

Media Release

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Study reveals Australian women buy sex but society isn't okay with it

Sex workers say the number of Australian women buying sex is on the rise, but is society okay with this concept? Possibly not, says a new study which finds there are a common naivety and collective reluctance within society about the possibility of women buying sex – a notion that challenges the status quo.

Dr Hilary Caldwell, UNSW Visiting Fellow at the Centre for Social Research in Health conducted the study about women buying sex as part of her PhD. She says this collective view on women buying sex can be put down to people holding stereotypical notions of passive female sexual desire and that women buying sexual services are not perceived as very common.

Dr Caldwell interviewed 21 women who bought sex in Australia and 17 sex workers. The women who bought sex were from wide-ranging ages, educational and economic groups and were all Caucasian. Half the women interviewed said 'therapy' was the most common reason they bought sex. Some of the underlying conditions indicating a need for therapy included healing from intimate partner violence or childhood sexual abuse; depression and stress; and vaginismus, which is a condition that causes muscle spasm in the pelvic floor. Other reasons for buying sex included wanting 'to get off', 'to be indulged', and to feel safe with a professional who would respect boundaries and consent.

Dr Caldwell says all the women interviewed did extensive research before buying sex and overwhelmingly felt the services received were beneficial. The women said the experience was transformative and provided an unexpected boost to their self-esteem and mental health. It also allowed them to claim their sexuality and restore their confidence. "The women said they wanted the power to decide when, how and with whom to have sex. Women buy sex to get sex exactly how they want it, on their own terms and with a sexpert," Dr Caldwell says.

The study reveals participants compared buying sexual services to 'hooking up', however when engaging an escort they felt safer, saved time and effort and felt they had access to more options and expertise. They also took into consideration warnings about potential male escorts preying on naive female customers. The overall message was that buying sex could be fun and empowering but caution should be taken to research an escort's credentials.

Sex workers interviewed for the study said that the female market was increasing, but these women didn't only buy sex from men. There are vastly more female sex workers than straight male sex workers. Some female clients wanted a female escort, the sex workers said, and some women bought services that were not gender specific.

Dr Caldwell says assumptions about the need to abolish or reduce demand for sexual services must be questioned. Debates about sex work are taking place in the South Australian Parliament, while the Northern Territory has just reviewed their sex industry laws.

Participants of Dr Caldwell's study were worried that clients of sex workers were not consulted during the public inquiries into sex industry laws, expressing concern about their activities becoming criminalised. Dr Caldwell adds: "One sex buyer said she feels 'like a really strong feminist but there are other women out there who are going to shame me around this. They are pushing my story underground'. Decriminalisation of buying and selling sex would be an appropriate outcome to acknowledge the benefits of sexual services to society."

Dr Caldwell says we need to broaden the debate about the sex industry beyond a singular view of immorality or entitlement and include women as consumers to move towards gendered equality and acknowledge female sexual agency – a woman's ability to act on behalf of her sexual needs, desires and wishes.

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