

The B.E.T.S.Y. Project
Building Empowerment through Sex-working Youth
Created and kept alive by outreach workers and Industry Girls.

We are a team of dedicated outreach workers who serve sex workers and injection drug users on the North Shore of Massachusetts. We have an office in Downtown Lynn, which is open five days a week. We provide a safe space to receive services for people who are engaging in sex work and/or actively using drugs.

Our program does not require abstinence to access services or gain information.

We provide groups (groups take place one a week and are one hour in length), access to drug treatment, health services, HIV testing, risk reduction sessions for program participants (sex workers and injection drug users), risk reduction materials such as condoms, dental dams, female condoms, bleach kits, needle exchange information, access to sterile syringes and overdose prevention materials and trainings.

Our program also provides linkages referrals to all other CAB Health and Recovery Services programs such as: detox, outpatient counseling, adolescent residential program, long-term substance abuse treatment, methadone and Suboxone clinic, family support groups and re-entry services.

How was BETSY created? How has it evolved?

The BETSY Project serves women engaging in sex work of any kind. The project also provides services for those engaging in sex work and injection drug use. The BETSY Project was originally created to target young sex workers ages 18-24. As the program began to grow it became apparent there was a need for services among all sex workers in the area and the majority of sex workers the program was/is involved with are over the age of 20.

Although the name BETSY is still used the women in that were in the program when it began decided to give it their own name, they renamed the project Industry Girls. At that point we began to disregard the original target of only 18-24 year olds and outreached to all women in our area that were involved in sex work.

The program was created by first researching and applying for an appropriate grant. Information from the program demonstrated that this population was not receiving services specific to their needs. From this the program wrote for a private grant and received funds for the project.

The women that came to the program for services were invited to focus groups before and after the grant writing process to ensure that the program fit their group and individual needs.

The group members are consistently asked for feedback about how the program is going. Their information is valuable and most important when creating and sustaining a program. Members are able to provide input and work with staff to make changes to programming if they feel as though it is not meeting their needs.

What does the BETSY Program do for its participants?

How does the program use peer leaders?

The BETSY Project currently serves only female (biological or transgender) sex workers. The program aims to first create a safe environment for women to disclose their profession and access safer sex supplies without being asked for any personal information. Once the woman is engaged the project works with her to receive any of the offered services she may need. This can be anything from syringe access, an appointment for a pap smear, a voucher for a shower at the local YMCA, drug treatment or just some food and water.

The program offers constant positive reinforcement to the women engaged and pays close attention to any positive changes made. The program focuses on building women's self-esteem and self-respect in the hopes it will provide them with a foundation to make better choices. The program provides the following supplies for sex workers:

- Condoms (women in the program are asked for feedback about condoms they like and do not like)
- Dental dams
- Fingercots
- Female Condoms
- Non-latex Condoms
- Lubricant (flavored, water-based and silicone based)
- Feminine wipes
- Hand sanitizer
- Injection supplies

The program runs a weekly group that is open to sex workers and active injection drug users. In our community many of the women that engage in sex work are also injection drug users, which is why we open the group to both populations. Often times a woman may be willing to disclose her drug use but not her sex work. In this environment she does not have to disclose that she engages in sex work of some sort but still will receive the information about safety.

The program also stipends one or two peer leaders. The peers are women from the community that are either active or no longer active. They are stipend at \$15.00 an hour for up to 20 hours a week. The peer leader agreement is on the following page.

BETSY Program Peer Leader Agreement

I _____ have been selected by CAB outreach staff to work _____ a week as a peer leader. Below is a list of responsibilities that I have read and understand.

I understand that I will have two weeks to work as a peer leader and at the end of those two weeks I agree to sit down with my supervisor and discuss my progress and whether or not this is working out for me.

Responsibilities:

- Peer leaders are expected to come at scheduled times. If a peer leader can not make it into the office at the scheduled time they must call.
- Peer leaders must try not to be too high or incoherent while working. If a peer leader is too high to work they can make up the hours later.
- Peer leaders may not turn tricks, buy drugs on CAB time.
- Peer leaders may not carry drugs/syringes during street outreach with CAB staff.
- Peer leaders are supposed to set an example as they are representing CAB, peer leaders must respect other clients and leave any issues in the street.
- Peer leaders must protect the confidentiality of other clients.
- Peer leaders can only work while peer leader supervisor is in the office.
- Peer leaders may not borrow money if they have not worked the hours.
- Peer leaders must complete a peer leader sheet at the end of every shift as well as have it signed by the peer leader supervisor.
- Peer leaders must attend one meeting a month with peer leader supervisor and outreach team.

I have read the above responsibilities and agree to work as a peer leader.

Signed:

Peer Leader: _____

Supervisor: _____

The peer leaders work closely with program staff and often times end up being vital to the programs daily operation. Peers can provide many services at the program. Their level of responsibility ranges depending on their schedule and daily life. Staff takes into consideration the women's drug use. Some women are not using and others drug use is completely chaotic. Staff also considers the woman's schedule, does she have another job, is she still doing sex work and if so how can we best accommodate her. Peers can perform any or all of the following duties:

- Street outreach
- Group facilitation
- Maintain supplies; re-stock supplies (making injection supply kits, condoms kits etc.)
- Paperwork for the program
- Risk assessments with program participants
- Group intakes
- Make treatment referral calls with program participants
- Risk reduction sessions with program participants
- Provide feedback about programming
- Help staff design programming and rules for the space
- Public speaking if applicable and peer is willing

The program is loosely designed in order for it to be changed according to the population currently engaged. Our program participants change so often and not all groups need the same services. The program is flexible and incorporates the ideas of all the women that take part in it. The program follows all basic harm reduction principles both with active users and workers and those that seek services when they are abstinent.

The BETSY project relies heavily on word of mouth to outreach the program. Some street outreach is conducted but in our community but the police presence is strong and has driven most of the street work inside or out of the area.

The program posts information on escort websites including the address, phone number and services offered; a separate e-mail account was set up for this type of outreach. The BETSY project works closely with a community health nurse that is available to the women in the program every Wednesday afternoon. She works at the local health center and provides the women one-on-one time for health questions, Hepatitis vaccines, HIV medication services or support in reporting unfair treatment at the clinic. This connection has been extremely valuable for the program and the women. Many women who were previously unwilling to access healthcare became comfortable with the nurse and became willing to work with her to access care both emergency and preventative.

The program also has a connection with the same local clinic to provide testing services anonymously and free of charge. They will test for HIV, Hepatitis B, C and STI's all at one time with both a urine sample and blood draw. Rapid HIV testing is also available at the clinic.

The services listed below are available to all BETSY program participants as well as general program members:

- Syringe access (exchange dirty syringes for pharmacy gift card)
- Narcan distribution
- Condoms (flavored, non-latex available)
- Lubricant (flavored, water-based, silicone-based)
- Female condoms
- Dental Dams
- Bleach kits
- Sterile cotton, cookers, tourniquets, water
- Alcohol swabs, band-aids, bacitracin
- Wound care kits
- Split Safe Kits
- Fitpacks and other biohazard containers for syringes
- Vitamin E
- Hygiene supplies (toothbrushes, hand-wipes, toothpaste, combs, soap, mouthwash, washcloths etc.)
- HIV, Hepatitis, Vein Care, Drug Treatment, Overdose, Sex Work information available
- Bad Date Sheet
- Groups for male and female injection drug user's
- Groups for sex workers
- Harm reduction groups in drug treatment facilities (provides a link to harm reduction services for those who do not complete treatment or experience relapse)
- Treatment referrals
- HIV, Hepatitis and STI testing
- Healthcare enrollment
- Coffee and light refreshments
- Resource center (safe space for drop-in services)

Program incentives

When the original grant was written a part of it included providing stipends for the women that attended group. For most of us time is money and we expect to be compensated in some way when others ask for an hour or more of our time. The BETSY Project provides each group attendee a \$15.00 cash stipend after the group is over. There is a maximum of 10 women that get paid for each group, however more are welcome to stay for the information.

Food

A healthy and substantial meal is provided at every group. This was written into the grant and was budgeted for. We have a food budget every week of approximately \$75.00. Every week the group members are asked what they would like for lunch the following week. On holidays the project staff provide a special lunch and extra incentives such as hygiene supplies, home cooked desserts or gift cards.

Group sessions sign-up

Because there is a maximum of 10 women who will receive stipends in the group the sign-up sheet opens at 1:00pm. This is one hour before group begins. Each person must be present in the space in order to sign-up. If the first 10 sign in and other women come late we will add their information as well just in case someone else does not show up.

Groups per year

This group has a 48 group cycle. This means that we do one group session every week for one year with each topic being something different. However, some of the most important topics we cover are repeated throughout the year.

This curriculum was created after the program had been running for several years. Originally it was a 6 session series and after the 6 sessions a whole new group of sex workers were supposed to be recruited. This did not work for the population for many reasons. After debate with the state health department the program was allowed to write a new curriculum that made it possible for women to stay in the group all year if they needed to.

Group Topics

1. Overview
2. Group Ground Rules
3. Harm Reduction and Needle Exchange
4. Vein Care
5. Overdose Prevention and Overdose Management
6. Hepatitis A, B, and C
7. HIV and STI's
8. Safer Sex Work
9. Birth Control Options
10. Barrier Usage
11. Communication Skills
12. Accessing Healthcare and Communicating with Providers
13. Law Enforcement and Your Legal Rights
14. Understanding and Navigating Drug Treatment
15. Self-esteem, Respect and Empowerment
16. Women's Reproductive Health
17. Domestic Violence and Sexual Assault
18. Hygiene
19. Northeastern Nurses Van (This is specific to our community. It is a program from a local University that brings nursing students to the program to offer vaccines and health information)

These topics were chosen from the various group topics requested by members over the years the program has been running.

Group rules

The rules for the group were created by group members. Each member was given as much time as they needed to write down 6 group rules they felt were important. After the members were finished staff collected the information and created this list. The group members were also asked to create the consequences for breaking the group rules.

1. You must be on time for groups, no exceptions.
2. No cross-talking during group.
3. No cell phones during group.
4. No calling ahead to get on the group list.
5. You must be coherent enough to participate in group.
6. If you disrespect clients or staff during group you will have to leave immediately. (Ex. insulting, yelling at, swearing at, eye rolling, sighing in aggravation etc.)
7. If you have to be asked more than twice to be quiet/pay attention you will be asked to leave group.
8. Who you see and what you hear here let it stay here.
9. If you have issues with another client either leave it outside or talk with staff about it. **DO NOT BRING IT TO GROUP.**
10. Absolutely no buying, selling or using drugs on the property.
11. No leaving group once it has started.
12. Do not make drug deals in the space after or before group.

Program evaluation and using input from program participants.

The BETSY program is evaluated through our mandatory state reporting twice a year and evaluated and reported on to the funders once a year. The program keeps track of the following information:

How many women in the BETSY program...

- accessed drug treatment
- participate in the syringe access program
- get tested for HIV, HCV and STI's regularly
- get referred to healthcare including insurance enrollment
- took advantage of the supplies we offer
- attended more than two group sessions
- became abstinent from either sex work or drugs or both

Each woman that enters into the BETSY group is given a risk assessment. It is one page long and every question is optional. The questions cover demographic information, injection and other drug use information, sexual risk behaviors and overdose information. Each client is given a unique identifier so names are never used unless the woman uses a service where a name is required.

These risk assessments are then entered into a database that organizes the information so the program can see what risks behaviors are most prominent in the community. After this information is gathered staff and peers can focus and tailor the intervention towards those specific risk factors.

The BETSY project began after a grant proposal was written and a substantial amount of money awarded to begin programming. The original grant was written with information gathered from the community of sex workers already attending the outreach program and several focus groups held with sex workers ages 18-25.

From this information the program was created, however over time the program has been re-worked according to input from the participants. The population that attends the groups and program changes so often staff consistently reminds the women involved to:

- Make suggestions about the safe sex supplies and injection supplies we offer.
- Provide feedback about group topics
- Create group rules and help staff uphold these rules.
- Own the program, make it your own by being involved.
- Voice concerns about and provides positive reinforcement for staff and peers about programming, attitudes at the program and issues with other participants.

Without feedback from the people who use the services provided by BETSY the program runs the risk of providing unnecessary services or services that are not client-centered. A basic principle of harm reduction is to make sure program participants have a voice and active role in program creation and implementation. We value that principle and remind the program participants that their information is vital to the programs success.

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