriminalisation as an important step to improve health.
- Both sex workers and service providers considered mandatory STI testing to be unnecessary and a burden to the health system.
- Sex workers demonstrated a high degree of sexual health literacy.
- Both sex workers and service providers reported high levels of condom use, regular voluntary STI testing and low STI and BBV incidence.
- Sex work stigma was identified as a primary barrier to accessing high-quality health services.
- Sex workers reported experiences of stigma and discrimination from health professionals including judgement, refusal of care and threats.
- Stigma and discrimination were key factors negatively affecting sex worker mental health.
- Sex workers identified access to non-stigmatising mental health services as a top priority.
- Many sex workers and service providers identified sex worker-led training for health professionals as essential to improving quality of care and increasing access to services.
- Peer support from friends, colleagues and sex worker groups or organisations was important for health and wellbeing.
- Peer service provision was key to strengthening referral pathways, supporting health literacy and reducing barriers to service access.

Services to support sex workers

In Victoria, a range of organisations offer services and programs that sex workers may choose to access.

This section describes a few organisations and initiatives that the department funds to support sex worker health and wellbeing.

Vixen

Vixen <<https://vixen.org.au/>> is Victoria's peer-only sex worker organisation. Vixen offers a wide range of services run 100 per cent by and for sex workers.

The department has funded Vixen to provide and expand essential services to support sex workers during decriminalisation. Vixen is also supported by Scarlet Alliance, the national peak body representing sex workers in Australia.

Vixen's services for sex workers include:

- **Decriminalisation Info Hub** <<https://vixen.org.au/infocenter/>>, which provides centralised information for sex workers and business operators about the reforms in English, Simplified Chinese, Thai and Korean
- a free peer-led counselling service for current sex workers
- sex worker-only drop-in spaces
- peer education and safer sex supplies
- peer outreach including dedicated projects for:
 - brothel-based and private sex workers
 - street-based sex workers
 - Aboriginal sex workers
 - male sex workers
 - trans and gender diverse sex workers
 - culturally and linguistically diverse and migrant sex workers (led by bilingual project workers speaking Thai, Mandarin and Cantonese)
- referrals to sex worker-friendly services
- sex worker community development events, education, workshops and skill-shares
- access to legal support and advocacy including peer court support
- sex worker awareness training for services, organisations and professionals working with sex workers.

Resourcing Health and Education (RhED)

RhED <<https://sexworker.org.au/>> is run by Star Health (soon to be Better Health Network), a community health service based in St Kilda.

RhED offers a range of services for the sex industry. It is staffed by sex worker-affirmative professionals including current and past sex workers with a diverse range of lived experience. RhED provides services to sex workers as well as owner/operators, managers, clients, families and the broader community.

RhED's services for sex workers include:

- peer education and safer sex supplies
- weekly drop-in spaces
- outreach to workers and venues
- workshops and events for sex worker professional development and community engagement
- RED magazine
- case management
- sex work-affirmative career development
- support for sex workers navigating the criminal justice system through the Arrest Referral Program

- dedicated support for (im)migrant sex workers, international students and young people engaging in sex work
- violence prevention and post-incident support
- peer community interpreters and translators (including Cantonese, German, French, Korean, Mandarin, Spanish, Thai and Vietnamese)
- sex worker-affirmative practice training for teams, organisations and people working with sex workers
- referrals to sex worker-friendly services.

Anti-discrimination protections for sex workers

As part of decriminalising sex work, anti-discrimination protections have been strengthened for sex workers in Victoria.

A new attribute was added to the **Equal Opportunity Act 2010**. The 'profession, trade or occupation' attribute ensures sex workers cannot be discriminated against because of their work in areas of public life, unless an exception applies.

Find out more on the [Victorian Equal Opportunity & Human Rights Commission \(VEOHRC\) website](https://www.humanrights.vic.gov.au/for-individuals/profession-trade-occupation/) <<https://www.humanrights.vic.gov.au/for-individuals/profession-trade-occupation/>>.

A sex work discrimination guideline is in development to clarify rights and responsibilities in line with this new attribute.

If you believe you have been discriminated against on the basis of your work or on the basis of another protected attribute such as a disability, find out more via VEOHRC's free [Enquiry Line](https://www.humanrights.vic.gov.au/get-help/) <<https://www.humanrights.vic.gov.au/get-help/>>.

Public health management of STIs

Sexually transmissible infections

Victoria has strong legislation and policies that focus on the prevention, management and control of STIs and BBVs.

STIs are infections spread via sexual contact such as vaginal, anal or oral sex. Some STIs are only transmitted by contact with bodily fluids, while others can also be transmitted by skin-to-skin contact.

Examples of STIs include:

- bacterial infections such as chlamydia, gonorrhoea and syphilis
- viral infections such as genital herpes and genital warts
- parasitic infections such as trichomoniasis.

BBVs are viruses spread via blood. Some of these infections can also be spread via sexual contact and are considered STIs, including HIV and hepatitis B viruses.

Victorian sexual and reproductive health and viral hepatitis strategy

The **Victorian sexual and reproductive health and viral hepatitis strategy 2022–30** <<https://www.health.vic.gov.au/victorian-sexual-reproductive-health-viral-hepatitis-strategy-2022-30>>

supports Victorians to achieve the best possible sexual and reproductive health outcomes and reduce the impact of STIs and BBVs on all Victorians.

It has seven plans including a system enabler plan, Aboriginal sexual and reproductive health plan, hepatitis B plan, hepatitis C plan, HIV plan, STI plan and women's sexual and reproductive health plan.

The strategy focuses on strengthening the Victorian service system through common priorities across all tailored plans for:

- reducing stigma, racism and discrimination
- building workforce capacity
- fostering partnerships and collaboration
- supporting data and research.

Sex workers are a priority population in several plans. The system enabler plan notes that sex work is real work and that sex workers should be meaningfully involved in programs and policies that affect them.

Information and education

Information and education about sexual health and safer sex practices are essential for effective STI and BBV prevention.

The department builds sexual health understanding for all community members through a range of programs and resources. This prevention approach helps support safer sex choices and increases individual awareness of risk and the short- and long-term health impacts of STIs.

The **Better Health Channel** <<https://www.betterhealth.vic.gov.au/healthyliving/sexual-health>> provides plain-language information about sexual health for all Victorians.

Health Translations <<https://www.ceh.org.au/health-translations-directory/>> is searchable by keyword and provides health information, including information about STIs, in multiple languages.

This fit-for-purpose guidance also plays a key role. The STI and BBV prevention methods described in this guidance are best practice regardless of occupation.

Public Health and Wellbeing Act

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The Public Health and Wellbeing Act is the main law designed to protect the health and wellbeing of the Victorian community. It lays out general principles and responsibilities to prevent and manage infections including STIs.

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These responsibilities are the same for all community members. The following examples provide practical guidance about how to meet these responsibilities.

A person who is at risk of getting an STI should:

- take reasonable steps to avoid getting an STI
- get tested regularly so they know their status
- get tested as soon as they have any symptoms.

If a person thinks they may have, or is diagnosed with, an STI, they should:

- get tested and treated
- find out what to do to avoid passing the infection on to others
- take reasonable steps to eliminate or minimise risk to others such as avoiding certain sexual activities while they complete treatment.

A person who is diagnosed with an STI also has entitlements such as:

- receiving information and advice about the STI and available treatments
- access to treatment.

The Act also enables the Chief Health Officer to respond to a serious risk to public health. In rare circumstances, this can include an individual knowingly putting others at risk of an STI or BBV. A serious risk to public health is carefully defined in the Act and considers factors such as the scale of harm and the availability of treatment. Where there is a serious risk to public health, the Chief Health Officer has powers to manage and restrict a person's behaviour. The Act requires that the measure that is least restrictive of the person's rights should be chosen.

Medical advances mean that STIs and BBVs are unlikely to be considered a serious threat to public health in most circumstances. For example, modern antiretroviral therapy for HIV effectively reduces the amount of the virus in the blood. Levels of HIV in the blood, or viral load, can become so low that the virus can no longer be passed on to others. This is known as an undetectable viral load.

Victoria has specific guidelines <<https://www.health.vic.gov.au/publications/victorian-guidelines-for-managing-hiv-transmission-risk-behaviours>> that lay out a process for managing HIV transmission risk behaviours. The goal of this process is to get people the right treatment, support and care. The guidelines apply to everyone in the community and do not discriminate based on occupation. The guidelines do not apply when a person living with HIV is taking reasonable steps to prevent onward transmission such as accessing treatment and using condoms.

Public health surveillance

Public health surveillance involves collecting, analysing and interpreting data to support disease prevention and control. STI and BBV surveillance data helps to inform the public health response to achieve the best possible sexual and reproductive health outcomes for all Victorians.

The Public Health and Wellbeing Act and Public Health and Wellbeing Regulations 2019 require laboratories and doctors to let the department know when certain STIs and BBVs are diagnosed. These include chlamydia, gonorrhoea, HIV and syphilis. This requirement is called notification, and these are all notifiable conditions.

Notification enables the department and local public health units to monitor the trends of STIs and BBVs in the community over time and respond to emerging concerns.

Information collected is de-identified to protect privacy. Information is handled and stored following Victorian privacy laws to ensure it is confidential and only used for the reasons it was collected.

You can view **Victorian surveillance data** <<https://www.health.vic.gov.au/infectious-diseases/infectious-diseases-surveillance-in-victoria>> on the department's website and also find information about **notification requirements and management guidelines for specific conditions** <<https://www.health.vic.gov.au/infectious-diseases/disease-information-and-advice>>.

Emerging issues

Outbreaks, new diseases and the re-emergence of old diseases still occur frequently throughout the world. These can include STIs as well as other infectious diseases that can be spread via people, animals, food or water. Australian health authorities continuously monitor surveillance data to pinpoint new and emerging issues.

The **department's website** <<https://www.health.vic.gov.au/public-health/infectious-diseases>> is kept up to date with emerging issues in Victoria.

Since May 2022, there has been a multi-country outbreak of monkeypox (mpox).

Mpox can be spread through skin-to-skin contact, contact with contaminated surfaces/objects and respiratory droplets. Mpox is not considered an STI, but it can be spread through intimate contact during sexual activity. A vaccine for mpox is available in Victoria. Find out more on the **Better Health Channel** <<https://www.betterhealth.vic.gov.au/monkeypox>>.

STI and BBV prevention for sex workers

Sex workers play a critical role in educating others, including peers, sexual partners and clients, about safer sex practices and STI prevention.

Most sex workers in Victoria already have a very good understanding of sexual health. This guidance aims to recognise and build on that knowledge.

This section describes best practice methods to prevent and minimise the spread of STIs. It is intended for sex workers of all genders in diverse settings including private, brothel or massage parlour-based, agency-based and street-based sex workers. It is most relevant for full-service sex workers who have penetrative vaginal or anal sex at work. Some of the methods described in this guidance may be more relevant to you and the setting in which you work than others.

Many people who are sexually active will be diagnosed with an STI at some point in their lives. The methods described in this guidance – such as condom use, regular testing and taking reasonable steps to avoid onward transmission – are best practice regardless of occupation.

STIs are not the only health and safety issue you may experience at work. You can find out more about your OHS rights and responsibilities on the [WorkSafe website](https://www.worksafe.vic.gov.au/sex-work) <https://www.worksafe.vic.gov.au/sex-work>.

You can find out more about STIs on the [Better Health Channel](https://www.betterhealth.vic.gov.au/conditionsandtreatments/sexually-transmissible-infections) <https://www.betterhealth.vic.gov.au/conditionsandtreatments/sexually-transmissible-infections> and the [Scarlet Alliance Red Book](https://redbook.scarletalliance.org.au/sexually-transmissible-infections-blood-borne-viruses/) <https://redbook.scarletalliance.org.au/sexually-transmissible-infections-blood-borne-viruses/>.

Safer sex practices

Safer sex refers to sexual activity that minimises the risk of exchanging bodily fluids such as semen, vaginal fluids or blood. Safer sex practices, such as condom use, protect you and your sexual partners by helping to prevent STIs and unplanned pregnancy.

STI transmission risk varies between different sexual activities. Different STIs can also be transmitted in slightly different ways. You can find out more about transmission risk on the Canadian [SmartSexResources website](https://smartsexresource.com/sexually-transmitted-infections/sti-basics/know-your-chances/) <<https://smartsexresource.com/sexually-transmitted-infections/sti-basics/know-your-chances/>>.

Some sexual practices, such as mutual masturbation, involve very little risk and can also be described as safer sex practices.

Higher risk sexual activities include:

- having sex without a condom
- using a condom that is too loose or too tight
- continuing to have sex after a condom has broken
- continuing to have sex after the person wearing the condom has ejaculated
- not using lubricant or using an incompatible lubricant
- trying to re-use a condom
- using a condom that is past its expiration date
- having sex when one or both partners have an open cut or wound.

You can find out more about safer sex on the [Better Health Channel](https://www.betterhealth.vic.gov.au/health/healthyliving/safe-sex) <<https://www.betterhealth.vic.gov.au/health/healthyliving/safe-sex>> or the [Scarlet Alliance Red Book](https://redbook.scarletalliance.org.au/safer-sex-tools/) <<https://redbook.scarletalliance.org.au/safer-sex-tools/>>.

Condom and barrier use

Research has shown that sex workers in Australia have a very good understanding of safer sex and have low levels of STIs. Peer education about the importance of condom use has played a critical role in keeping these rates low.

Condom use for oral, anal and vaginal sex is highly effective in protecting against the transmission of most STIs including HIV. Condoms are less effective against infections that can be spread by skin-to-skin contact such as human papillomavirus (HPV), herpes and mpox.

Many sex workers consider condoms to be personal protective equipment.

Always using condoms and similar protection at work is an important part of taking standard or universal precautions. Standard precautions are the minimum work practices you should do to achieve a basic level of infection prevention and control. This is because it is not always possible to know whether you or someone else may have an infection.

Protective equipment that can help prevent the transmission of STIs include:

- external or 'male' condoms (which cover the penis)
- internal or 'female' condoms (which are inserted into the vagina or anus)
- gloves (for finger penetration, hand relief or fisting)
- dental dams (which are placed as a barrier between the mouth and another person's vagina or anus).

Always use protective equipment with a compatible lubricant to prevent breakage.

Lubricants come in a variety of bases including oil, water, silicon and hybrid. Oil can degrade latex and should never be used with latex condoms. Check the condom package to see which lubricants are compatible.

Be sure you are confident in putting on and safely disposing of condoms and similar protection.

The Better Health Channel has more information on how to use **internal** <<https://www.betterhealth.vic.gov.au/health/healthyliving/contraception-condoms-for-women>> and **external** <<https://www.betterhealth.vic.gov.au/health/healthyliving/contraception-condoms-for-men>> condoms.

Free condoms, lubricant and other safer sex supplies can be accessed through **Vixen** <www.vixen.org.au> and **RhED** <<https://sexworker.org.au/>> including by post.

Changes to the law

It is no longer an offence in Victoria if you choose not to use a condom or other barrier when providing a sexual service. But this doesn't mean you should stop using condoms or that you will no longer be supported to do so.

Like all Victorians, you should still take reasonable steps to avoid being exposed to or transmitting an STI. Condom use for oral, anal and vaginal sex is critical to protecting your health and safety at work.

Under the Public Health and Wellbeing Act, business operators still have a responsibility to:

- provide you with condoms and water-based lubricant
- take reasonable steps to ensure condom use
- not discourage the use of condoms.

These provisions are in place until 1 December 2023.

Business operators and sex workers will continue to have standard OHS rights and responsibilities after that point. Find out more on the [WorkSafe website](https://www.worksafe.vic.gov.au/sex-work) <<https://www.worksafe.vic.gov.au/sex-work>>.

Negotiating condom use with clients

Victoria has removed specific restrictions for the sex industry relating to advertising.

For private workers, this means you can be up-front with clients about your safer sex practices and your ads can describe the services you do and don't provide.

Tips for negotiating condom use include the following:

- Be assertive and let the client know it's non-negotiable.
- Encourage your workplace to put up signs with a condom use policy.
- Emphasise that safer sex protects both of you.
- Point the client to resources about safer sex and sexual health.
- Offer different types of condoms or swap who wears protection (such as internal condoms).
- Use your mouth to put on the condom.

More tips can be found in the [Scarlet Alliance Red Book](https://redbook.scarletalliance.org.au/condom/) <<https://redbook.scarletalliance.org.au/condom/>>.

You may also want to have a plan for what to do if a client refuses to use a condom or takes off the condom during the service. Talking to your peers can help you plan for these situations.

If a client refuses to use a condom, you can decline or offer to change the service. Some unprotected sexual activities are more risky than others. Mutual masturbation or hand relief are low-risk options.

If a client takes off the condom without your consent during sex, this is often referred to as 'stealthing.' RhED and Vixen can provide individual support and assistance if you have experienced stealthing.

Recent changes to the **Victorian Crimes Act 1958** clarify that intentionally removing, tampering with or failing to use a condom without consent is a crime. These changes will come into effect on or before 30 July 2023.

Client health checks

You can reduce risk by checking a client for visible signs of an STI before you begin the session.

This means looking at a client's penis, anus, vagina, mouth and surrounding areas under good light. Visible signs of an STI can include sores, blisters, rashes, bleeding or discharge.

Not all STIs have visible symptoms and a person may have an STI without showing any symptoms. A health check is not a diagnosis.

There are also non-infectious causes of sores, blisters, rashes, bleeding and discharge.

You can learn more about what to look for in the [Scarlet Alliance Red Book](https://redbook.scarletalliance.org.au/checking-clients/) <<https://redbook.scarletalliance.org.au/checking-clients/>>.

Make sure to check your client before they shower or urinate. Showering and urinating can clear some signs of an STI such as discharge.

It is also important to have a plan for what to do if you suspect a client may have an STI.

This could include:

- asking another worker for a second opinion
- letting management know
- declining the session
- changing the services you provide to minimise risk (such as offering mutual masturbation only)
- letting the client know they should get tested before coming back to see you.

Business operators should support workers to refuse or change a service if they suspect a client has an STI.

Other precautions

STIs are transmitted by intimate, person-to-person contact such as oral, anal and vaginal sex. Some STIs are only transmitted by contact with bodily fluids, while others can be transmitted by skin-to-skin contact. STIs are not transmitted by casual contact such as using the same toilet seat or sharing food.

Some people may think that you can avoid getting an STI by keeping a clean space or showering often. This is not the case. But there are added precautions you may want to take to complement your safer sex practices.

It is recommended that condoms be used with sex toys and changed between different orifices and partners. Sex toys should also be cleaned and disinfected after each use.

Check the manufacturer's instructions to find out what products can be used to safely clean and disinfect each toy.

Items you touch during sex, such as a tube of lubricant or massage oil, can also be disinfected after each session.

Wear gloves any time you may come into contact with blood, semen or other bodily fluids.

You should also regularly wash and dry your hands with warm water and liquid soap while working, especially after:

- removing gloves
- touching a used condom, glove or dental dam
- touching or cleaning a used sex toy
- touching a client's genitals
- any contact with broken skin, blood, semen or other bodily fluids
- touching used linen.

When handwashing is not possible, you can use an alcohol-based hand sanitiser.

Vaccination

Vaccination is another way to protect yourself against some infections.

Currently, there are vaccinations available for hepatitis A, hepatitis B, HPV and mpox.

Some people born in Australia will have been vaccinated for HPV at school. The best time to be immunised against HPV is before you become sexually active. The Better Health Channel has more information about [HPV immunisation and eligibility](https://www.betterhealth.vic.gov.au/health/healthyliving/human-papillomavirus-hpv-immunisation) <<https://www.betterhealth.vic.gov.au/health/healthyliving/human-papillomavirus-hpv-immunisation>>.

When you get your sexual health testing done, you can talk to your doctor about vaccination. You can also have your blood tested for immunity if you are unsure whether you have been vaccinated.

Pre-exposure prophylaxis for HIV prevention

Pre-exposure prophylaxis (PrEP) is an oral medication that prevents HIV in people at risk of infection.

It does not protect against other STIs.

PrEP can be taken in two different ways:

- **Daily PrEP** involves taking a PrEP pill every day.
- **On-demand PrEP** involves taking two pills two to 24 hours before sex, a single pill at 24 hours and then again at 48 hours after the double dose. Currently, there is only clear evidence to support on-demand PrEP for cisgender men who have sex with men.

In deciding whether PrEP is right for you, your health professional may consider factors including your assigned sex at birth, the type of sex you have in your private life and at work, who you have sex with and your safer sex practices.

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PrEP may be recommended for some sex workers but not for others.
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PrEP should not be used at the expense of other proven methods. Peer education and condom use are critical components of HIV prevention for sex workers.

You can find out more about PrEP on the [Better Health Channel](https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/pre-exposure-prophylaxis-for-hiv-prevention) <<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/pre-exposure-prophylaxis-for-hiv-prevention>>.

Sexual health testing

Testing is an essential step to help detect and treat STIs and prevent onward transmission.

Not all STIs have symptoms. This means you may have an STI and not know it. If left untreated, some STIs can also lead to long-term health issues such as infertility.

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Everyone who is sexually active should consider regular sexual health testing.
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By getting tested often, you can find out early if you do have an STI. This means you can get treatment quickly and minimise the impact on your health and work. It also means you minimise the risk of passing an STI on.

STI testing is widely available from GPs, sexual health clinics/hubs, family planning clinics and some community health centres.

It is up to you to decide whether to tell your doctor or nurse that you are a sex worker when you get tested. For some people, talking about sex work can feel important to get the right care. For others, it may feel unnecessary or risky. There is no requirement to disclose if you don't want to.

End to mandatory testing

Evidence has shown that sex workers in Victoria take great care looking after their sexual health. Mandatory testing is unnecessary and can increase the risk of stigma for sex workers when getting tested.

You are no longer required by Victorian law to complete sexual health testing every three months. But regular, voluntary testing is still essential to your health and wellbeing.

When you should test

Many sex workers may still choose to test every three months even though the law has changed. You and your doctor should discuss what frequency is right for you.

The right frequency for you will depend on factors including:

- the types of sexual activities you engage in at work and in your private life
- how many sexual partners, including clients, you have
- your safer sex practices
- your individual health concerns

- whether you have any symptoms such as sores, blisters, discharge or pain
- whether you have had any recent incidents such as a condom break.

You can find out more about time periods and what tests you might want to request in the [Scarlet Alliance Red Book](https://redbook.scarletalliance.org.au/testing-times/) <<https://redbook.scarletalliance.org.au/testing-times/>>.

What to expect when you test

Your doctor or nurse will discuss with you what sexual activities you have engaged in, your safer sex practices, whether you have any symptoms and how many sexual partners you have had since your last test.

They may also ask you about the genitals that you or your sexual partners have. This is to understand your risk and what samples to collect. If you are only asked about your gender, you may want to clarify what information they need.

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It is up to you whether to tell your doctor or nurse that you are a sex worker.

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In a full sexual health check-up, usually a blood and urine or vaginal sample will be taken. Swabs can also be taken from your mouth or anus. You may be asked whether you want to self-collect your swabs and be given instructions on how to take them.

You should also talk with your doctor or nurse about what parts of your body you would like swabbed. This will depend on your sexual activity. For example, if you have given oral sex, you may want to have your mouth swabbed.

What to do if you experience discrimination

If you experience discrimination when you attend for sexual health testing, such as being treated badly because of your work or being refused care, there are actions you can take to help resolve the issue.

You may want to contact the health professional or service directly, either by phone, email or face to face. Most medical centres will have their own complaints process.

If that fails or doesn't feel right, you can submit a formal complaint to the **Health Complaints Commissioner** <<https://hcc.vic.gov.au/make-complaint>> or **VEOHRC** <<https://www.humanrights.vic.gov.au/get-help/>>.

Vixen and RhED are also available for information and support.

What happens if you test positive

If your STI test result is positive, your doctor or nurse will contact you to let you know and to discuss treatment.

Many people who are sexually active will test positive for an STI at some point in their lives.

Most STIs are treatable or manageable, and many are curable. You may need to avoid or change your sexual activities while you get treated.

There is a wide range of supportive information and counselling available in Victoria to provide reassurance and to help you manage a positive result.

Getting treatment will minimise the impact

Getting tested regularly means that you will know sooner if you have an STI. The sooner you know, the sooner you will be able to get treatment. Getting the right treatment quickly means fewer impacts on your health and work, now and into the future.

Timely treatment can help to reduce:

- short- and long-term health effects such as pelvic pain and infertility
- the chance of passing on the infection to a sexual partner
- the chance of getting another STI, as having one STI (such as chlamydia) may increase the chance of getting another (such as HIV)
- the chance of passing on the infection during pregnancy or birth (for syphilis, hepatitis B and HIV)
- the impact on your work.

Bacterial infections such as chlamydia, gonorrhoea,¹ donovanosis and syphilis can be cured with a short course of antibiotics.

Parasitic infections such as trichomoniasis can also be cured with a short course of antibiotics.

Viral infections such as genital herpes, HPV, HIV and hepatitis B cannot be cured, but there are treatments to manage symptoms and reduce the chances of passing the virus onto others.

People living with HIV who consistently take treatment as directed to reduce their viral load to an undetectable level cannot pass the virus on to others.

¹ Globally, antimicrobial resistance for gonorrhoea is an emerging public health issue. Antimicrobial resistance means that treatment options are reduced because some classes of antibiotics are no longer effective in treating certain types of gonorrhoea. In Victoria, rates of antimicrobial resistance for gonorrhoea are low.

What your doctor should discuss with you

Your doctor should give you information about the STI you have been diagnosed with.

In some cases, you may test positive for an STI in one part of your body, such as your throat, but not in another part such as your genitals.

You should be given information about your treatment options and how to cure or manage the infection. You may be asked to come back for another test to confirm the treatment has worked.

You should also be given information about how to prevent passing the infection on to others.

In some cases, you may need to avoid sexual activity for a short period while you complete treatment. If this is not possible for you, talk to your doctor or nurse about which sexual activities are the most risky so you can minimise the risk of passing an infection on to others.

For example, if you have tested positive for gonorrhoea in your throat but not in your penis, vagina, or anus, it may be less risky to have vaginal or anal intercourse than to give oral sex.

You should always be up-front with your doctor or nurse about your sexual activities and safer sex practices whether at work or in your private life. This will mean you receive the best advice possible. But it's up to you whether you want to disclose that those activities happen in the context of sex work.

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If you do disclose your occupation, you should not be told to stop working. You should be provided with the same guidance and support as other community members.

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False positives

False positives can occur with many diagnostic tests. STI tests are very accurate, but no test is perfect.

False positive results mean you do not have a disease or condition but the test says you do. The chances of a false positive are very low. But the chances are higher when you are at a low risk for STIs and you test frequently.

Your risk depends on the sexual activities you engage in at work and in your private life. Health professionals should not assume that you are at high risk just because you are a sex worker.

If you are concerned a result may not be accurate, you can ask your doctor or nurse for a repeat or confirmatory test. A confirmatory test is standard clinical practice for some STIs, including HIV.

Partner notification

For most STIs, including syphilis, chlamydia, gonorrhoea, HIV and donovanosis, it is important to tell your recent sexual partners, including clients, so they can be tested and treated.

This is called contact tracing or partner notification.

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Partner notification helps to prevent the onward spread of an infection and reduce long-term health impacts for people who may not know they are at risk.

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For some STIs, partner notification also reduces the likelihood of you getting the STI back if you have sex with the same person again.

Time periods for who counts as a recent sexual partner are different for different STIs. Who you should contact may also depend on the sexual activities you engaged in and whether you used protection such as a condom. Your health professional will talk to you about who counts as a partner and who doesn't, and how far back in time you need to consider.

You and your health professional should discuss the different options for how to contact sexual partners. Your

needs and preferences should be considered. You may want to use different options for different people.

You can personally contact people to let them know they should get tested. **Let Them Know** <<https://letthemknow.org.au/>> is a website that provides sample conversations, emails, text messages and letters people can send to sexual partners either personally or anonymously.

If you are worried about being identified, you can use an anonymous option such as:

- **Let Them Know** <<https://letthemknow.org.au/>>
- **Drama Down Under** <<https://www.thedramadownunder.info/let-them-know/>> (for men who have sex with men)
- asking your health professional to contact your sexual partners
- getting the help of a Partner Notification Officer (PNO).

PNOs are nurses who are trained to help with partner notification for STIs. They have experience in sexual health, mental health and alcohol and other drug use. PNOs can contact your partners anonymously on your behalf or help you decide how to minimise any potential harm from the partner notification process. You or your health professional can contact a **PNO directly via email** <contact.tracers@dhhs.vic.gov.au> or phone (03) 9096 3367.

Notifiable conditions

Some STIs must be notified to the department. These are known as notifiable conditions.

This means that your doctor or the laboratory may be required by law to complete a form with information such as:

- the first two letters of your first and last name
- your postcode
- the condition diagnosed
- your clinical history
- your risk factors
- the illness history and details such as whether the person you got the infection from was a casual partner, regular partner, client or sex worker.

Your doctor should tell you that this information is being provided to the department, why it is being provided and that it is a legal requirement.

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Notification allows monitoring of STI trends in the community.

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This information is collected to better understand risk factors and to identify any need for targeted health promotion. Targeted health promotion could be, for example, a social media campaign to tell sex workers that rates of a particular STI are on the rise.

Working with a sexually transmissible infection

It is no longer an offence for a sex worker to work with an STI.

This includes HIV. It is no longer an offence for a person living with HIV to engage in sex work. The changes to the law acknowledge that criminalisation is not an effective method to prevent BBV and STI transmission.

Everyone in Victoria has a responsibility to take reasonable steps to reduce the risk of spreading an STI to others. There are ways you can do this even if you need to keep working.

The risk of passing an STI on to others can depend on many factors. This can include the type of STI, how long it has been since you tested positive, the site of infection, whether you are on treatment, the type of sexual activities you engage in at work and in your private life, and your safer sex practices.

You and your health professional are best placed to assess the risk and what steps to take.

Reasonable steps to reduce risk will depend on your circumstances. Reasonable steps could include:

- getting treatment as soon as you know you have an STI
- follow-up testing to see if the treatment has worked

- achieving and maintaining an undetectable viral load through antiretroviral treatment (for HIV)
- using condoms or dental dams
- following your health professional's advice about what sexual activities to change or avoid while you complete treatment
- only engaging in low-risk sexual activities while infectious (such as mutual masturbation, erotic massage, hand relief or sexual activities that avoid the site of the infection).

Sex workers living with HIV

The department has developed guidance in partnership with Living Positive Victoria, Positive Women Victoria, Vixen and Scarlet Alliance specifically for sex workers living with HIV.

This document is available from the [Sex Worker Health website](https://www.health.vic.gov.au/publications/guidance-for-sex-workers-living-with-hiv) <<https://www.health.vic.gov.au/publications/guidance-for-sex-workers-living-with-hiv>>.

Testing positive for HIV does not mean you will become very ill or need to quit sex work.

When taken as directed, modern antiretroviral therapy effectively reduces the amount of the virus in the blood. Levels of HIV in the blood, or viral load, can become so low that the virus can no longer be passed on to others. This is known as an undetectable viral load or U = U.

U = U stands for undetectable = untransmissible.

Beginning treatment as soon as possible makes the treatment more effective, protects your health and wellbeing and helps you reach undetectable levels sooner. Being undetectable is not a cure. But it does mean you can have a normal life

expectancy and eliminate the risk of passing the virus on to others.

Confidential peer support for people living with HIV can be accessed through [Living Positive Victoria](https://livingpositivevictoria.org.au/) <<https://livingpositivevictoria.org.au/>> and [Positive Women Victoria](https://positivewomen.org.au/) <<https://positivewomen.org.au/>>.

These organisations provide expert understanding and are run by and for people living with HIV. There is no requirement to disclose your sex work status if you don't want to.

Incidents at work

Incidents at work can take various forms.

Some incidents can increase your risk of being exposed to or spreading an STI.

Incidents at work where you may come into contact with someone else's bodily fluids can include:

- blood or sex fluid spills on broken or unbroken skin
- condom slips or breaks
- 'stealthing', or the removal of a condom without consent.

Blood or other bodily fluids such as semen should always be treated as potentially infectious.

If blood or other bodily fluids have come into contact with unbroken skin, flush the area with running water and then wash the area thoroughly with water and liquid soap.

If blood or other bodily fluids have come into contact with broken skin, such as a cut, sore or rash, you should follow the same steps above. You should also speak to a health professional as soon as possible to assess whether you are at risk of infection.

If you come into contact with bodily fluids during penetrative sex, it is recommended that you do the following:

- Stop the service immediately.
- Urinate to flush away any fluids that may be near your urethra.
- Wash the genital area gently but thoroughly.
- Avoid vaginal or rectal douching. Douching is the process of washing out the inside of your vagina or anus with water or other fluids. Douching can cause irritation to your tissues, which can increase the risk of infection.
- Consider post-exposure prophylaxis (PEP) if you think you may have been exposed to HIV. You must start PEP within 72 hours for it to be effective (see below).
- Have an STI check seven days after the incident. You may also need to return for different tests at different times. STIs have different window periods. A window period is the time between when a person comes into contact with an infection and when the infection will show up on a test. Tests done too early may not be accurate. Your health professional will be able to advise you.
- Make sure you use condoms or other protection with all sexual partners and clients until you get your test results back.

Emergency contraception and abortion services

Depending on your circumstances, you may want to consider emergency contraception to reduce the risk of unplanned pregnancy.

You can get an emergency contraceptive pill at most pharmacies without a prescription. It should be taken as soon as possible to be effective. It can be taken up to four or five days after unprotected sex, depending on the type of pill you take.

- Be sure to tell the pharmacist about any other medications you are taking, including supplements.
- If you take St John's wort, a common supplement found in many herbal remedies for depression and anxiety, you may need to take two doses of the emergency contraceptive pill for it to be effective.
- If you have a higher body weight, you may be recommended a double dose depending on the type of pill.

As an alternative, you can have a copper intrauterine device (IUD) inserted up to five days after unprotected sex. IUDs are equally effective regardless of body weight. They can also be used long term as a form of contraception.

More information

Find out more about **emergency contraception** <<https://www.betterhealth.vic.gov.au/health/healthyliving/contraception-emergency-contraception>> on the Better Health Channel.

1800MyOptions <<https://www.1800myoptions.org.au/>> is a free and confidential service providing information about contraception, pregnancy options and abortion services.

You can also find out about **abortion options** <<https://www.betterhealth.vic.gov.au/health/healthyliving/abortion-in-victoria>> on the Better Health Channel.

Post-exposure prophylaxis for HIV

Post-exposure prophylaxis (PEP) is a medicine you can take to prevent HIV infection if you may have been exposed to the virus.

PEP must be started within 72 hours of an exposure to HIV. It must be taken correctly over a 28-day treatment period to be effective. PEP does not protect against other STIs.

PEP is available from the emergency department of most public hospitals, sexual health clinics and some general practice clinics.

Visit the **PEP website** <<https://www.getpep.info/get-pep-now/vic/>> to find your nearest PEP site. You can also call the Victorian hotline on 1800 889 887. The line is staffed from 9:00 am to 5:00 pm Monday to Friday, and a detailed recorded message plays at other times.

The decision to prescribe PEP is made on a case-by-case basis. A health professional will ask you a series of questions to determine your risk and whether PEP is appropriate for you. The risk of HIV transmission from a single incident (such as a condom break) is often low and is determined by several factors such as:

- whether you know that the other person is HIV-positive
- if the other person is HIV-positive, whether they are on treatment
- if the other person's HIV status is unknown, whether they are in a higher risk group such as men who have sex with men
- the type of sexual activity or exposure.

STI and BBV prevention for business operators

As a business operator, you play an important role in supporting the health and safety of everyone in the workplace.

This section has departmental guidance on ways for business operators to prevent and minimise the spread of STIs.

Most STIs are treatable and manageable, and many are curable. Being diagnosed with an STI does not mean that a person is 'dirty' or engaging in unprotected sex. Many people who are sexually active will be diagnosed with an STI at some point in their lives regardless of their occupation.

After December 2023, you will continue to have responsibilities under the **Occupational Health and Safety Act 2004**. STI and BBV prevention is not the only health and safety issue you should consider in your workplace. Find out more about your OHS responsibilities from the [WorkSafe website](https://www.worksafe.vic.gov.au/sex-work) <<https://www.worksafe.vic.gov.au/sex-work>>.

Brothels and escort agencies have specific responsibilities under the Public Health and Wellbeing Act that will stay in place until 1 December 2023. In most cases, these responsibilities are similar to the best-practice methods discussed in this guidance. At the end of this section, you'll find more information and a list of these responsibilities.

Services for the sex industry

A range of services are available for sex workers and business operators in Victoria.

Vixen <<https://vixen.org.au/>> is Victoria's peer-only sex worker organisation, based in Brunswick. Vixen offers a wide range of services to current and former sex workers.

The **Vixen Decrim Info Hub** <<https://vixen.org.au/infohub/>> has information for sex workers about decriminalisation and STI and BBV prevention in English, Simplified Chinese, Thai and Korean. There are also factsheets available on the Info Hub for business operators.

Resourcing Health and Education (RhED) <<https://sexworker.org.au/>> is a community health service for the sex industry based in St Kilda. RhED provides a wide range of services to sex workers, business operators, clients, families and the broader community.

Peer education, where sex workers learn skills from other sex workers, is a highly effective form of training. This can include sharing information and skills related to STI prevention, safer sex practices, condom negotiation and client health checks.

Both Vixen and RhED offer a wide range of training, education, information and free safer sex supplies by outreach to sex industry workplaces across Victoria. Vixen is staffed entirely by sex workers. RhED is staffed by a mix of sex workers and other professionals. RhED can ensure education sessions and training are delivered by staff with lived experience of sex work if requested.

Education and information

Education and accurate information are the foundation of effective STI prevention.

There are high levels of sexual health knowledge among sex workers. This includes knowledge of safer sex practices and the importance of testing and treatment. We continue to see extremely low rates of STIs among sex workers in Australia. This is largely due to effective peer education.

Continuing to build on this knowledge and ensuring all sex workers can access and receive accurate information is a priority. This is especially the case for workers who are new to the industry.

As a business operator, you should provide accessible and medically accurate information about STIs and STI prevention. This information should be available to all workers in your workplace, regardless of whether they are employees or contractors.

Accessible information means providing easy-to-understand information in languages spoken by your workers. There are many up-to-date resources available online in a variety of languages.

The **Better Health Channel** <<https://www.betterhealth.vic.gov.au/healthyliving/sexual-health>> provides plain-English information about sexual health.

Health Translations <<https://www.ceh.org.au/health-translations-directory/>> is searchable by keyword and provides health information, including information about STIs, in multiple languages.

The **Scarlet Alliance Red Book** <<https://redbook.scarletalliance.org.au>> is a comprehensive sex worker resource with information on safer sex, testing, STIs and client health checks. The resource was developed by and for sex workers and is available in English, Korean, Simplified Chinese and Thai.

This guidance for the sex industry also includes a section for sex workers.

Sexual health testing

Sex workers are no longer required by Victorian law to undergo sexual health testing every three months. Business operators do not need to ask for or store STI test certificates.

The department does not consider the requirement of STI test certificates by business operators to be an effective or evidence-based prevention method. Business operators should instead ensure workers get education and information about voluntary testing.

Voluntary sexual health testing is still important. Sex workers and their health professionals should decide what tests are relevant for them and how often to test.

Sex workers who have been diagnosed with an STI don't have to disclose the diagnosis to their workplace.

STI treatment and management should be determined by the individual sex worker and their health professional.

It is legal for people living with HIV in Victoria to work as sex workers.

HIV treatment and research have advanced considerably in recent years. When taken as directed, modern antiretroviral therapy effectively reduces the amount of the virus in the blood. Levels of HIV in the blood, or viral load, can become so low that the virus can no longer be passed on to others. This is known as an undetectable viral load.

You can support your workers to get tested regularly by:

- providing medically accurate information about sexual health
- providing this guidance
- linking your workers to the Scarlet Alliance Red Book <<https://redbook.scarletalliance.org.au/>>
- allowing Vixen and RhED outreach staff to talk to your workers if they drop by
- organising an education session on sexual health with Vixen or RhED.

Safer sex practices

It is no longer an offence in Victoria if a sex worker or client does not use a condom.

This doesn't mean that sex workers will no longer want to use condoms. Sex workers in Victoria have high rates of condom use. Condom use is still critical to protecting the health and safety of everyone who is sexually active.

Condom use for oral, anal and vaginal sex is highly effective in protecting against the transmission of most STIs. Condoms are less effective against infections that can be spread by skin-to-skin contact such as herpes.

As a business operator, you should provide your workers with condoms and other protective equipment.

Using condoms and similar protection is an important part of taking standard or universal precautions. Standard precautions are the minimum infection control practices you should engage in at work given that it's not possible to know whether someone has an infection.

Protection that sex workers may use at work include:

- external or 'male' condoms (in different sizes)
- internal or 'female' condoms
- water-based lubricant used with condoms
- gloves (in different sizes)
- dental dams.

You can ask your workers if there are other forms of protection that would help them to work safely.

Condoms and other protection should always be provided free of charge. It is important not to limit the number of items a worker can use during a shift.

You should also provide adequate training on how and when to use condoms and other personal protection. Vixen and RhED both provide relevant education sessions via outreach.

Condoms and other barriers should be in date (not expired). They should be stored in cool, dry places away from heat and moisture to prevent damage.

You can also develop a workplace policy that supports workers to negotiate condom use with clients. For example, such a policy could include:

- information about STI risk to encourage workers and clients to use condoms
- signs visible to clients stating that condoms should be used
- signs visible to clients stating that management will support a sex worker to end a service without refund if the client refuses to use a condom or removes the condom without consent
- steps to deal with a client who refuses to use a condom or removes the condom without consent.

If a client takes off the condom during sex without the worker's consent, this is often referred to as 'stealthling'.

Recent changes to the Crimes Act clarify that intentionally removing, tampering with or failing to use a condom without consent is a crime. These changes will come into effect on or before 30 July 2023.

Client health checks

Not all people with an STI have visible signs and symptoms, but some do. Checking a client for signs of an infection such as sores, blisters, rashes or discharge can be one way to help prevent STI transmission.

You can learn more about client health checks from the [Scarlet Alliance Red Book](https://redbook.scarletalliance.org.au/checking-clients/) <<https://redbook.scarletalliance.org.au/checking-clients/>>.

Both Vixen and RhED can also provide in-person training sessions.

As a business operator, you should support your workers to undertake client health checks. This means:

- providing access to training for workers on how to do a health check
- encouraging workers to do health checks
- letting clients know to expect a health check
- letting clients know that workers may refuse or change a service if they find possible signs of an infection
- providing adequate lighting for a health check
- providing access to training for workers on what to say and do if they find possible signs of an infection
- supporting a worker to ask another worker for a second opinion if needed
- supporting a worker's decision to refuse or change a service if the worker finds possible signs of an infection.

Right to refuse or change a service

Finding possible signs of an infection during a client health check is only one reason why a worker may need to refuse or change a service.

As a business operator, you should support your workers to refuse or change a service for any reason.

This includes:

- refusing to see a particular client
- stopping a service if the worker feels unsafe
- refusing to provide a particular service (in general or at a specific time)
- withdrawing consent they previously provided
- refusing to work at all on a particular day.

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All people in Victoria have a right to refuse to engage in a sexual act with any person, at any time, for any reason. This includes sex workers.

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Brothel and escort agency responsibilities under the Public Health and Wellbeing Act

Brothels and escort agencies in Victoria have specific responsibilities under the Public Health and Wellbeing Act that will stay in place until 1 December 2023. Table 1 summarises these responsibilities. In most cases, these responsibilities are similar to the best-practice methods discussed in this guidance.

The department administers these laws and assesses any potential noncompliance. The department recognises that most business operators want to meet their responsibilities. Education and support are the primary means to achieve compliance.

Penalties or fines can only be issued by a court. Court action is a last resort and only considered in the most serious cases.

The brothel and escort agency section of the Act will be removed on 1 December 2023 as part of the decriminalisation of sex work in Victoria.

The department recommends that business operators continue to follow the best-practice methods in this guidance after December 2023. The sex industry will also continue to have the same OHS rights, duties and protections that apply in all other workplaces in Victoria.

Table 1: Brothel and escort agency responsibilities in the Public Health and Wellbeing Act

Section of the Act	Summary of requirements (until 1 December 2023)
158	Provision and storage of condoms A person in charge of a brothel must: <ul style="list-style-type: none"> • provide condoms and water-based lubricant (readily accessible and sufficient quantity) • store unused condoms in sufficient condition and dispose of unused condoms when they expire • take reasonable steps to ensure condoms are kept in sealed containers.
159	Use of condoms A person in charge of a brothel or escort agency must: <ul style="list-style-type: none"> • take reasonable steps [see note below] to ensure a sex worker and client use condoms for vaginal, anal and oral sex • not discourage use of condoms.
160	Refusal of service A person in charge of a brothel or escort agency must not require a sex worker to provide a service if the sex worker refuses because the client may have an infection or refuses to wear a condom.
161	Evidence of medical examination A person in charge of a brothel or escort agency must not use oral or written evidence of a sex worker's attendance at a medical examination to imply the sex worker does not have an STI or BBV.
162	Information to sex workers and clients A person in charge of a brothel or escort agency must: <ul style="list-style-type: none"> • provide accessible written information about the spread of STIs in a variety of relevant languages • take reasonable steps to ensure information is medically accurate • provide information in the language a sex worker is familiar with if the sex worker has difficulty communicating in English.
163	Clean linen and towels A person in charge of a brothel must provide clean linen and towels.
164	Showers and baths A person in charge of a brothel must: <ul style="list-style-type: none"> • provide baths or showers with a continuous and adequate supply of hot and cold water for the use of clients and sex workers • ensure that baths and showers are cleaned and disinfected after each use.
165	Inspections and interviews A person in charge of a brothel must allow an authorised officer to interview sex workers without the person in charge being present if requested.

Reasonable steps are not defined in the Act, but the following can guide you on its meaning:

- encouraging workers and clients to use condoms (such as a workplace policy and signs)
- providing information about condom use and STI risk
- providing free condoms and not limiting the number of condoms a worker can use
- providing adequate training for workers on how to use condoms
- ensuring workers have access to peer education and services.

References

- Armstrong, L. (2014). Screening clients in a decriminalised street-based sex industry: insights into the experiences of New Zealand sex workers, *Australian & New Zealand Journal of Criminology*, 47(2), 207–222, <<https://doi.org/10.1177/0004865813510921>>.
- Donovan, B., Harcourt, C., Egger, S., & Fairley, C. K. (2010). Improving the health of sex workers in NSW: Maintaining success, *New South Wales Public Health Bulletin*, 21(4), 74–77, <<https://doi.org/10.1071/nb10013>>.
- Donovan, B., Harcourt, C., Egger, S., Watchirs Smith, L., Schneider, K., Kaldor, J.M., et al. (2012). The sex industry in New South Wales: a report to the NSW Ministry of Health. Sydney: Kirby Institute, University of New South Wales.
- Goldenberg, S. M., Morgan Thomas, R., Forbes, A., & Baral, S. (2021). Sex work, health, and human rights: Global inequities, challenges, and opportunities for action. Switzerland: Springer Nature, <<https://doi.org/10.1007/978-3-030-64171-9>>.
- Maciotti, P.G., DeVeau, R., Millen, M.J., McGlasson, C., Siangyai, B., Sinclair, G., et al. (2022). Understanding the health and social wellbeing needs of sex workers in Victoria. Melbourne: Australian Research Centre in Sex, Health and Society, La Trobe University.
- McCausland, K., Lobo, R., Lazarou, M., Hallett, J., Bates, J., Donovan, B., et al. (2022). 'It is stigma that makes my work dangerous': experiences and consequences of disclosure, stigma and discrimination among sex workers in Western Australia, *Culture, Health & Sexuality*, 24, 180–195, <<https://doi.org/10.1080/13691058.2020.1825813>>.
- Rayson, J., & Alba, B. (2019). Experiences of stigma and discrimination as predictors of mental health help-seeking among sex workers, *Sexual & Relationship Therapy*, 34, 277–289, <<https://doi.org/10.1080/14681994.2019.1628488>>.
- Treloar, C., Stardust, Z., Cama, E., & Kim, J. (2021). Rethinking the relationship between sex work, mental health and stigma: a qualitative study of sex workers in Australia, *Social Science & Medicine*, 268, 2021, 113468, <<https://doi.org/10.1016/j.socscimed.2020.113468>>.

