

Precarity Factors of Street-Based Sex Work Within Criminalised Contexts: A Study in Athens, Greece

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ABSTRACT

This community research study aims to investigate the intersecting self-identified precarity factors and identities associated with street-based sex work in a criminalised context, specifically in Athens, Greece, to improve the effectiveness of individualised care interventions. Interviews of 264 cis and trans female sex workers were conducted from June 2021 to December 2022, at a community day centre for sex workers in Athens. The community-based precarity index for sex workers was used, which was developed at the community centre, using factors identified by sex workers themselves. Street-based sex workers more commonly reported interrelated precarious factors, such as perceived problematic substance use, homelessness, client violence, medical issues, and trouble with the police. Trans and refugee identities were both associated with street-based sex work as well. Harm reduction, gender-affirmative and multilingual and multicultural interventions are essential in street-based sex work intervention programs. Decriminalisation of sex work is recommended to reduce the harms and risks associated with sex work.

Keywords: street-based sex work, precarious factors, female sex workers, community-based, decriminalisation of sex work

INTRODUCTION

Sex worker organisations worldwide define sex work as a contractual agreement on sexual services between consenting adults (GNSWP, 2021; UNAIDS, 2009). The term sex worker (Nagle, 2018) refers to a person who engages in commercial sex, consciously considering this occupation a source of income (Berg, 2014). Sex workers face health, social and human rights disparities (Armstrong, 2017; Marshall, 2016; Platt *et al.*, 2018; WRC, 2016) that can only be properly identified under an intersectional lens (Harari and Lee, 2021), taking a community-based approach, namely collaborating directly with sex workers to address their challenges, enhancing working conditions, and offering support (Garofalo Geymonat and Maciotti, 2016). By intersectional we mean the multiple, interconnected and changing social identities sex workers carry (Bowleg, 2021; Harari and Lee, 2021) and the stigma they face (Chandler *et al.*, 2022; Jackson-Best and Edwards, 2018), that construct distinctive experiences of adversities (Boonzaier, 2019; Rosenberg and Bakomeza, 2017). Among the many factors affecting the intersecting forms of oppression in sex work are the type of sex work and the social context, like the relevant legislation (Altay *et al.*, 2021). Of many sex work types (Harcourt and Donovan, 2005), the most prominent are brothel- and street-based (Platt *et al.*, 2018; Weitzer, 2017). Brothels are venues where sexual services are offered, usually operating in rented or privately owned apartments or houses, managed by individual sex workers or by third-party operators (Abel and Ludeke, 2020). Street-based sex workers, on the other hand, meet clients in several areas and usually negotiate with them on the street or in a vehicle (West *et al.*, 2022).

This present and retrospective qualitative and quantitative community research aims to identify the specific issues and propose individualised care interventions designed for street-based sex workers in Athens. It was conducted on one specific site, the Red Umbrella Centre in Athens, which is a day centre for sex workers, providing

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assistance, advocacy, and resources to promote their health, safety, and well-being, operated by the Greek Association of People Living with HIV, called Positive Voice. The centre, now situated at Michail Voda 200 in Athens, benefited from funding provided by the Bodossaki Foundation for a certain period during the research.

Specifically, the study examines how the identities that sex workers carry and how precarity factors they encounter are related to their frame of work, either street- or brothel-based. Aligning with the principles of community-based research this study's aim derives from the sex work community itself and the need to properly address the disparities and marginalisation street-based sex workers face. More specifically, we investigated how identities like motherhood, migration status and gender identity, as well as precarity factors, such as lack of social network, homelessness, substance use, police issues, client violence, and health and identification papers issues, are associated with each type of sex work.

LITERATURE REVIEW

Sex Work and Intersecting Identities

The sex work type that is within reach for females is, in many cases, related to the different intersecting identities they carry, like gender identity, migration status and motherhood (Goldenberg *et al.*, 2017; WRC, 2016; Zangger, 2015). The non-conforming gender presentation of female trans sex workers limits their employability (Blewett and Law, 2018; Grant *et al.*, 2011; Nadal *et al.*, 2014). It excludes them from the managed sector, including brothels (Zangger, 2015), so trans women mainly work on the street (Wickersham *et al.*, 2017). Migrants, on the other hand, mostly work in indoor venues rather than outdoors, even though they can still be arrested if they work in brothels (ICRSE *et al.*, 2019; Goldenberg *et al.*, 2017; Richter *et al.*, 2014). This seems to be due to the language barrier and lack of industry experience sometimes causing complete dependence on third parties where everything is arranged for them (GNSWP, 2017). Refugees, meanwhile, usually face challenges in the managed sector, with the more serious being their illegal status (Jamil *et al.*, 2012), as well as high levels of distress and pre-existing trauma, caused by the war(s) or oppression that have forced them to flee their homes (Bajwa *et al.*, 2017; Ben Farhat *et al.*, 2018). Finally, sex-working mothers report higher income (GNSWP, 2017; Renshaw *et al.*, 2015) and flexible working hours (WRC, 2016) among the advantages of street-based sex work. That is possibly the reason motherhood is a common identity among street-based sex workers (Duff *et al.*, 2015; Minescu *et al.*, 2022; Renshaw *et al.*, 2015). It also disproves the myth that sex workers, in general, are lonely individuals (Azhar *et al.*, 2020), which represents them as a threat to the social ideals of monogamy and heteronormative family structure (Poulios, 2018).

Sex Work and Precarity Factors

Street-based sex work, however flexible, relates to discrete, often intertwined precarity factors mostly due to the level of work-related exposure and intersectional adversities (Boonzaier, 2019; Easterbrook-Smith, 2020). Street-based sex workers more commonly report homelessness (Aidala and Sumartojo, 2007; Duff *et al.*, 2015; Minescu *et al.*, 2022), as indoor working may not be a feasible option for people without homes. Substance use is also more common among street-based sex workers, because of the strict rules and anti-drug culture of brothels that make the indoor work environment hostile to drug-using sex workers (Sanders *et al.*, 2009). Moreover, the dual criminalisation of street-based sex work and drug use renders sex workers vulnerable to arrests and police harassment (Tomko *et al.*, 2021; Wirtz *et al.*, 2015). Regardless of substance use, though, there is a long history of mistrust between street-based sex workers and the police, due to a history of hostile, unjust actions by police officers (Armstrong, 2017; Logie *et al.*, 2017) and wrongful arrests for vagrancy, public nuisance, stopping the flow of traffic, obscenity and so on (UNAIDS, 2009). Health inequities, experiences of violence and human rights violations are also more commonly reported by street-based sex workers. They are often displaced to isolated, unsafe work environments (Deering *et al.*, 2013; Goldenberg *et al.*, 2017), and their condoms or clean needles get confiscated by police, diminishing access to HIV prevention tools (Logie *et al.*, 2017; Zangger, 2015). Indeed, the prevalence of STIs and the increased risk of HIV infection amongst sex workers has been associated with criminalisation, sexual or physical violence from clients or intimate partners, and condomless sex (Blanchard *et al.*, 2018; GNSWP, 2022; Platt *et al.*, 2018).

It seems that the dangers sex workers face and the behaviours they adopt are associated with the relevant legislation model in place in various countries (Goldenberg *et al.*, 2017; Platt *et al.*, 2018; Tomko *et al.*, 2021), full decriminalisation is argued to create the safest market for sex work (Benoit *et al.*, 2021; Brooks-Gordon *et al.*, 2021). Partial criminalisation models, like the German-Dutch, criminalise some aspects of sex work. However, street-based sex work is almost always criminalised in such legal contexts (Weitzer, 2017), relieving states from their duties to protect sex workers' human rights, mostly by dehumanising the 'deviant others' (Wijers, 2022). Greece is yet another country where partial criminalisation means street-based sex work is illegal and therefore the

underground or invisible nature of the activity creates increased risks for sex workers (Jahnsen and Wagenaar, 2019; Law 2734/1999, 1999).

Zeroing in on Greece, the identities that sex workers bear seem to be as related to the frame of commonly assumed sex work as international research has shown in other countries. Trans identity has been shown to limit sex workers in street-based sex work and leave them vulnerable to violence and discrimination (Galanou, 2022). Additionally, Greek Nationality and off-street sex work seem to be operating as protective factors against the worsening mental and physical health of sex workers in the country, especially during the prolonged economic recession (Drydakis, 2022). As mentioned above, not only identities but also precarity factors relevant to work conditions can affect sex workers' mental health. A Greek study on female sex workers has recently revealed that poor mental health, along with perceived discrimination, is related to non-consensual condom removal (stealthing) which seems to be a quite common danger to sex workers (Apostolidou *et al.*, 2023).

THEORETICAL INSIGHTS

The concept of intersectionality is essential to understanding the intersecting identities and experiences of sex workers. It recognises that individuals embody diverse identities across various social, legal, and cultural dimensions, such as gender identity, ethnicity, and migration status, which intersect to shape their experiences, and enhance marginalisation and vulnerabilities (Altay *et al.*, 2021). In the case of sex workers, the intersection of identities often exacerbates individuals' exposure to discrimination, violence, and economic exploitation (Boonzaier, 2019; Rosenberg and Bakomeza, 2017). Full decriminalisation, encompassing street-based sex work, as explored in the feminist context, can be seen as a response to these structural vulnerabilities, recognising that punitive laws often contribute to sex workers' victimisation and lack of agency (Balfour, 2021; Benoit *et al.*, 2021; Brooks-Gordon *et al.*, 2021).

The interplay of sex work and feminism highlights the divergent perspectives within feminist movements. Decriminalisation advocates view it as a means to empower sex workers by affording them legal rights, agency, and the ability to negotiate safer working conditions (Flanigan, 2019). On the other hand, some feminists critique this approach, fearing that it may perpetuate exploitative industries (Comte, 2014). An intersectional approach is pivotal in challenging the stigma surrounding sex work. By acknowledging the unique experiences of marginalised sex workers, street or brothel-based, when it comes to either the identities they carry or the precarity factors they endure, it becomes evident that policy and advocacy must address the specific vulnerabilities and discrimination faced by these individuals (Altay *et al.*, 2021; Benoit *et al.*, 2021). Policy discussions should be informed by the nuanced experiences and perspectives of sex workers themselves, emphasising their agency and autonomy (Urada *et al.*, 2014).

DATA GATHERING

Procedure and Participants

A retrospective study was conducted using data that had been collected at Red Umbrella Centre in Athens. The centre operated under the scientific supervision of the Clinical Research Laboratory: Subjectivity and Social Bond of the National and Kapodistrian University of Athens. The present participant research and paper involve a collaborative effort between academics and researchers of the laboratory as well as employees and volunteers of the centre (Stavroula Triantafyllidou, Paraskevi Siamitrou, Evangelia Ntinopoulou, Anna Apostolidou, Anna Kouroupou, Sofia Kotsia, Anna Papadaki, Giorgos Papadopetrakis, Konstantina Papastefanaki, Aggeliki Sougle, Vaggelis Tsiaras) who are also members of the communities represented in the sample, i.e. sex workers, migrants, substance users, LGBTQ+ individuals etc. In accordance with standard authorship contribution guidelines we delineate each author's role in this paper. Dr Lissy Canellopoulos and Dr Antonios Poullos provided oversight for both the research endeavour and the writing process of the paper. Stavroula Triantafyllidou, Paraskevi Siamitrou, Evangelia Ntinopoulou, and Anna Papadaki conducted data analysis, drafted the initial manuscript, and contributed to subsequent revisions. Anna Apostolidou, Anna Kouroupou, and Sofia Kotsia managed data curation, while Giorgos Papadopetrakis, Konstantina Papastefanaki, Aggeliki Sougle, and Vaggelis Tsiaras coordinated project management tasks.

The data was collected by a trained member of the staff, a sex worker herself, from July 2021 to December 2022, as part of the initial interview conducted with every new visitor to the day centre. This interview was conducted using the icon-based, culture-free precarity index (Figure 1), which will be further explained in the next section. No reimbursement was given to the visitors for the interview, which was voluntary and anonymous. Participants were asked to give their informed consent to use the data for research purposes.











	Condom use
	Perceived problematic substance use
	Perceived problematic alcohol use
	Domestic violence
	Homelessness
	Medical issues
	Identification papers issues
	Client violence
	Police issues
	Lack of social network

Figure 1. Precarity index (Source: Red Umbrella Athens).

Notes.

Condom use refers to problems with clients refusing to use condom, negotiating its removal or removing it during the encounter without consent.

Perceived problematic substance use refers to problems with substances interfering with other parts of their lives and an increased level of dependence.

Perceived problematic alcohol use refers to problems with alcohol consumption interfering with other parts of their lives and an increased level of dependence.

Domestic violence refers to a pattern of abusive behaviors used by a person in a close relationship to gain power and control over them.

Homelessness refers to trouble finding or maintaining stable and safe housing, often resulting in them living on the streets, in shelters, or in temporary accommodations like hotels.

Medical issues refer to the inability of a person to access medical care, preventive measures, and a healthy lifestyle.

Identification papers issues refer to problems obtaining or renewing identification cards, passports, driver's licenses, birth certificates, or other essential documents with implications for access to various services, travel, employment, and legal matters.

Client violence refers to various forms of physical, emotional, or verbal abuse, aggression, or harm from their clients.

Police issues refer to troubles related to hostile, unjust actions and abuse of power, wrongful arrests, fines and pending formal charges or allegations of a crime or legal violation.

Lack of social network refers to limited or minimal connections or relationships with other people, such as friends, family members, or acquaintances whether they know about their profession or not.

Table 1. Descriptives of demographics ($N = 264$)

	n (%) ¹ or $M(SD)$
Gender identity	
Cis	210 (87.5)
Trans	30 (12.5)
Age	36.7 (10.70)
Motherhood	
Yes	171 (68.7)
No	78 (31.3)
Migration status	
Immigrants	161 (61.9)
Refugees	27 (10.4)
Local born	72 (27.7)
Greek language	
Understand/ Talk	170 (66.2)
Read/ Write	43 (16.7)
None	44 (17.1)
Ethnicity	
Greek	72 (27.4)
Balkan	74 (28.1)
Russian or East European	81 (30.8)
Middle Eastern & South Asian	17 (6.5)
Other ²	19 (7.2)
Native language	
Greek	71 (27.4)
Russian/ Slavic	150 (57.9)
Spanish/ Portuguese	6 (2.3)
Arabic/ Persian	3 (1.2)
English/ French	8 (3.1)
Bengali/ Urdu	15 (5.8)
Other	6 (2.3)

Notes. ¹Of the observed responses. ²Latin American, North African, sub-Saharan and West European.

It is essential to acknowledge that the present study has not been approved by an ethics committee. The absence of ethics approval does not signify a lack of commitment to ethical considerations but rather underscores the complex dynamics and impediments encountered during the approval process. In Greece, ethics committee approval is not mandatory for retrospective observational studies if the organisation conducting it has had general approval for such studies (De Sanctis *et al.*, 2022). However, factors such as the absence of a single national ethics review committee for research in Greece and the legal restrictions preventing the community organisation in question from establishing an ethics committee (Hellenic Parliament, 2018), contribute to the unattained ethical clearance. Not to mention the intricate nature of retrospective studies, analysing pre-existing data with no control over data collection methods and the committees' requirement for informed consent that is often an issue in community-based research (Kwan and Walsh, 2018). Despite these challenges, we remain dedicated to upholding ethical standards, ensuring the well-being and rights of the individuals and communities involved by carrying out the study following the ethical guidelines of the Helsinki Declaration on medical research involving human subjects.

In total, a number of 264 cis and trans female sex workers consented to participate and provided valid answers. Regarding gender identity, 87.5% were cis ($n = 210$) and 12.5% trans ($n = 30$) women, with an average age of 36.7 ($SD = 10.7$), as you can see in **Table 1**. Most of the participants were mothers (68.7%, $n = 171$). The sample consisted of 61.9% migrants ($n = 161$), 27.7% ($n = 72$) locally born and 10.4% refugees ($n = 27$). In total, 27.7% ($n = 72$) of the participants were from Greece, 28.1% ($n = 74$) were from the Balkans, specifically Romania, Albania and Bulgaria, 30.8% ($n = 81$) were from Russia and Eastern Europe, specifically Ukraine, Moldova, Hungary, Poland and Kazakhstan, 7.2% ($n = 19$) were Latin American, North African, sub-Saharan African and West European, and the remaining 6.5% ($n = 17$) were Middle Eastern and South Asian, from Turkey, Iran, Pakistan and Bangladesh. **Table 1** presents the participants' demographics.

Instruments

The icon-based, culture-free precarity index (**Figure 1**) used in the present study was developed by Red Umbrella Athens based on the early research feedback the community centre received in 2016 from sex workers themselves. Rooted in a genuine community-based research approach, the insights and perspectives shaping the index are exclusively derived from the lived experiences and reflections of sex workers themselves. More

Table 2. Descriptives of sex work information ($N = 264$)

	All participants n (%) ¹ or $M(SD)$
Type of sexwork	
Brothel	114 (43.2)
Street	150 (56.8)
Years of sexwork experience	6 (7.6)
Starting age	30.9 (11.2)
Other income	34 (24.5)
Part-time	43 (28.1)

Note. ¹Of the observed responses.

specifically, during their initial interviews, sex workers were asked to identify precarity factors in open-ended questions (What are the most frequent challenges you encounter on a regular basis?). The most commonly identified in their responses shaped the precarity factors index used in the present study. The index includes the following precarity factors: perceived problematic substance use, perceived problematic alcohol use, both in terms of interference with other parts of their lives and level of dependence, condom use, homelessness, lack of social network, medical issues, domestic violence, client violence, identification papers issues and police issues. The interviewees respond to dichotomous (yes/ no) questions whether they identify the above factors (e.g., Do you face problems with homelessness/ lack of social network, etc.). The internal consistency of the index was measured using Cronbach's alpha, which was calculated to be $\alpha = 0.646$, indicating an acceptable internal consistency. Perceived problematic alcohol use and domestic violence were omitted in the present study due to the high number of missing values.

A questionnaire designed by the researchers with demographic and sex work related questions was also used for data collection. In regard to demographics, the questions included age, gender identity, migration status and ethnicity. Sex work related information like the type of sex work, years of experience, starting age in the industry, other sources of income and part-time work status were also collected.

Statistical Analyses

We estimated absolute and relevant frequencies of the demographic and sex work related variables for the total sample (Field, 2017). The missing values identified were not systematically related to the data, as determined by chi-square tests, indicating that the missing data is random and not associated with the type of sex work, gender identity and migration status (Graham, 2009). Additionally, we assessed statistically significant relationships between demographic variables and the type of sex work (brothel or street-based) using *chi-square* tests. Finally, we examined statistically significant associations between the type of sex work (brothel or street-based) and the precarity factors reported by the participants using *chi-square* tests and effect sizes using Phi test when the degree of freedom was 1 and Cramer's V test when it was more than 1 (Roussos and Tsaousis, 2020). We decided not to use multivariate regression as the assumption of multicollinearity was not met, namely the independent variables were highly correlated with each other.

Statistical significance was set at 0.05 and the analyses were conducted using SPSS Statistics software, version 25.

RESULTS

Sex Work and Demographics

As shown in **Table 2**, our sample represented adequately the main sex work types as 43.2% ($n = 114$) worked in brothels and 56.8% ($n = 150$) worked in the streets. The average age was 36.7 years, ranging from 18 to 71 ($Mdn = 34$, $SD = 10.7$), the average years of work in the sex work industry were 6, ranging from 0 to 40 ($Mdn = 3$, $SD = 7.6$), and the average entry age in sex work was 31.1, ranging from 13 to 61, ($Mdn = 28.4$, $SD = 11.1$). Having other sources of income was reported by 24.5% ($n = 34$) and 28.1% ($n = 43$) reported part-time sex work.

Concerning gender identity (**Table 3**), trans women were more frequently street-based (96.7%, $n = 29$) rather than brothel-based (3.3%, $n = 1$), $\chi^2(1) = 21.52$, $p = .000$ with medium effect size ($Phi = -0.30$). Additionally, migration status was related to the type of sex work $\chi^2(1) = 58.22$, $p = .000$. More specifically, migrant sex workers were more likely to work in brothels (60.9%, $n = 98$), while refugee sex workers and local-born were more likely street-based (70.4%, $n = 19$ and 91.7%, $n = 66$ respectively), with a large effect size ($Cramer's V = 0.47$). Motherhood was not significantly associated with the type of sex work $\chi^2(1) = 3.55$, $p = .060$.

Table 3. Demographics and their association with the type of sex work ($N = 264$)

	Brothel SW ($n = 114$) n (%) ¹	Street SW ($n = 150$) n (%) ¹	Chi-square value	Phi/ Cramer's V	p
Gender identity					
Cis	101 (48.1)	109 (51.9)	21.52	-0.30	0.000
Trans	1 (3.3)	29 (96.7)			
Motherhood					
Yes	81 (47.4)	90 (52.6)	3.55	0.12	0.060
No	27 (34.6)	51 (65.4)			
Migration status					
Migrants	98 (60.9)	63 (39.1)	58.22	0.47	0.000
Refugees	8 (29.6)	19 (70.4)			
Local-born	6 (8.3)	66 (91.7)			

Note. ¹Of the observed responses.

Table 4. Precarity factors and their association with the type of sex work ($N = 264$)

Precarity Factors	Street SW ($n = 114$) n (%) ¹	Brothel SW ($n = 150$) n (%) ¹	Chi-square value	Phi	p
Perceived problematic substance use					
No	97 (46.6)	111 (53.4)	41.45	-0.40	0.000
Yes	53 (94.6)	3 (5.4)			
Condom use					
No	116 (56.3)	90 (43.7)	0.10	-0.02	0.754
Yes	34 (58.6)	24 (41.4)			
Homelessness					
No	105 (50.7)	102 (49.3)	14.51	-0.23	0.000
Yes	45 (78.9)	12 (21.1)			
Social network					
No	71 (51.4)	67 (48.6)	3.40	-0.11	0.065
Yes	79 (62.7)	47 (37.3)			
Health issues					
No	86 (50.6)	84 (49.4)	7.55	-0.17	0.006
Yes	64 (68.1)	30 (31.9)			
Client violence					
No	119 (52.9)	106 (47.1)	9.58	-0.19	0.002
Yes	31 (79.5)	8 (20.5)			
Police issues					
No	80 (45.5)	96 (54.5)	27.79	-0.32	0.000
Yes	70 (79.5)	18 (20.5)			
Identification papers issues					
No	112 (53.8)	96 (46.2)	3.53	-0.12	0.060
Yes	38 (67.9)	18 (32.1)			

Note. ¹Of the observed responses

Precarity Factors and Type of Sex Work

As shown in **Table 4**, the majority of women facing perceived problematic substance use (94.6%, $n = 53$) were street-based $\chi^2(1) = 41.45, p = .000$, with a medium effect size ($Pbi = -0.40$). Women facing housing problems were also more frequently street-based (78.9%, $n = 45$), $\chi^2(1) = 14.51, p = .000$ with a small effect size ($Pbi = -0.23$). Of those reporting medical issues the majority (68.1%, $n = 64$) were working on the street $\chi^2(1) = 7.55, p = .006$, with a small effect size ($Pbi = -0.17$). Client violence was also more common among street-based sex work (79.5%, $n = 31$), $\chi^2(1) = 9.58, p = .002$, with a small effect size ($Pbi = -0.19$), and trouble with the police (79.5%, $n = 70$), $\chi^2(1) = 27.79, p = .000$ with a medium effect size ($Pbi = -0.32$).

There were no significant associations between the type of sex work and the existence of a social network $\chi^2(1) = 3.40, p = .065$, condom use $\chi^2(1) = 0.10, p = .764$, or problems with legal identification papers $\chi^2(1) = 3.53, p = .060$.

DISCUSSION

The present study reveals that sex workers in Athens report severe precarity factors, they report multifactorial identities that bring about unique and complex challenges (Boonzaier, 2019). Moreover, street-based sex workers in particular were found to be in an even more precarious position, as street-based sex work was more commonly related to perceived problematic substance use, homelessness, health issues, client violence and problems with the police, as well as trans identity and refugee status.

In line with previous findings (Galanou, 2022; Wickersham *et al.*, 2017; Zangger, 2015), trans sex workers in Athens, in our study, seem to work almost exclusively on the street. This finding should be regarded through an intersectional lens, as trans women already face disproportionate levels of employment discrimination (Grant *et al.*, 2011). The fact that they are forced into the sex work industry (Nadal *et al.*, 2014) due to widespread transphobia from within all sectors of society (Blewett and Law, 2018; GNSWP, 2022; Logie *et al.*, 2017; Zangger, 2015) makes their further marginalisation within the industry even more dangerous. A similar intersectional view is needed for the findings related to refugees being excluded from the industry's managed sector, mostly due to not having identification papers (Jamil *et al.*, 2012). This finding, compounded with limitations in accessing employment and, even more crucially, legal protection, lack of legal status and increased risk of deportation constructs unique experiences of marginalisation and disadvantage (Boonzaier, 2019; Rosenberg and Bakomeza, 2017).

Motherhood, on the other hand, was not related to a specific type of sex work (Minescu *et al.*, 2022), possibly because the majority of our sample were people on the move, who often report leaving their children in their country of origin in order to be able to work long hours and provide for them (Karandikar *et al.*, 2022). Unfortunately, we have no such measures and data collected. Nonetheless, it is shown that many female sex workers in Athens as well are indeed mothers, like in many other cities (Blanchard *et al.*, 2018; Duff *et al.*, 2015; Minescu *et al.*, 2022; Renshaw *et al.*, 2015), despite popular detachment myths (Azhar *et al.*, 2020; Poulis, 2018). Stigma related to said myths, as well as criminalisation and other marginalising factors set obstacles to sex workers' maternal capacity and challenge their and their children's health, safety, well-being and human rights (Ma *et al.*, 2018).

In line with Drydakis' (2022) study, health issues were associated with street-based sex work in the present study. In general, the fact that street-based sex work is associated with perceived problematic substance use, homelessness, health issues, client violence and police issues paints a vivid picture of the current situation in street-based sex work in Athens, and the criminalisation of street-based sex work is highly problematic and impactful on their lives. Perceived illegal substance use associated with street sex work (Aidala and Sumartojo, 2007; Duff *et al.*, 2015; Minescu *et al.*, 2022), for instance, may be attributed to coping with stressors existing within the criminalised sector of the industry (Burnes *et al.*, 2012; Minescu *et al.*, 2022). Criminalisation also leads to health disparities, as street-based sex workers often limit their negotiation time and work in unsafe corners to avoid trouble with the police (Goldenberg *et al.*, 2017). The more commonly reported client violence and troubles with the police, as well as the health disparities, were related to the partial criminalisation legal model, which criminalises street-based sex work in most of the countries that implement it, including Greece (Jahnsen and Wagenaar, 2019; Weitzer, 2017). Client violence and police issues being reported more frequently by street-based sex workers show that indeed even partial criminalisation leads to unsafety (Blanchard *et al.*, 2018; GNSWP, 2022; Logie *et al.*, 2017; Platt *et al.*, 2018; Tomko *et al.*, 2021; Weitzer, 2017; Wirtz *et al.*, 2015; Zangger, 2015).

LIMITATIONS

The generalisability of the study's results is limited as the sample was collected in one location, in a sex workers' day centre in Athens, Greece. Therefore, sex workers from other urban or rural areas of Greece, or those that are unlikely to visit a sex workers' community centre are not represented here. Additionally, although motherhood was measured, child caregiving was omitted, which is important information in children stay-behind migration contexts. Finally, we were unable to control for confounding variables that may have affected the relationship between street-based sex work and specific identities and precarity factors, such as socio-economic status. Therefore, we present this research as specific to these empirical factors, although inferences can be drawn in terms of relevance to other cities.

CONCLUSIONS

This piece of local community research has identified how intersectional and diverse factors influence the lives of sex workers in a major European city. Welfare and care interventions designed for street-based sex workers should incorporate harm reduction practices, by offering safer injection kits or referrals to supervised consumption

sites (Lew *et al.*, 2022) and gender-affirmative care (Aldridge *et al.*, 2021), as well as multilingual and multicultural interpretation (Lifland *et al.*, 2022), housing and legal support (Minescu *et al.*, 2022).

Full decriminalisation of sex work is recommended in order to reduce exploitation, violence, and abuse in the current criminalised framework, and the harms and risks associated with street-based sex work in particular and all other forms in general (Benoit *et al.*, 2021; Brooks-Gordon *et al.*, 2021). Additionally, the need for service provision for sex-working mothers and their children is linked to the development of inclusive policies and legislative frameworks (Dodsworth, 2012). Especially considering that the current Greek law forces sex workers to be single (Jahnsen and Wagenaar, 2019; Law 2734/1999, 1999), which constitutes marital status discrimination and can be interpreted as a violation of human rights and labour laws.

Last but not least, it should also be stressed that all these precarity factors are interrelated. The lack of safe accommodation, for instance, is linked to more risky behaviours for street sex workers, intensifying violence and a sense of insecurity, substance use, trouble with the police and health problems (Aidala and Sumartojo, 2007; Armstrong, 2017; Duff *et al.*, 2011; Goldenberg *et al.*, 2020; Logie *et al.*, 2017; Minescu *et al.*, 2022; Shannon *et al.*, 2009). Therefore, interventions designed for street-based sex workers should make plans that take account of the multiple, intersecting factors at play that form interactive elements of a distinct experience (Boonzaier, 2019). Furthermore, by fostering cooperation between civil society organisations, a comprehensive and holistic approach can be developed to address the unique marginalisation faced by trans and refugee sex workers (Ciccia and Roggeband, 2021).

REFERENCES

- Abel, G. and Ludeke, M. (2020). Brothels as sites of third-party exploitation? Decriminalisation and sex workers' employment rights. *Social Sciences (Basel, Switzerland)*, 10(1), 3. <https://doi.org/10.3390/socsci10010003>
- Aidala, A. A. and Sumartojo, E. (2007). Why housing? *AIDS and Behavior*, 11(S2), 1–6. <https://doi.org/10.1007/s10461-007-9302-z>
- Aldridge, Z., Patel, S., Guo, B., Nixon, E., Pierre Bouman, W., Witcombm, G. L. and Arcelus, J. (2021). Long-term effect of gender-affirming hormone treatment on depression and anxiety symptoms in transgender people: A prospective cohort study. *Andrology*, 9(6), 1808–1816. <https://doi.org/10.1111/andr.12884>
- Altay, T., Yurdakul, G. and Korteweg, A. C. (2021). Crossing borders: the intersectional marginalisation of Bulgarian Muslim trans* immigrant sex workers in Berlin. *Journal of Ethnic and Migration Studies*, 47(9), 1922–1939. <https://doi.org/10.1080/1369183X.2020.1862646>
- Apostolidou, A., Triantafyllidou, S., Papadaki, A., Aslanis, A., Manolopoulou, A., Matis, S., Bekiaris, A., Ntinopoulou, E., Papadopetrakis, G., Papastefanakou, K., Protopapas, K., Siamitrou, P., Sougle, A., Vegkos, N., Antoniadou, A., Cannelopoulos, L. and Poullos, A. (2023). Prevalence of non-consensual condom removal (stealth) in female sex work and its association with perceived discrimination in Athens, Greece. *Psychology (Irvine, Calif.)*, 14(09), 1483–1496. <https://doi.org/10.4236/psych.2023.149085>
- Armstrong, L. (2017). From law enforcement to protection? Interactions between sex workers and police in a decriminalized street-based sex industry: Table 1. *The British Journal of Criminology*, 57(3), 570–588. <https://doi.org/10.1093/bjc/azw019>
- Azhar, S., Dasgupta, S., Sinha, S. and Karandikar, S. (2020). Diversity in sex work in India: Challenging stereotypes regarding sex workers. *Sexuality and Culture*, 24(6), 1774–1797. <https://doi.org/10.1007/s12119-020-09719-3>
- Bajwa, J. K., Couto, S., Kidd, S., Markoulakis, R., Abai, M. and McKenzie, K. (2017). Refugees, higher education, and informational barriers. *Refugee*, 33(2), 56–65. <https://doi.org/10.7202/1043063ar>
- Balfour, G. (2021). Decriminalizing domestic violence and fighting prostitution abolition: Lessons learned from Canada's anti-carceral feminist struggles. *International Journal for Crime, Justice and Social Democracy*, 10(4), 66–77. <https://doi.org/10.5204/ijcjsd.1993>
- Ben Farhat, J., Blanchet, K., Juul Bjertrup, P., Veizis, A., Perrin, C., Coulborn, R. M., Mayaud, P. and Cohuet, S. (2018). Syrian refugees in Greece: Experience with violence, mental health status, and access to information during the journey and while in Greece. *BMC Medicine*, 16(1). <https://doi.org/10.1186/s12916-018-1028-4>
- Benoit, C., Unsworth, R., Healey, P., Smith, M. and Jansson, M. (2021). Centering sex workers' voices in law and social policy. *Sexuality Research and Social Policy*, 18, 897–908. <https://doi.org/10.1007/s13178-021-00576-9>
- Berg, H. (2014). Working for love, loving for work: Discourses of labor in feminist sex-work activism. *Feminist Studies: FS*, 40(3), 693–721. <https://doi.org/10.1353/fem.2014.0045>
- Blanchard, A. K., Nair, S. G., Bruce, S. G., Chaitanya AIDS Tadegettava Mahila Sangha, Ramanai, S., Thalinja, R., Murthy, S., Javalkar, P., Pillai, P., Collumbien, M., Heise, L., Isac, S. and Bhattacharjee, P. (2018). A community-based qualitative study on the experience and understandings of intimate partner violence and HIV vulnerability from the perspectives of female sex workers and male intimate partners in North Karnataka state, India. *BMC Women's Health*, 18(1). <https://doi.org/10.1186/s12905-018-0554-8>

- Blewett, L. and Law, T. (2018). Sex work and allyship: Reflections on femme-, bi- and whorephobia in queer communities. *Feral Feminisms, Queer Feminine Affinities*, 7, 58–65.
- Boonzaier, F. (2019). Researching sex work: Doing decolonial, intersectional narrative analysis, in *The Emerald Handbook of Narrative Criminology*, (pp. 467–492). Dubai (United Arab Emirates): Emerald Publishing Limited. <https://doi.org/10.1108/978-1-78769-005-920191037>
- Bowleg, L. (2021). Evolving intersectionality within public health: From analysis to action. *American Journal of Public Health*, 111(1), 88–90. <https://doi.org/10.2105/AJPH.2020.306031>
- Brooks-Gordon, B., Morris, M., and Sanders, T. (2021). Harm reduction and decriminalization of sex work: Introduction to the special section. *Sexuality Research and Social Policy*, 18, 809–818. <https://doi.org/10.1007/s13178-021-00636-0>
- Burnes, T. R., Long, S. L. and Schept, R. A. (2012). A resilience-based lens of sex work: Implications for professional psychologists. *Professional Psychology: Research and Practice*, 43(2), 137.
- Chandler, C. J., Adams, B. J., Eaton, L. A., Meunier, É., Andrade, E., Bukowski, L. A., Stall, R. D. and Friedman, M. R. (2022). Intersectional experienced stigma and psychosocial syndemic conditions in a sample of black men who have sex with men engaged in sex work (BMSM-SW) from six US cities. *Journal of Sex Research*, 59(7), 920–930. <https://doi.org/10.1080/00224499.2022.2072799>
- Ciccia, R. and Roggeband, C. (2021). Unpacking intersectional solidarity: dimensions of power in coalitions. *European Journal of Politics and Gender*, 4(2), 181–198. <https://doi.org/10.1332/251510821X16145402377609>
- Comte, J. (2014). Decriminalization of sex work: Feminist discourses in light of research. *Sexuality and Culture*, 18(1), 196–217. <https://doi.org/10.1007/s12119-013-9174-5>
- De Sanctis, V., Soliman, A. T., Daar, S., Tzoulis, P., Fiscina, B. and Kattamis, C. (2022). Retrospective observational studies: Lights and shadows for medical writers. *Acta Bio Medica: Atenei Parmensis*, 93(5), e2022319. <https://doi.org/10.23750/abm.v93i5.13179>
- Deering, K. N., Lyons, T., Feng, C. X., Nosyk, B., Strathdee, S. A., Montaner, J. S. G. and Shannon, K. (2013). Client demands for unsafe sex: The socioeconomic risk environment for HIV among street and off-street sex workers. *Journal of Acquired Immune Deficiency Syndromes (1999)*, 63(4), 522–531. <https://doi.org/10.1097/QAI.0b013e3182968d39>
- Dodsworth, J. (2012). Sex worker and mother: managing dual and threatened identities: Sex worker and mother. *Child and Family Social Work*, 19(1), 99–108. <https://doi.org/10.1111/j.1365-2206.2012.00889.x>
- Drydakis, N. (2022). Sex workers' self-reported physical and mental health in Greece. A repeated cross-sectional study in 2009, 2013 and 2019. *Culture, Health and Sexuality*, 24(11), 1514–1530. <https://doi.org/10.1080/13691058.2021.1974562>
- Duff, P., Deering, K., Gibson, K., Tyndall, M. and Shannon, K. (2011). Homelessness among a cohort of women in street-based sex work: The need for safer environment interventions. *BMC Public Health*, 11(1), 643. <https://doi.org/10.1186/1471-2458-11-643>
- Duff, P., Shoveller, J., Chettiar, J., Feng, C., Nicoletti, R. and Shannon, K. (2015). Sex work and motherhood: Social and structural barriers to health and social services for pregnant and parenting street and off-street Sex Workers. *Health Care for Women International*, 36(9), 1039–1055. <https://doi.org/10.1080/07399332.2014.989437>
- Easterbrook-Smith, G. L. E. (2020). 'Not on the street where we live': Walking while trans under a model of sex work decriminalisation. *Feminist Media Studies*, 20(7), 1013–1028. <https://doi.org/10.1080/14680777.2019.1642226>
- Field, A. (2017). *Discovering Statistics Using IBM SPSS Statistics* (5th ed.). Los Angeles: SAGE Publications.
- Flanigan, J. (2019). The case for decriminalization, in J. Flanigan and L. Watson (eds), *Debating Sex Work* (pp. 169–241). Oxford: Oxford University Press. <https://doi.org/10.1093/oso/9780190659882.003.0005>
- Galanou, M. (2022). *Εργασία στο Σεξ* [Sex Work]. Athens (Greece): Πολύχρωμος Πλανήτης.
- Garofalo Geymonat, G. and Macioti, P. G. (2016). Sex workers speak. Who listens?, in G. Garofalo Geymonat and P. G. Macioti (eds), *Sex Workers Speak. Who listens?* London: Open Democracy.
- GNSWP (Global Network of Sex Work Projects). (2017). *Briefing Paper on Migrant Sex Workers*. Available at: https://www.nswp.org/sites/default/files/briefing_paper_migrant_sex_workers_nswp_-_2017.pdf. (Accessed 22 May 2023).
- GNSWP (Global Network of Sex Work Projects). (2021). *Briefing Paper on the Impacts of Anti-Rights Movements on Sex Workers*. Available at: https://www.nswp.org/sites/default/files/bp_impacts_of_anti-rights_movements_prf_03.pdf. (Accessed 22 May 2023).
- GNSWP (Global Network of Sex Work Projects). (2022). *Briefing Paper on How Sex Work Laws Are Implemented on the Ground and Their Impact on Sex Workers*. Available at: https://www.nswp.org/sites/default/files/how_sw_laws_are_implemented_their_impact_-_nswp_2019_0.pdf. (Accessed 22 May 2023).

- Goldenberg, S. M., Amram, O., Braschel, M., Moreheart, S. and Shannon, K. (2020). Urban gentrification and declining access to HIV/STI, sexual health, and outreach services amongst women sex workers between 2010-2014: Results of a community-based longitudinal cohort. *Health and Place*, 62, 102288. <https://doi.org/10.1016/j.healthplace.2020.102288>
- Goldenberg, S. M., Krüsi, A., Zhang, E., Chettiar, J. and Shannon, K. (2017). Structural determinants of health among im/migrants in the indoor sex industry: Experiences of workers and managers/owners in Metropolitan Vancouver. *PLoS ONE*, 12(1), e0170642. <https://doi.org/10.1371/journal.pone.0170642>
- Graham, J. W. (2009). Missing data analysis: Making it work in the real world. *Annual Review of Psychology*, 60(1), 549–576. <https://doi.org/10.1146/annurev.psych.58.110405.085530>
- Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L. and Keisling, M. (2011). *Injustice at Every Turn: A report of the national transgender discrimination survey*. (pp. 50–71). Washington: National Center for Transgender Equality and National Gay and Lesbian Task Force. Available at: https://transequality.org/sites/default/files/docs/resources/NTDS_Report.pdf. (Accessed 22 May 2023).
- Harari, L. and Lee, C. (2021). Intersectionality in quantitative health disparities research: A systematic review of challenges and limitations in empirical studies. *Social Science and Medicine*, 277, 113876. <https://doi.org/10.1016/j.socscimed.2021.113876>
- Harcourt, C. and Donovan, B. (2005). The many faces of sex work. *Sexually Transmitted Infections*, 81(3), 201–206. <https://doi.org/10.1136/sti.2004.012468>
- Hellenic Parliament. (2018). *Establishment of the University of Western Attica and Other Provisions*. Available at: <https://www.hellenicparliament.gr/UserFiles/2f026f42-950c-4efc-b950-340c4fb76a24/i-uniwest-eis-all.pdf>. (Accessed 29 December 2023).
- ICRSE, SWAN, Red Umbrella Athens, and Positive Voice. (2019). *Sex Working Community Mobilisation Training Report*. Available at: https://www.swannet.org/files/swannet/Sex%20Working%20Community%20Mobilisation%20Training%20Report_RedUmbrellaAthens2019.pdf. (Accessed 22 May 2023).
- Jackson-Best, F. and Edwards, N. (2018). Stigma and intersectionality: A systematic review of systematic reviews across HIV/AIDS, mental illness, and physical disability. *BMC Public Health*, 18(1), 1–19. <https://doi.org/10.1186/s12889-018-5861-3>
- Jahnsen, S. Ø. and Wagenaar, H. (eds) (2019). *Assessing Prostitution Policies in Europe*. London (England): Routledge. <https://doi.org/10.4324/9781138400238>
- Jamil, H., Kanno, S. S., Abo-Shasha, R., Alsaqa, M. M., Fakhouri, M. and Arnetz, B. B. (2012). Promoters and barriers to work: a comparative study of refugees versus immigrants in the United States. *The New Iraqi Journal of Medicine*, 8(2), 19–28.
- Karandikar, S., Knight, L., Casassa, K., España, M. and Kagotho, N. (2022). Economic considerations of migrant female sex workers in India. *Sexuality and Culture*, 26, 853–877. <https://doi.org/10.1007/s12119-021-09921-x>
- Kwan, C. and Walsh, C. A. (2018). Ethical issues in conducting community-based participatory research: A narrative review of the literature. *Qualitative Report*, 23(2), 369–386. <https://doi.org/10.46743/2160-3715/2018.3331>
- Law 2734/1999. (1999). Government Gazette A-161/5-8-1999. Available at: <https://www.e-nomothesia.gr/kat-ethon/n-2734-1999.html>. (Accessed 22 May 2023).
- Lew, B., Bodkin, C., Lennox, R., O’Shea, T., Wiwcharuk, G. and Turner, S. (2022). The impact of an integrated safer use space and safer supply program on non-fatal overdose among emergency shelter residents during a COVID-19 outbreak: A case study. *Harm Reduction Journal*, 19(1), 1–6. <https://doi.org/10.1186/s12954-022-00614-8>
- Lifland, B., Yi, C., Shetler, D. and Lo, E. (2022). Assessing equity in mental health outreach services to people experiencing unsheltered homelessness. *Journal of Health Care for the Poor and Underserved*, 33(3), 1177–1186. <https://doi.org/10.1353/hpu.2022.0105>
- Logie, C. H., Wang, Y., Lacombe-Duncan, A., Jones, N., Ahmed, U., Levermore, K., Neil, A., Ellis, T., Bryan, N., Marshall, A. and Newman, P. A. (2017). Factors associated with sex work involvement among transgender women in Jamaica: A cross-sectional study. *Journal of the International AIDS Society*, 20(1), 21422. <https://doi.org/10.7448/ias.20.1.21422>
- Ma, P. H. X., Chan, Z. C. Y. and Loke, A. Y. (2018). Conflicting identities between sex workers and motherhood: A systematic review. *Women and Health*, 59(5), 534–557. <https://doi.org/10.1080/03630242.2018.1500417>
- Marshall, R. (2016). Sex workers and human rights: A critical analysis of laws regarding sex work. *William & Mary Journal of Women and the Law: 2016 Special Issue: Combating Human Trafficking Through Law and Social Policy*, 23, 47–73.
- Minescu, A., Stoica, B., Zubareva, A., Leacy, B., Leahy, P., Paulon, T., Clifford, N., Pereira, N. and Berry, A. (2022). I must be some person: Accounts from street sex workers in Ireland. *UL Engage Reports*, 10.

- Nadal, K. L., Davidoff, K. C. and Fujii-Doe, W. (2014). Transgender women and the sex work industry: Roots in systemic, institutional, and interpersonal discrimination. *Journal of Trauma Dissociation*, 15(2), 169–183. <https://doi.org/10.1080/15299732.2014.867572>
- Nagle, J. (ed) (2018). *Whores and Other Feminists* (2nd ed.). Oxfordshire: Routledge.
- Platt, L., Grenfell, P., Meiksin, R., Elmes, J., Sherman, S. G., Sanders, T., Mwangi, P., and Crago, A.-L. (2018). Associations between sex work laws and sex workers' health: A systematic review and meta-analysis of quantitative and qualitative studies. *PLoS Medicine*, 15(12). <https://doi.org/10.1371/journal.pmed.1002680>
- Poulios, A. (2018). Υγειονομική βόμβα στην Kultur: το ασυνείδητο που μιλά από το πεζοδρόμιο [Health bomb in Kultur: The unconscious speaking from the streets], in L. Canellopoulou (ed), *Υποκειμενικότητα σε δοκιμασία στον σύγχρονο κοινωνικό δεσμό* [Subjectivity under trial in the contemporary social bond] (pp. 171–205). Athens (Greece): Pedion.
- Renshaw, L., Kim, J., Fawkes, J. and Jeffreys, E. (2015). Migrant Sex Workers in Australia, *Australian Institute of Criminology*. Available at: <https://archive.scarletalliance.org.au/issues/migrant-workers/>. (Accessed 8 April 2024).
- Richter, M., Chersich, M. F., Vearey, J., Sartorius, B., Temmerman, M. and Luchters, S. (2014). Migration status, work conditions and health utilization of female sex workers in three South African cities. *Journal of Immigrant and Minority Health*, 16(1), 7–17. <https://doi.org/10.1007/s10903-012-9758-4>
- Rosenberg, J. S. and Bakomeza, D. (2017). Let's talk about sex work in humanitarian settings: Piloting a rights-based approach to working with refugee women selling sex in Kampala. *Reproductive Health Matters*, 25(51), 95–102. <https://doi.org/10.1080/09688080.2017.1405674>
- Roussos, P. and Tsaousis, G. (2020). *Στατιστική Εφαρμοσμένη Στις Κοινωνικές Επιστήμες Με Τη Χρήση Τον Spss Και Τον R* [Statistics Applied to the Social Sciences Using SPSS and R]. Athens (Greece): Gutenberg.
- Sanders, T., O'Neill, M. and Pitcher, J. (2009). *Prostitution: Sex work, policy and politics*. Los Angeles (USA): SAGE Publications. <https://doi.org/10.4135/9781446220726>
- Shannon, K., Kerr, T., Strathdee, S. A., Shoveller, J., Montaner, J. S. and Tyndall, M. W. (2009). Prevalence and structural correlates of gender based violence among a prospective cohort of female sex workers. *BMJ*, 339, b2939. <https://doi.org/10.1136/bmj.b2939>
- Tomko, C., Nestadt, D. F., Rouhani, S., Silberzahn, B. E., Haney, K., Park, J. N., Galai, N., Logie, C. H. and Sherman, S. G. (2021). Confirmatory factor analysis and construct validity of the internalized sex work stigma scale among a cohort of cisgender female sex workers in Baltimore, Maryland, United States. *Journal of Sex Research*, 58(6), 713–723. <https://doi.org/10.1080/00224499.2020.1755821>
- UNAIDS. (2009). *UNAIDS Guidance Note on HIV and Sex Work*. Available at: https://www.unaids.org/sites/default/files/media_asset/JC2306_UNAIDS-guidance-note-HIV-sex-work_en_0.pdf. (Accessed 22 May 2023).
- Urada, L., Goldenberg, S., Shannon, K. and Strathdee, S. (2014). Sexuality and sex work, in D. L. Tolman, L. M. Diamond, J. A. Bauermeister, W. H. George, J. G. Pfaus and L. M. Ward (eds), *APA Handbook of Sexuality and Psychology, Vol. 2. Contextual approaches* (pp. 37–76). American Psychological Association. <https://doi.org/10.1037/14194-002>
- Weitzer, R. (2017). Legal prostitution: The German and Dutch models, in E. U. Savona, M. A. R. Kleiman and F. Calderoni (eds), *Dual Markets: Comparative approaches to regulation* (pp. 365–385). New York, NY: Springer International Publishing. https://doi.org/10.1007/978-3-319-65361-7_24
- West, B. S., Henry, B. F., Agah, N., Vera, A., Beletsky, L., Rangel, M. G., Staines, H., Patterson, T. L. and Strathdee, S. A. (2022). Typologies and correlates of police violence against female sex workers who inject drugs at the México-United States border: Limits of DE jure decriminalization in advancing health and human rights. *Journal of Interpersonal Violence*, 37(11–12), NP8297–NP8324. <https://doi.org/10.1177/0886260520975820>
- Wickersham, J. A., Gibson, B. A., Bazazi, A. R., Pillai, V., Pedersen, C. J., Meyer, J. P., El-Bassel, N., Mayer, K. H., Kamarulzaman, A. and Altice, F. L. (2017). Prevalence of human immunodeficiency virus and sexually transmitted infections among cisgender and transgender women sex workers in greater Kuala Lumpur, Malaysia: Results from a respondent-driven sampling study. *Sexually Transmitted Diseases*, 44(11), 663–670. <https://doi.org/10.1097/olq.0000000000000662>
- Wijers, M. (2022). Sex workers' rights are human rights: Or not? The art of stealing back human rights, in T. Sanders (ed), *Sex Work, Labour and Relations: New directions and reflections* (pp. 43–72). New York, NY: Springer International Publishing. https://doi.org/10.1007/978-3-031-04605-6_3
- Wirtz, A. L., Peryshkina, A., Mogilniy, V., Beyrer, C. and Decker, M. R. (2015). Current and recent drug use intensifies sexual and structural HIV risk outcomes among female sex workers in the Russian Federation. *International Journal of Drug Policy*, 26(8), 755–763. <https://doi.org/10.1016/j.drugpo.2015.04.017>

- WRC (Women's Refugee Commission). (2016). *Mean Streets: Identifying and Responding to Urban Refugees' Risks of Gender-Based Violence. Refugees engaged in sex work*. Available at: <https://www.womensrefugeecommission.org/wp-content/uploads/2020/04/Mean-Streets-Urban-GBV-Sex-Workers.pdf>. (Accessed 22 May 2023).
- Zangger, C. (2015). *For Better or Worse? Decriminalisation, work conditions, and indoor sex work in Auckland, New Zealand/Aotearoa* [Doctoral dissertation, University of British Columbia].
-

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