



LEGISLATIVE COUNCIL

SELECT COMMITTEE ON STATUTES AMENDMENT (REPEAL OF SEX WORK OFFENCES) BILL

Plaza Room, Parliament House, Adelaide

Monday, 31 May 2021 at 10:10am

BY AUTHORITY OF THE LEGISLATIVE COUNCIL

WITNESSES

SANDFORD, REBECCA, President, The Law Society of South Australia13
SPURRIER, NICOLA, Chief Public Health Officer, SA Health1

MEMBERS:

Hon. T.A. Franks MLC (Chairperson)
Hon. N.J. Centofanti MLC
Hon. I. Pnevmatikos MLC
Hon. D.W. Ridgway MLC
Hon. C.M. Scriven

WITNESS:

SPURRIER, NICOLA, Chief Public Health Officer, SA Health

1 The CHAIRPERSON: Welcome to the meeting. The Legislative Council has given the authority for this committee to hold public meetings. A transcript of your evidence today will be forwarded to you for your examination for any clerical corrections. The uncorrected transcript of your evidence today will be published immediately upon receipt from Hansard but the corrected transcript once received from you will replace the uncorrected transcript.

I advise that your evidence today is being broadcast via the Parliament of South Australia website. Should you wish at any time to present confidential evidence to the committee, please indicate and the committee will consider your request. Parliamentary privilege is accorded all evidence presented to a select committee; however, witnesses should be aware that privilege does not extend to statements made outside this meeting. All persons, including members of the media, are reminded that the same rules apply as in the reporting of parliament.

We would like to acknowledge the land we meet on today is the traditional lands for the Kurna people and that we respect their spiritual relationship with their country. We also acknowledge the Kurna people as the traditional custodians of the Adelaide region and that their cultural and heritage beliefs are still as important to the living Kurna people today.

Thank you, Professor Spurrier. My name is Tammy Franks and I am the chair of this committee inquiring into the repeal of sex work related offences in our Summary Offences Act and criminal code. To my right is the Hon. David Ridgway and above him is the Hon. Nicola Centofanti, joining us remotely. To my left is the Hon. Clare Scriven and the Hon. Irene Pnevmatikos. If you would like to, introduce yourself and your role and make any opening statements. We have received your submission, but if you would like to talk to that, as well, we will then move into questions and answers.

Prof. SPURRIER: Thank you very much. I am very pleased to be able to present this morning on this important topic because it really does have an impact on public health, not just for the health of sex workers but indeed for the health of our whole community in South Australia. People know that I am the Chief Public Health Officer. My legislative functions in that role are set out in the SA Public Health Act but include to develop and implement strategies to protect or promote public health. After advising the minister and the chief executive to make some public statements on these matters, I put in my submission and am very pleased to be able to speak today.

The particular concern that I would like to highlight to the select committee is that the current regulatory environment for sex workers in South Australia really is creating barriers. It is creating barriers in terms of access to appropriate health care, including screening and treatment services. It also creates barriers for sex workers to use safe sex practices and also to be able to be provided with effective peer education and health promotion resources.

The result is that we are at risk of increasing what I believe are preventable diseases—HIV and sexually transmissible diseases—in this state, despite the leadership shown by South Australian sex workers in managing their own health and safety at work, but I think as a society we need to do more.

Importantly, if we look from a purely biological perspective, bacteria and viruses do not discriminate on whether sexual activity is paid or unpaid—they don't know. To stop the transmission of sexually transmissible diseases across our whole community, safe sex practices need to be maintained in every setting, regardless of whether it's paid or unpaid. It's very important to realise, of course, that sex workers undertake sexual activity not only with clients, but then they will come into contact with other members of the public, as do their clients, and very quickly these diseases can spread through the whole community.

The United Nations Development Programme, the United Nations Population Fund, and the Joint United Nations Programme on HIV/AIDS all recommend the decriminalisation of sex work and sex work associated activities, along with legally enforceable workplace health and safety standards and legal protection. It's critical for improving health care and HIV prevention.

In Australia, we have the 2018-2022 Australian Fourth National Sexually Transmissible Infections Strategy. This strategy specifically listed as priority areas addressing STI-related stigma and discrimination and minimising the impact on people's health-seeking behaviour, and also that we need to be continuing to work towards addressing the legal, regulatory and policy barriers which affect priority populations and influence their health-seeking behaviours. This strategy specifically notes that one of the seven priority populations in Australia is sex workers, so we have, very clearly, a national guidance in this direction. Quoting directly from this strategy document:

Sex workers experience specific barriers to accessing health services, including stigma and discrimination and regulatory and legal issues—criminalisation, licensing, registration and mandatory testing in some jurisdictions.

Obviously, that's South Australia.

These can impede access to evidence-based prevention, testing, treatment and support services and can result in increased risk of STI, loss of livelihood, and risk to personal and physical safety.

Also to note, Australia has the Australian Eighth National HIV Strategy 2018-2022, which states exactly the same thing.

I would just like to briefly expand on some of the international evidence, the research evidence as to why legal barriers are a key determinant of protecting sex workers against HIV and STI, and, therefore, very importantly—which is really my take home message—that it reduces the risk of STI transmission to the rest of the population.

There is a landmark series in *The Lancet*. This is a very highly rated medical journal, and there was a paper by Shannon et al in 2015. They reviewed the existing literature to try to determine how much structural determinants, such as legal barriers or the environment in which people worked, as opposed to interpersonal behavioural factors, prevented HIV epidemics in female sex workers.

They looked at a whole range of different countries of different incomes and what they found was that, even if workers were provided with condoms and there was a rollout of antiretroviral therapy for HIV, HIV epidemics would not be significantly impacted unless interventions to promote access to safer sex work environments—so changing venues, management and policing policies—were also instituted.

They did some modelling, as well as looking at the literature, and their modelling clearly suggested that decriminalisation of sex work could have the greatest effect on the course of HIV epidemics across all settings—so it is obviously not just in sex workers but across all settings—preventing 33 to 46 per cent of HIV infections in the next decade, so very important globally.

Criminalisation of sex work creates an environment in which there is a lack of legal protection for sex workers' rights and it exacerbates barriers to HIV prevention, including poor working conditions, violence (including sexual violence), police harassment and discrimination. That was a very useful paper.

The other very useful paper I would like to mention is by Platt and colleagues, who work at the London School of Hygiene and Tropical Medicine. They undertook a systematic review of the international literature to better understand associations between sex work law and sex

workers' health. This was published since your last review of this legislation in 2015; this was published in 2018.

They found that sex workers who had experienced a recent arrest, prison time, displacement from a workplace, or extortion or violence from a police officer, had a three times higher chance of experiencing sexual or physical violence by anyone and were twice as likely to have HIV and/or an STI. Furthermore, repressive policing of sex workers was also significantly associated with condomless sex, so unprotected sex. That's the international literature.

We also have some more recent Australian research. Bi et al—Peng Bi works in South Australia at the University of Adelaide—reported in the *British Medical Journal* in 2015 that we had an epidemic of gonorrhoea occurring in heterosexual men, women and female sex workers in Adelaide between 2006 and 2010.

The most interesting part of this is that there was a temporal association between this increase and an increase in convictions against female sex workers in Adelaide during this period, with condoms seized as evidence for sex work. Convictions peaked at 78 sex work offences in the 2007-08 financial year, and that compared with an average of about 37.5 offences per year prior to that. These trends, importantly, were not observed in Melbourne or Sydney during the same period, so it wasn't likely to be driven by something else.

Another very useful and important Australian study is the LASH study, the UNSW Law and Sex Worker Health study. They investigated whether differing legislative approaches across three Australian jurisdictions were associated with different health outcomes for sex workers. There was a whole suite of findings, and they included this in a report to the New South Wales government in 2012 and the WA government in 2017.

Basically, this is a bit of a summary. Compared to sex workers in Melbourne and Sydney, reported condom availability in brothels was lower among sex workers based in Perth, where, like South Australia, sex work is prohibited, so that's a concern in itself. Secondly, compared to sex workers surveyed in Melbourne and in Perth, brothel-based sex workers in Sydney had better access to work health promotion programs.

Conversely, the Melbourne health promotion program did not service the unlicensed sector. I think people will understand that in Victoria it's a licensed approach but, that being said, if it's licensed there will be people who work outside that licensed sector, and those people were not able to access health promotion programs. In Perth, the program available was only accessed by a minority of brothels, by invitation only.

Lower STI rates have been reported among sex workers and their clients working in decriminalised or regulated environments compared to those working illegally. The other important thing, I think, coming out of this work with the experience in New South Wales, is that there is no evidence that the decriminalisation of sex work in 1995 increased the incidence of commercial sex work in New South Wales.

A bit closer to home, in South Australia, I have a number of my staff here today who work in the Communicable Disease Control Branch and they have reported to me that sex workers have said to them that the experience in Adelaide includes experiences and/or fear of discrimination from healthcare providers, which prevents many sex workers accessing care when they need it. They don't want to go to a healthcare provider and say the sort of work that they do because they know that it's illegal and they are worried about being turned in or frightened of being discriminated against.

Carrying safe sex supplies, such as condoms, or being found in possession of such has been used as evidence against street-based sex workers by police and the courts. This obviously means that some sex workers will feel compelled not to use those safe sex practices, and that means they will increase the risk of both acquiring and transmitting sexually transmissible diseases.

Also, there is a sense of disempowerment that creates barriers for sex workers trying to negotiate safe sex with their clients. For example, sex workers can be really easily manipulated to not use safe sex practices by clients if the clients are able to threaten reporting them on criminal charges. All of this means that we have fewer safe sex practices, which means that we transmit more sexually transmissible diseases to the rest of the community. Finally, there have been reports of fears

of arrest, harassment, discrimination, when reporting violence, including sexual violence or other crimes, which prevents them from contacting police.

That's the main part of the evidence I wanted to provide in terms of safe sexual practices, but I would like to make some final comments which pertain to the observations I have made during the COVID-19 pandemic. First up, internationally, the pandemic has increased the vulnerability of sex workers and it's created additional barriers to accessing health services, particularly in jurisdictions where sex work is criminalised. This has been noted internationally and by the WHO.

A 2020 United Nations report noted that, whenever and wherever possible, sex workers are responsibly self-isolating in response to government calls, and that's because of COVID. However, when they are excluded from COVID-19 social protection responses, sex workers are faced with putting their own safety and the lives of their clients but also their families in jeopardy.

Criminalisation has also created challenges to communicating COVID-19 health advice to sex workers in South Australia. My understanding is that the sex work industry developed their own health promotion resources and information during the pandemic, but they didn't benefit from the engagement that SA Health and my team and other agencies could provide the same as we did to other vulnerable communities and individuals. I think, really, as the Chief Public Health Officer, my role is to be able to reach everybody in our community with these important messages.

During the early part of the pandemic in 2020, my colleagues in other states, the other chief health officers, were talking about the health promotion activities their departments were undertaking and the resources they were developing for the sex industry. I was not able to do that here in South Australia because it's currently illegal for sex work to operate.

In addition, in the event of a COVID-19 outbreak in South Australia, if that was occurring in a sex worker or one of their clients, our current legislative framework acts as a deterrent for cooperation of these individuals with government authorities. In terms of being able to contact trace and control that outbreak, we already have these barriers in place. For example, when we rolled out QR scanning and coding, that doesn't apply in the sex work industry. I have real concerns about that.

Furthermore, during the pandemic—and this is a bit out of my swim lane, but I just would just like to mention it—those working in the sex industry did not have access to JobKeeper, whereas people did have access to JobKeeper in other states. I do think that that is a problem.

Also, when we were writing directions about public activities, and I was responsible for advising on those, we couldn't actually put in there about shutting down brothels because we don't have those in South Australia because they are illegal. There's that lack of visibility. I think that would have been very important and beneficial in terms of our pandemic control.

Wrapping up and reflecting on this, I just wanted to bring your attention to another issue. It just serves as an example of when we marginalise and we don't have visibility over everybody in our community. There is a current multijurisdictional, very serious outbreak of infectious syphilis in Indigenous communities, but now it also affects non-Indigenous people and it's spread across Australia. It started in Far North Queensland, and it started when there was a reduction in the screening programs for STIs and health promotion. It spread from northern Australia into South Australia, but it really is across the whole country now. We have had two cases of congenital syphilis in South Australia, which really is appalling.

What this shows to me is that if we take our resources away and we are not able to support everyone in our community, particularly vulnerable communities—and in this case a group of people who have no visibility in our community—then not only are they impacted but we have a risk of this absolutely preventable disease spreading across the whole of the Australian community.

To conclude, on public health grounds and because of the risk of further transmission of HIV and STIs in South Australia, there really are compelling reasons why sex work offences should be repealed in this state. As I said, this is not just to improve the health and safety of those engaged in sex work, and their clients, but it's really to reduce the risk posed by HIV and STI to our whole community. Thank you.

2 The CHAIRPERSON: Thank you very much for your very considered presentation. In your evidence you have touched on something that I was going to raise, which is during the pandemic we actually saw that with the public health address, not just with the shutdowns but indeed with the reawakening and reopening of industries, the sex industry in this state was seen as non-existent, yet we know the statistics tell us that there are somewhere around 2,000 people in this state working in this industry.

I've got a newspaper ad from today. It's on page 44 of *The Advertiser*. There are at least 27 ads in the newspaper today. As an interested watcher, I can tell you there was an ad every single day of the pandemic, even when we were at the height of our lockdown, for adult relaxation services, as they are called in the newspaper. I draw your attention to the little red box on the right-hand side that says 'Escorts to your door'. It is nine boxes up, and notes 'Happy Chappie. Covid-19 standards apply.'

Prof. SPURRIER: I can't see that one.

3 The CHAIRPERSON: It's very small, but I read it out for you. I would note that, as the industry, which is criminalised, grappled with COVID, many ads, and certainly those online, will say that COVID-19 standards apply. I have heard from those who work in brothels that they have QR codes. I have heard that they have been compliant with inspection of those QR codes in recent weeks, but then I have also heard in recent days of the checking of QR codes being used as an excuse to enter the premises and then it wasn't actually the business of SAPOL to be checking those codes but indeed to be investigating whether the premises was a brothel.

My question is: how does South Australia have an industry, which is criminalised, of some 2,000 people advertising in the paper every day address the pandemic?

Prof. SPURRIER: As I said in my presentation, I think if we are truly wanting to address the pandemic across the board we need to be reaching every single South Australian and every single occupation and business group. If there is a group that's being missed out for whatever reason, I think we need to be addressing that reason going forward. We are obviously not out of the pandemic. We've still got a long way to go, and of course in the future we will have further pandemics.

I have already provided information about how I saw things roll out during the pandemic. I actually think we should be very grateful to the sex work industry in South Australia that, regardless of their exclusion in terms of mainstream occupations, they actually did a lot of work themselves, educated themselves and supported each other during that period of time.

4 The CHAIRPERSON: Indeed.

5 The Hon. C.M. SCRIVEN: How was the legal industry of massage parlours dealt with during the pandemic?

Prof. SPURRIER: You would have to go back to one of our directions when we had a closure of massage. There was a particular definition used, but because sex work is not legal in South Australia we didn't use the term 'massage parlours'.

6 The Hon. C.M. SCRIVEN: Massage parlours were closed down, though, during the early times of the pandemic?

Prof. SPURRIER: I would need to go back to the direction and just double-check the wording. We certainly were mindful that there are places where massages are provided and certainly those were shut down along with other beauty therapy and personal care services, hairdressers and the like. But my recollection is we didn't use the term 'massage parlour'.

7 The Hon. C.M. SCRIVEN: It is good to know they were closed down. I would just point out, though I expect you are aware, that the provision of sexual services for money is not illegal in South Australia, but other offences around it are. In those jurisdictions that have legalised brothels, the evidence shows that roughly the same number of illegal brothels continue as those that are legalised. How would that have helped during the pandemic?

Prof. SPURRIER: My understanding is that New South Wales has moved to have sex work as part of a work health and safety framework so it is the same as any other job, therefore you don't have a licensed and an unlicensed premise, whereas in Victoria, Queensland and I think

Tasmania it's regulated and it's licensed but that means that not everybody and every institution becomes licensed, therefore there is still a section that is unlicensed and therefore goes under the radar.

8 The Hon. C.M. SCRIVEN: So that wouldn't have helped then, given that there are roughly half that are continuing to be illegal?

Prof. SPURRIER: That's right.

9 The CHAIRPERSON: What I would say is that the New South Wales system is a decriminalised system. The Northern Territory system is now a decriminalised system, which has recently changed from what you would call a legalised system, and the Victorian government has actually undertaken to investigate decriminalisation, moving from their regulated and legalised system there.

Prof. SPURRIER: From a public health perspective, having it decriminalised, where it moves into the same provisions as any other workplace with occ health and safety, is the best from a public health perspective in terms of disease transmission.

10 The Hon. C.M. SCRIVEN: If I could just quote from some experiences in both Germany and the Netherlands, the head of the German police stated that, despite it being entirely legal there, 'Brothels are run by pimps or criminal gangs and almost always have close ties to organised crime.' In the Netherlands, the national police force has stated that 50 to 90 per cent of the women in prostitution are trafficked and legalising did not prevent an increase in hidden or illegal prostitution. Organised crime has kept control of the industry and the situation is deemed out of control by authorities. Former Mayor of Amsterdam Job Cohen said:

...this is no longer about small-scale entrepreneurs, but those big crime organisations are involved here in trafficking women, drugs, killings and other criminal activities.

Given that decriminalisation and legalisation does not stamp out organised crime—in fact, a lot of evidence suggests it increases it—do you really think organised crime is going to be concerned about QR codes and the pandemic in that sense?

Prof. SPURRIER: Thank you very much for that quote. I would very much be interested to verify the basis on which that statement was made. I would be looking, as my articles have done, for a more systematic review of the literature and to actually look at some data that has been collected in a standardised way. I also think that Australia needs to look at its own experiences. We live in a different community to that of northern Europe. I also understand that New Zealand has decriminalised sex work as well. The comments I can make are that I don't have sufficient evidence in front of me to make any further comment on those statements.

11 The Hon. C.M. SCRIVEN: There is an alternative model, which was recommended by the European Parliament, which said in a 2014 resolution:

Prostitution and public health: Parliament stresses that prostitution is also a health issue, as it has detrimental health impacts on persons in prostitution, who are more likely to suffer from sexual, physical and mental health traumas, drug and alcohol addiction, and loss of self-respect, as well as a higher mortality rate, than the general population; adds and stresses that many of the sex buyers ask for unprotected commercial sex, which increases the risk of detrimental health impacts, both for persons in prostitution and for the buyers.

That is the European Parliament's 2014 resolution, 'Sexual exploitation and prostitution and its impact on gender equality'. In terms of all those additional health issues, which are suffered by persons providing prostitution, why do you think that this bill is going to assist that, given that it's likely to increase, or certainly not to decrease, the demand for prostitution and there is a lot of evidence suggesting that it would increase the demand for prostitution?

Prof. SPURRIER: Again, that's a statement from their parliament. What I would be interested in is the evidence that that is based on. Also, I bring it back to the evidence in Australia. We have one state that has decriminalised sex work and we also have New Zealand that have done the same. I think we need to be looking at any evidence of some of the things that you brought up in that statement occurring in Australia. I am not aware, particularly from the research that has been done in New South Wales, that that indeed is the case.

12 The Hon. C.M. SCRIVEN: The report 'Health care among street-involved women: the perpetuation of health inequity' reveals that prostitutes—and 'prostitutes' is the term that is used

in this report—with the lowest earning power are more susceptible to STIs and abuse from clients, and the lack of social capital and the perceived inability to turn clients away has real health implications.

I appreciate that, from what you have said, your assumption is that decriminalisation would increase the ability of women in prostitution to turn clients away; however, the New Zealand experience, from women who have been working in that, shows that decriminalisation results in megabrothels with lack of control by the women who are providing sexual access and lower prices able to be charged.

13 The CHAIRPERSON: Could you provide the reference for that assertion?

14 The Hon. C.M. SCRIVEN: Yes, it's evidence from personal communication.

15 The CHAIRPERSON: From personal communication of whom?

16 The Hon. C.M. SCRIVEN: Of Sabrina Valisce, who was a sex worker in New Zealand.

17 The CHAIRPERSON: There have been several parliamentary reviews and also some health reviews done in New Zealand of the decriminalisation system. Are you referencing those or are you referencing this particular individual?

18 The Hon. C.M. SCRIVEN: This particular quote is in terms of individual person communication.

19 The CHAIRPERSON: Thank you for clarifying that.

20 The Hon. C.M. SCRIVEN: My pleasure. But you will find that there is—

21 The CHAIRPERSON: You will find that the parliamentary review and the health systems review in New Zealand have different findings.

22 The Hon. C.M. SCRIVEN: I think we do need to listen to the women who have operated in the system, working in prostitution in New Zealand.

23 The CHAIRPERSON: I think we need to listen to the Chief Public Health Officer right now, rather than your quotes from unreferenced sources.

24 The Hon. C.M. SCRIVEN: Chair, am I able to ask my question or am I not?

25 The CHAIRPERSON: Yes, you are, and I am asking you to reference your source for your question, which was more a statement than a question.

26 The Hon. C.M. SCRIVEN: Which I have done.

27 The CHAIRPERSON: I don't want to be Tony Jones, but how about you ask the question?

28 The Hon. C.M. SCRIVEN: Thank you. So she says that sex buyers have to pay to go into the premises. That money goes to the brothel, not to the women, and the buyers are then angry they have to pay extra for the sex. The women, therefore, have to offer lower prices to be able to actually get a client. Sometimes to also get a client they have to offer sex without a condom or other unsafe practices. If she picks otherwise, if she doesn't get a client, she doesn't get any income at all. There are also widespread practices of the brothel owners demanding the women themselves pay extra fees for a huge number of items, further reducing their incomes.

Women who have operated under the system in New Zealand report they have to join these megabrothels because they can't compete as private operators, firstly with the advertising budgets of big business, and, secondly, with the undercutting of prices. The report that I mentioned links very closely the higher prevalence of HIV and STIs being linked with lower incomes. Given that decriminalising the pimps and brothel owners, which is what this bill does, reduces the income of women, isn't that likely to result in an increase in HIV and STIs?

Prof. SPURRIER: That was a very long question. What I would say is that we do need to go back to the literature. It is very useful to have qualitative information, and I agree with you it is good to hear the voices of women, but both qualitative and quantitative information does need

to be collected in a way that is robust and has a research focus. I have looked at the international literature and I would say that decriminalisation from a public health perspective does more to improve both the lives of women but also to reduce the spread of infectious disease in the community.

29 The Hon. C.M. SCRIVEN: So why do you think more jurisdictions across the world are going towards what is referred to as the Nordic model, where it is the sex buyers who are criminalised, as well as the pimps and brothel owners, rather than to the decriminalisation model that New Zealand has?

Prof. SPURRIER: I can't answer for other countries, but what I can say is that in Australia we put community first and we put the health and wellbeing of a whole population at the forefront. That's my job. My opinion still stands that decriminalisation, I believe, is the best way forward for sex work in terms of preventing transmission of sexually transmissible diseases and HIV.

30 The Hon. C.M. SCRIVEN: Does SA Health fund the sex industry network in anyway?

Prof. SPURRIER: I will have to take that one on notice.

31 The Hon. I. PNEVMATIKOS: Thank you for your submissions today, Professor Spurrier. I just have one question, because I think your submissions were quite comprehensive in any event. From a public health perspective, is there a basis to support a decriminalised model or a regulated model? Is there a difference?

Prof. SPURRIER: I think what we're seeing in Australia is that when there is a regulated model it can be quite expensive to set it up, and it also means that there are people who are not licensed and therefore still fall outside of that and become part of that criminal activity. I think that we have had New South Wales brave enough to go along a decriminalisation route. We have been able to look at the evidence of that. It has clearly shown it hasn't increased the amount of sex work as an occupation in that state. Having looked at the literature, my preference would be in favour of decriminalisation, not licensing.

32 The Hon. N.J. CENTOFANTI: Just a supplementary on the regulation of the sex industry: if in New South Wales it is not regulated per se, do you know who regulates from a planning perspective? Is that the Local Government Association?

Prof. SPURRIER: Yes, that's my understanding, that it is like other businesses, so it has SafeWork and it uses a work health and safety lens and paradigm.

33 The Hon. N.J. CENTOFANTI: And so SafeWork enter brothels quite regularly?

Prof. SPURRIER: I am not sure. Sorry to cut you off. I can't answer that question.

34 The Hon. N.J. CENTOFANTI: No, that's okay. I just have one more question, if that's okay. In your evidence, you have suggested a number of times that you believe that decriminalisation of sex work would improve or reduce barriers to healthcare access. Do you then think that a model which decriminalises prostitution or sex work for the prostitute or the sex worker but continues to criminalise it for the sex buyer or brothels would also improve access to health care?

Prof. SPURRIER: I think if we go back to the biology of all of this, as I said before, bacteria and viruses don't know and don't care and don't discriminate against whether somebody has paid to have sex, is being paid to have sex or is having sex without any money being exchanged. When we make anything a criminal activity, people are likely to not want to tell the authorities about it, which impacts our ability to prevent the spread of a disease in a community. I think both of those become problematic. When it's seen as an illegal activity, it tends to go underground, under the radar, and we can't use our normal contact tracing and health promotion and prevention activities.

35 The Hon. N.J. CENTOFANTI: Even if it's decriminalised for the sex worker?

Prof. SPURRIER: Yes, because you still have a client. I think what you're asking is if the client is undertaking illegal activity—is that what you're asking?—such as the Nordic model, for example?

36 The Hon. N.J. CENTOFANTI: Yes.

Prof. SPURRIER: That person, again, might develop symptoms of a sexually transmissible disease. They are considered to have done something that was illegal. They are less

likely to come out to the authorities and get tested, and therefore you've got a risk of it spreading to the rest of the community.

37 The Hon. C.M. SCRIVEN: I am not sure that I follow the logic of that, given that the man just has to say, 'Well, I've had sex.'

38 The CHAIRPERSON: Or woman, or person.

39 The Hon. C.M. SCRIVEN: The Hon. Ms Franks corrects me on saying 'the man' but, given that 98 per cent of clients are men, that's why I use that as a generalisation, but I do acknowledge the 2 per cent or less of non-men who are the clients.

A man can say, 'Well, I've had sex,' and report, so I'm not quite sure why you think that that would have a negative impact. The woman—95 per cent, of course, of the providers of sexual services for money are women—is not committing any offence so can certainly provide all the details of any symptoms and so on. I'm just not quite sure of your thinking along that line.

Prof. SPURRIER: Well, absolutely, because there are two who are participating in the activity and therefore transmission, if it has occurred, is going to be going both ways. Both of those people will then have sex with other people, and that's just what the world is like, and therefore that virus or bacteria will get passed on.

If one of those people is undertaking an activity that is considered criminal, when they ring up—or if they in fact go and get tested in the first place, which I think would be reduced if they think they are undertaking a criminal activity—and they get the test result, then it will be somebody in my team, if it's a notifiable condition, who needs to speak them. It is very difficult getting that information.

We have a really good relationship with people we call. We develop that care provider and patient confidentiality, and we develop that relationship. But you may recall during the pandemic how difficult that was for me to justify keeping that confidential because it can become in a public space. It is more difficult for people to be absolutely 100 per cent honest about their activities and who has slept with who if it's a criminal activity, regardless of whether that was the client or the person providing the service.

40 The Hon. C.M. SCRIVEN: But the person providing the service certainly wouldn't have that issue if it was only the client who was decriminalised.

Prof. SPURRIER: But that would only be one half of the puzzle. It takes two to tango.

41 The Hon. C.M. SCRIVEN: Can I just go back to a previous question in regard to funding for the sex industry network; you said you would take that on notice. If it is the case that funding is provided, could you provide the details of how much that is, over what period and for what purposes?

Prof. SPURRIER: Yes, certainly.

42 The Hon. C.M. SCRIVEN: Thank you very much. In your evidence you have talked about condom use, but you haven't compared to jurisdictions which do have the Nordic model. Have you looked at models such as the Nordic model?

Prof. SPURRIER: I haven't specifically. What I have provided you was the evidence that was most readily available to me, but I am happy to see whether we indeed have further information.

One of our problems in terms of trying to get evidence—and this goes back to the fact the sex work industry is illegal in South Australia—is we actually have difficulty having visibility over who is doing what. You could say, 'Well, sex workers use condoms more than other people.' Because we don't have visibility over that group, we can't report that information in any valid way.

43 The Hon. C.M. SCRIVEN: So you haven't looked at the other legislative models. I would just point out in your evidence, in your submission, you talked about—

44 The CHAIRPERSON: I would just point out that this is a specific bill that repeals the current prostitution, keeping bawdy houses and frequenting premises frequented by prostitutes—

legislation that this state has on its book. It is not a Nordic model bill. The Nordic model questions are actually irrelevant to these particular terms of reference.

45 The Hon. C.M. SCRIVEN: So, Chair, are you suggesting that the Chief Public Health Officer wouldn't have an interest in seeing what is the best outcome from a health perspective of different models of prostitution law reform?

46 The CHAIRPERSON: I would suggest that we are looking at particular laws here in South Australia that mean that people are prosecuted for carrying condoms, and that's possibly where the focus should be right now.

47 The Hon. C.M. SCRIVEN: Professor Spurrier, are you keen to have the best outcomes for public health and therefore laws reforming prostitution laws that have the best public health outcome? I assume that you would.

Prof. SPURRIER: 'Best public health outcome' is in terms of not just for the workers but for the whole community, including clients.

48 The Hon. C.M. SCRIVEN: Absolutely, which leads to my next question.

49 The Hon. I. PNEVMATIKOS: Can I just raise an issue, Chair? I note that the second lot of witnesses are here. If there are a lot of questions, maybe they should just be submitted in writing to the professor, if she is agreeable to that, and they can be addressed that way; otherwise, we could be going for hours.

50 The CHAIRPERSON: Yes.

51 The Hon. I. PNEVMATIKOS: This is not a second reading speech.

Prof. SPURRIER: Certainly, I am very happy to have a look at any other literature which you would like us to and give an opinion on it.

52 The Hon. C.M. SCRIVEN: Give an opinion on that, okay, thank you. There is going to be, I think, a lot of literature that is available that we would hope would be taken into account. I have perhaps one final question then, if the Chair's intention is to wind up this section; is that right?

53 The CHAIRPERSON: The Chair's intention is also to hear from the Law Society, and I think the committee is in the majority and agreement on that.

54 The Hon. C.M. SCRIVEN: I am just clarifying that that's your intention. Does an increase in demand for prostitution pose an increased public health risk?

Prof. SPURRIER: On what evidence are we suggesting there is an increased demand for prostitution?

55 The Hon. C.M. SCRIVEN: I am simply saying, as a general question, if there is an increased demand for prostitution, does that pose an increased public health risk?

Prof. SPURRIER: Let's just get back to the basic biology. If safe sex is practised, then there will not be an increased risk. If safe sex can be practised with prostitution—and at the moment I'm concerned that that's not the case—then that's the problem. It is not about the amount of prostitution but the fact that it can't be practised safely.

56 The Hon. C.M. SCRIVEN: But there is a lot of evidence to suggest that it's not practised safely even in a decriminalised environment, so that leads to my general question, which is whether increased prostitution services do result in an increased health risk in general.

Prof. SPURRIER: In fact, if we look at the sex industry, their use of condoms and their use of safe sex practices is, if anything, higher than the general community.

57 The Hon. C.M. SCRIVEN: I was talking about the comparison between a decriminalised environment or a legalised environment or the current environment.

Prof. SPURRIER: As I said before, having it decriminalised is the preferred option because, through that, we know that people work in a more safe environment, that's more safe for the workers, the clients and the whole population. That is a safer option to a regulated industry with licensing.

58 The Hon. C.M. SCRIVEN: But what you have said is you haven't compared the safety of that to the Nordic model; is that correct?

Prof. SPURRIER: That's correct. I am very happy to have the team look at the Nordic model and provide you with some advice back on that.

59 The Hon. C.M. SCRIVEN: Thank you.

60 The CHAIRPERSON: The Hon. David Ridgway, you didn't have a question at this point?

61 The Hon. D.W. RIDGWAY: No, it is very comprehensive, so thank you.

62 The CHAIRPERSON: Professor Spurrier, when you referenced the UNSW, did you mean the Kirby Institute specifically in terms of expertise in this area? Feel free to take that on notice. We have had previous representations from various parts of UNSW purporting to be—

Prof. SPURRIER: Yes, that's correct.

63 The CHAIRPERSON: —expert when not necessarily so. My final note is: during the pandemic I remember people saying, 'I would give somebody \$50 for a hug right now.' I remember having those conversations as we came out, and it's reported today that loneliness is one of the after-effects, if you like, of this particular pandemic. If there is any information that you have about that effect of loneliness, the impact of human touch and contact on mental health, certainly please take that on notice if SA Health has any work that they would like to present to the committee on that.

We thank you for your time today. As noted, the transcript will be forwarded to you for any clerical corrections. I understand that the Hon. Clare Scriven will have questions to put on notice to you.

Prof. SPURRIER: Thank you very much for your time.

THE WITNESS WITHDREW

WITNESS:

SANDFORD, REBECCA, President, The Law Society of South Australia

64 The CHAIRPERSON: Welcome to the meeting. The Legislative Council has given the authority for this committee to hold public meetings. A transcript of your evidence today will be forwarded to you for your examination for any clerical corrections. The uncorrected transcript of your evidence today will be published immediately upon receipt from Hansard, but the corrected transcript, once received from you, will replace the uncorrected transcript.

I advise that your evidence today is being broadcast via the Parliament of South Australia website. Should you wish at any time to present confidential evidence to the committee, please indicate and the committee will consider your request. Parliamentary privilege is accorded to all evidence presented to a select committee; however, witnesses should be aware that privilege does not extend to statements made outside of this meeting. All persons, including members of the media, are reminded that the same rules apply as in the reporting of parliament.

We would like to acknowledge that the land we meet on today is the traditional lands for the Kurna people and that we respect their spiritual relationship with their country. We also acknowledge the Kurna people as the traditional custodians of the Adelaide region and that their cultural and heritage beliefs are still as important to the living Kurna people today.

Good morning. My name is Tammy Franks. I'm the Chair of this select committee into the Statutes Amendment (Repeal of Sex Work Offences) Bill 2020. To my right is the Hon. David Ridgway and above him, joining us remotely, is the Hon. Nicola Centofanti. To my left are the Hon. Clare Scriven and the Hon. Irene Pnevmatikos. We have received and published your submission, so if you would like to introduce yourself and make any opening statements we will then move into questions and answers.

Ms SANDFORD: Thank you very much. I am Rebecca Sandford. I am the President of The Law Society of South Australia. Thank you for the opportunity to appear before the committee today. I will begin with some brief remarks and begin by saying that the society is supportive of the bill and maintains strong support for full decriminalisation of the sex industry in South Australia.

In our submission, removing the threat of prosecution for engaging in sex work is a significant positive step towards ensuring the safety, rights and wellbeing of all sex workers in South Australia. There continues to be a stigma associated with sex work, which contributes to prejudice against sex workers and leads to marginalisation of those workers and a denial of the support and protection to them that is afforded to other workers in our community. Repealing sex work offences can be a starting point in changing those views and in improving health and safety conditions for sex workers.

The Law Society was pleased to see that our previous submissions appear to have been addressed in this bill and in particular pleased to see that the proposed bill doesn't detail licensing requirements. As we have advised in our previous submissions, the society doesn't support a licensing scheme for sex workers and notes in this respect that decriminalisation means that sex workers will be subject to the same rights and protections as other members of the workforce and be able to rely on law enforcement for protection without fear of self-incrimination. In our view, the bill represents an opportunity to change societal views about sex work and to improve the health, protection and safety of workers in the industry as a result. I'm happy to take questions.

65 The CHAIRPERSON: In terms of the approach of this bill, you have attached previous submissions to various other pieces of legislation. I think this will now be the 14th attempt at reform of sex work laws in this state. This bill takes a different approach and it responds to some of the second reading speeches, where it was argued that the entirety of the reform required was too much for a private member's bill for the parliament to consider. This bill simply repeals the current Criminal Law Consolidation Act and Summary Offences Act criminal offences, if you like, and then puts the onus on the government, no doubt led by the Attorney-General but possibly with Health,

Industrial Relations and the like, to then step up and provide the infrastructure. Does the Law Society see that as a positive way forward in this debate?

Ms SANDFORD: We do. We have previously expressed our view that full decriminalisation is the best way forward and we maintain that position. In that respect, the current repeal provisions do achieve that end.

66 The CHAIRPERSON: Would you have any thoughts on the time frame? Should this bill pass the parliament, how long do you think a government would need to then implement the required codes of practice and regulations needed?

Ms SANDFORD: That may not be something for me to speak to in detail. I will say that there are already the existing SafeWork regulations that exist, the existing criminal law regulations that exist, to provide some support in terms of making sure that sex workers are afforded all the same protections as every other worker. It isn't simply a case of entering into a completely unregulated space. There are regulations that already exist so that, in terms of being able to assess whether there are additional specific provisions that need to be taken into account, while it would obviously in all cases be preferable for there to be swift movement on that, it's important to recognise that it's not a completely unregulated space.

67 The Hon. C.M. SCRIVEN: One of the impacts obviously of the proposed bill is that it would decriminalise pimps and brothel owners. Why do you see that as a step forward?

Ms SANDFORD: Ultimately, the view in terms of supporting decriminalisation is to make sure that the stigma in relation to the industry is removed and that people have comfort and security to be able to step forward and use the existing laws to gain additional protection. Does that answer the question?

68 The Hon. C.M. SCRIVEN: Well, it becomes protection for the pimps—do you see that as a positive thing?

Ms SANDFORD: Sorry, I'm not sure.

69 The Hon. C.M. SCRIVEN: Currently, pimping is illegal under our current law. This bill would decriminalise the pimps for that activity. Do you see that as a positive thing?

Ms SANDFORD: It simply ensures that sex workers are treated as workers in the same way that every other worker is treated. The same obligations apply in relation to employers as they would for any other employer, if that perhaps assists.

70 The Hon. C.M. SCRIVEN: So you don't have a problem with the concept of pimping and so on, it being a legal activity just like any other business?

71 The CHAIRPERSON: Could the member point to where the bill has the word 'pimping' in it?

72 The Hon. C.M. SCRIVEN: As you would be aware, pimping is a colloquialism.

73 The CHAIRPERSON: Oh, it's a colloquialism that you just inserted into a bill where it is not written in the bill; is that what your evidence right now is?

74 The Hon. C.M. SCRIVEN: Is the witness saying that she is not familiar with the concept of pimping; doesn't know what it means? If the Chair wants me to only use the exact words that are in the bill—

75 The CHAIRPERSON: Yes, I do wish you to use the exact words that are in the bill. I would like to, as a supplementary, talk about section 25A—Procurement for prostitution, which is currently in the Summary Offences Act. That notes, under the Summary Offences Act 1953:

- (2) A person engages in procurement for prostitution if the person—
 - (a) procures another to become a prostitute; or
 - (b) publishes an advertisement to the effect that the person (or some other person) is willing to employ or engage a prostitute; or
 - (c) approaches another person with a view to persuading the other person to accept employment or an engagement as a prostitute.

We have today received the published page 44 of *The Advertiser*, which has at least 27 advertisements under the adult relaxation section in the Classifieds, and they would appear to me to all be in breach of section 25A of the current laws. Does the Law Society have any views as to what the penalties should be for *The Advertiser* for publishing these ads?

Ms SANDFORD: That's a question I would need to take on notice.

76 The Hon. C.M. SCRIVEN: Are you aware of how many reports to police have occurred from people engaged in prostitution following decriminalisation in other jurisdictions?

Ms SANDFORD: I don't have that information before me, but I'm happy to take that on notice and see if we are able to provide any information on that.

77 The Hon. C.M. SCRIVEN: Are you familiar with how much is dedicated to SafeWork investigations or similar bodies in other jurisdictions following either legalisation or decriminalisation?

Ms SANDFORD: I don't have those details before me but, again, happy to take those and see what we can come back with.

78 The Hon. C.M. SCRIVEN: I think you will find that the evidence shows that the answer is very few in the first and little to none in the second. So it comes back to a practical problem of: even if decriminalisation promises to make things safe or safer for the women involved in prostitution and for the 5 per cent who are not women who are involved in prostitution as providers, that it does not actually result in improvements. Do you have a view on that?

Ms SANDFORD: My understanding at the moment is that the current legislative regime is difficult to police and that there is evidence around that. In terms of moving forward, as I say, we maintain that decriminalisation ensures that people have a greater ability to actually rely on the existing laws that are available to protect other workers in other industries, and we think that that is the way forward.

79 The Hon. C.M. SCRIVEN: Have you looked at other models of reform of prostitution legislation, particularly what is often referred to as the Nordic model, although there are different variances around the world of what that means and how it is implemented, where the person providing the sexual services is not criminalised but the purchaser is? I point out that an increasing number of jurisdictions around the world are moving towards that, particularly on the basis of gender equality and ensuring that women are not treated as sexual objects. Have you looked at those other models?

Ms SANDFORD: I will say that our submission is in relation to the bill currently being considered, so it doesn't look at those other models. Again, we are more than happy to take that on notice and come back with some additional comments in relation to that, but with the bill at the moment, as it relates to repealing the existing legislation in South Australia, our view is that full decriminalisation is the appropriate approach.

80 The Hon. C.M. SCRIVEN: When you say the 'appropriate approach'—and I think you said earlier the 'preferred approach'—is decriminalisation, that is, decriminalisation is the preferred approach to the current legislative position, not the preferred overall necessarily because you haven't looked at those other models. I am not trying to put words in your mouth, but is that a fair summary?

Ms SANDFORD: I would say that although our submission in this case focuses on the existing bill, the view overall is that decriminalisation is the most appropriate model. As I say, I am happy to come back and have another look at the Nordic model in more detail—that is not what our submission before this committee has addressed—but our view remains based on the evidence that we have seen and the literature available that decriminalisation is the model by which we are able to afford workers the most effective protections.

81 The Hon. C.M. SCRIVEN: If I can just explore that a little bit, I can't quite understand how you can come to that conclusion when you have said that you haven't looked at the Nordic model or Nordic models elsewhere in the world.

Ms SANDFORD: In the context of responding to the particular bill before the committee at the moment, I can't speak to those and I will take it on notice and come back.

82 The Hon. C.M. SCRIVEN: Just to clarify—and then I will move on and allow others to ask questions—I think what I said first then is correct: that your preference for decriminalisation is compared with the current model and perhaps the legalised or licensed model that you might see elsewhere, but you have not compared it to the Nordic model and therefore couldn't make an assessment of whether it is preferable or not preferable to that model?

83 The CHAIRPERSON: To which Nordic model does the member refer?

84 The Hon. C.M. SCRIVEN: To any of them.

85 The CHAIRPERSON: All of them or any of them?

86 The Hon. C.M. SCRIVEN: I think the Law Society hasn't looked at any of those other Nordic models; was that a correct understanding?

Ms SANDFORD: In the context of responding to this bill we have dealt with the proposal in this bill, which is the repeal, so I don't have a comparison of that in relation to the Nordic models, but I would be grateful for further detail as to what exactly is being referred to.

87 The Hon. D.W. RIDGWAY: Can I just make a quick observation: clearly you have given a submission based on the bill that we are looking at, and the Legislative Council hasn't asked this committee to go and look at all the different models. It is really specific around this bill. I appreciate that the Hon. Clare Scriven does wish to ask some questions, but none of the people making submissions will have addressed any models other than just this bill. You have done that with this bill, and that is great, but I think you will find, Ms Scriven, that all witnesses will be saying that they have not looked at that if they have just given a submission in the context of this particular piece of legislation.

I don't want to stifle debate, but I have heard Professor Spurrier say, 'I haven't looked at that because this is what I am looking at,' and now the Law Society the same. One of my old father's sayings was, 'We don't want to waste our time sawing sawdust.' I think that you will ask for a whole range of information that people will have to take on notice and it is not really the focus of this select committee.

88 The CHAIRPERSON: And your Nordic model could be one of many different options, so I think that if you want an inquiry into a Nordic model you need to put a Nordic model bill before the parliament.

89 The Hon. C.M. SCRIVEN: Perhaps we will come back out of session when we are not using our witness's time, but the Hon. Mr Ridgway, that is why I wanted to clarify that, when the Law Society is saying that decriminalisation is its preferred model, they are saying in preference to a licensing model or the current model we have in South Australia. It is not necessarily in preference to other models that are available. That is why I wanted that clarification, for the very point that you say that not everyone has looked at those other models.

90 The Hon. D.W. RIDGWAY: And we have not asked them to make a submission on other models.

91 The CHAIRPERSON: Indeed. Do other members have questions on the bill we are inquiring into?

92 The Hon. C.M. SCRIVEN: And on the submission.

93 The CHAIRPERSON: And on the submission from the Law Society?

94 The Hon. C.M. SCRIVEN: There is evidence from Germany and the Netherlands, and this is a quote—I don't know if you were present for the previous witness we had. The head of the German police stated that the brothels are run by pimps or criminal gangs and almost always have close ties to organised crime.

In the Netherlands, the national police force stated that 50 to 90 per cent of the women in prostitution are trafficked and legalising did not prevent an increase in hidden or illegal prostitution. Organised crime has kept control of the industry and the situation is deemed out of control by authorities. Have you looked at that sort of evidence of what the outcome has been in other jurisdictions, such as Germany and the Netherlands, as opposed to what one might think theoretically would be the outcome?

Ms SANDFORD: I think it is important to make sure that our laws are directed appropriately to the conduct that we are looking to try to have them directed to. There are existing criminal laws in relation to, for example, organised crime and other things. Our concern in addressing and looking at this particular bill has been about whether or not the existing criminal provisions meet their intended need, so maintaining criminality in relation to this particular work means maintaining a law that is not really directed towards a workplace safety concern or a law enforcement concern when there are already existing laws directed towards those purposes. In terms of looking at the specific statistics, I can't answer that.

95 The Hon. C.M. SCRIVEN: The evidence from that statement and others, of course—that's simply one—is that even with a decriminalised or legalised industry it doesn't lead to the outcomes that the Law Society is seeking, and I would suggest our community in general is seeking, because organised crime actually has a freer rein because the offences referred to previously, which I colloquially called 'pimping' and 'brothel owning', are then legalised or decriminalised, whereas currently they are not legal. So the outcomes—

96 The Hon. I. PNEVMATIKOS: What's your question? Are you presenting evidence as well?

97 The Hon. C.M. SCRIVEN: My question is: why does the Law Society have confidence that decriminalisation would lead to the positive outcomes that they are seeking when in jurisdictions such as Germany and the Netherlands that hasn't been the case and, instead, organised crime has increased in that industry?

Ms SANDFORD: I am going to take that question on notice, if that's okay.

98 The Hon. C.M. SCRIVEN: Also, the South Australia Police, I think it must have been last year—I have lost track a little bit with COVID—came out and said that their concerns with organised crime would increase. Admittedly, that was on a previous bill, but it had very similar and many of the same—

99 The CHAIRPERSON: Who from South Australia Police made that statement?

100 The Hon. C.M. SCRIVEN: I can't recall; it was covered quite widely in media, though.

101 The CHAIRPERSON: It was covered quite widely in media, but who from the South Australia Police made that statement?

102 The Hon. C.M. SCRIVEN: I can't recall. You are welcome to look it up, I'm sure.

103 The CHAIRPERSON: I have looked it up and I would like you to cite who from the South Australia Police made that statement.

104 The Hon. C.M. SCRIVEN: I just said I can't recall who it was. Are you suggesting that South Australia Police did not make that statement?

105 The CHAIRPERSON: I am suggesting it was reported without a name attached to it—'sources within'.

106 The Hon. C.M. SCRIVEN: That was the statement reported in media that came from SA Police. Their concerns were that organised crime would increase in the industry. Does the Law Society have a view on that?

Ms SANDFORD: Our expectation would be that if the industry is decriminalised then that makes it safer for people to come forward to be able to speak about other crimes. Our expectation would be that it would actually be easier to identify other criminal behaviour because people won't be concerned about the risk of self-incrimination for stepping forward to speak about other behaviour.

107 The Hon. C.M. SCRIVEN: I certainly agree that, intuitively, that would seem to be the likely outcome, which is why I asked my earlier question of how many reports to police have there been following decriminalisation in other jurisdictions. It appears that the Law Society hasn't had an opportunity to look at that, which is why I guess I query coming to the conclusion that it would result in the things you have just outlined.

Ms SANDFORD: As I said, I don't have that information before me, but I am happy to take that on notice and to provide some further detail.

108 The CHAIRPERSON: Just on that, I will provide the Law Society with some further detail on that particular series of statements in the media and some associated legal action for defamation that was taken with regard to that. Thank you so much for your time and your submissions today. There have been a few things taken on notice, which we will of course look forward to those being received within your capacity. A transcript will be forwarded to you for any clerical corrections. Thank you for your time and I thank you for your presence today.

Ms SANDFORD: Thank you for the opportunity.

THE WITNESS WITHDREW



Ref: 1123836

1 July 2021

Mr A Beasley
Secretary to the Committee
Parliament House
GPO Box 572
ADELAIDE SA 5001

By email: rsw@parliament.sa.gov.au

Dear Mr Beasley

Select Committee on Statutes Amendment (Repeal of Sex Work Offences) Bill 2020

1. I refer to my appearance on behalf of the Society before the above Committee on Monday 31 May 2021 to speak on the Society's submission to the Committee addressing the above Bill and its previous advocacy on the decriminalisation of sex work in South Australia.
2. A range of questions on specific matters were asked during my appearance, including in relation to consideration of:
 - 2.1 the outcomes of decriminalisation in specific overseas jurisdictions such as Germany and the Netherlands;
 - 2.2 the funding dedicated to SafeWork investigations or similar bodies in other jurisdictions; and
 - 2.3 the number of reports made to police by people engaged in sex work in other jurisdictions.
3. The Society suggests these questions would best be directed to other stakeholders. We also note the purpose of the Committee is to consider the Bill that it had been tasked with reporting on, which dealt with decriminalising sex work in a South Australian context, and in this regard query whether such questions may be outside the Committee's scope in any event.
4. The Society otherwise provides its response below to a specific question taken on notice from the Honourable Tammy Franks MLC, and to various questions pertaining to the "*Nordic Model*" taken on notice from the Honourable Claire Scriven MLC.

Penalty for breach of section 25A of the Summary Offences Act 1953 (SA)

5. The question taken on notice from the Honourable Tammy Franks as to the import of section 25A of the *Summary Offences Act 1953* ("the Summary Offences Act") arose in the context of the adult relaxation section in the classifieds in *The Advertiser*. Specifically, the question asked was as to the Society's views about what the penalties should be for *The Advertiser* for publishing those advertisements.

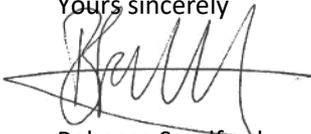
6. We note the penalty specified in section 25A of the Summary Offences Act is a fine of \$1,250 or imprisonment for 3 months for a first offence and a fine of \$2,500 or imprisonment for 6 months for a subsequent offence.
7. The Society does not express a view on whether, or what, penalties should be applied in the specific circumstances raised by the Honourable Tammy Franks. I advise, however, that the Society maintains support for the repeal of section 25A of the Summary Offences Act, as it does with all provisions pertaining to sex work in South Australia.

Society's position on the Nordic Model

8. The Honourable Claire Scriven queried whether the Society had, in providing its submission on the Bill, looked at other models of reform of sex work legislation, citing "the Nordic model" in particular.
9. The Society maintains its view that full decriminalisation is the appropriate approach in a South Australian context, but takes the opportunity to provide some responding comments addressing the Nordic model specifically.
10. The Society understands there have been various adaptations of the Nordic model in Sweden, Norway, Iceland and a number of other European countries. This model refers generally to a legislative approach whereby the criminalised conduct is that of the person engaging the sex worker, rather than the sex worker themselves. We understand this model is underpinned by an ideological viewpoint supporting an aim to abolish sex work completely, but note the overall body of literature does not suggest the Nordic model is particularly effective in meeting that aim in practice.
11. The Society formalised a position in support of decriminalisation of sex work in South Australia in 2015, however has also monitored sex work regulatory models elsewhere, including the Nordic model, since that time. The Society has not provided submissions which specifically consider the Nordic model because such a proposition or approach has, to the Society's knowledge, never been put to the South Australian Parliament.
12. However, the Society has taken this opportunity to consult its Criminal Law, Women Lawyers' and Human Rights Committees' specifically on the Nordic model and its potential application to a South Australian context. I advise the Society's Committees maintain the view that the Nordic model is not consistent with:
 - 12.1 ensuring the health, safety and agency of sex workers (and those who engage sex workers);
 - 12.2 abating the threat of exploitation of sex workers;
 - 12.3 ensuring sex workers are subject to the same rights as any other worker; and
 - 12.4 addressing the stigmatisation and long-held prejudicial views about sex workers.
13. Accordingly, the Society's strongly held view remains that full decriminalisation, as proposed by the Bill, is the appropriate approach to provide a safe working environment for sex workers in South Australia.
14. I otherwise note that the Society had, via email on 24 May 2021 (the week prior to the scheduled appearance), invited Members of the Select Committee to provide any planned questions or proposed areas of interest Members wished to discuss at the scheduled appearance, in the interests of facilitating a more constructive appearance by enabling the Society to be of greater assistance to the

Committee through being better prepared to answer questions relating to those specific matters on that date. However, the Society did not receive a response to this request, hence the need to take the above questions on notice during the scheduled appearance. We nonetheless trust these responses assist the Committee's consideration of this Bill, and will continue to watch the progress of this matter through the Parliament with great interest.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Rebecca Sandford', written over a horizontal line.

Rebecca Sandford

PRESIDENT