

Keeping healthy and safe in the New Zealand sex industry

**GUIDANCE FOR BUSINESSES AND
WORKERS IN THE NEW ZEALAND
SEX INDUSTRY**

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Te Kāwanatanga o Aotearoa
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WORKSAFE
Mahi Haumarū Aotearoa



This guide provides practical advice on ways to identify and manage health and safety risks associated with working in the New Zealand sex industry.

ACKNOWLEDGEMENTS

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Keeping healthy and safe in the New Zealand sex industry

KEY POINTS

- The Health and Safety at Work Act 2015 applies to all businesses and workers in the sex industry in New Zealand.
- A business must manage the health and safety risks to their workers regardless of workers' contractual employment status or immigration status.
- Sex workers can refuse to provide sexual services at any point.
- Businesses must consult with workers when making decisions about how to manage health and safety risks related to their work.

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1.0

Introduction

IN THIS SECTION:

- 1.1 What are these guidelines about?
- 1.2 Who should read these guidelines?
- 1.3 How to use these guidelines

Working in the sex industry can expose workers to a variety of health and safety risks. These guidelines provide advice on how to manage these risks.

1.1 What are these guidelines about?

These guidelines provide advice on ways to manage health and safety risks for those operating businesses or working in the New Zealand sex industry. These guidelines can help business owners/operators and workers to meet their duties under the Health and Safety at Work Act 2015 (HSWA). They focus mainly on full-service sex work and adult entertainment (such as stripping).

The guidelines are grouped into five main areas:

1. Introduction to key health and safety legislation relevant to the New Zealand sex industry.
2. General principles of good health and safety management.
3. Good practice for managing health and safety risks in the New Zealand sex industry:
 - health risks
 - psychosocial risks
 - safety risks.
4. General workplace requirements.
5. Reporting and notifications.

1.2 Who should read these guidelines?

These guidelines are for any person conducting a business or undertaking (PCBU) that:

- offers commercial sexual services as defined in the Prostitution Reform Act (PRA)
- offers other forms of adult entertainment such as stripping.

This includes brothel operators, agency owners, self-employed sex workers, those providing accommodation specifically for sex work to take place, and owners of adult entertainment venues (strip clubs).

See [Section 2.1 Duty holders under HSWA](#) for further examples of PCBUs in the sex industry.

These guidelines may also be useful for health and safety professionals, or others working directly or indirectly within the New Zealand sex industry.

1.3 How to use these guidelines

These guidelines explain key health and safety duties under HSWA and related regulations. They provide examples of ways to meet those duties through:

- providing relevant examples of the kinds of hazards you should be looking out for
- providing guidance on ways to assess the risks those hazards may present
- giving examples of reasonably practicable ways to manage those risks.

Examples provided in these guidelines are not exhaustive, and PCBUs can adopt other reasonably practicable ways to manage risk if they are satisfied that those ways are equally or more effective than the examples provided in these guidelines.

In these guidelines, when reference is made to **PCBUs**, we primarily mean brothel/agency owners, strip club/agency owners, or operators of premises where sex work is taking place.

When reference is made to **workers**, we primarily mean sex workers or adult entertainers/strippers – regardless of their contractual status with the business they are working for or their immigration status.

Where the guidelines relate specifically to full service sex work only, the term **sex worker** is used.

Where sex workers are working as a part of a small operation of four or less sex workers operating independently but from the same location, each worker is a PCBU as well as a worker.

See [Section 2.1 Duty holders under HSWA](#) for more information about PCBUs and workers, and their duties under HSWA.

Use of ‘must’, ‘should’ and ‘could’

In these guidelines the word ‘must’ is used when referring to a practice or approach that is a specific legal requirement that must be complied with. The words ‘should’, and ‘could’ are used when referring to a practice or approach that is recommended but not specifically required by law.

Key terms

A list explaining the meanings of technical words, terms, and abbreviations used in these guidelines can be found in Section 10: Glossary of these guidelines.

2.0

Health and Safety at Work Act 2015 (HSWA)

IN THIS SECTION:

- 2.1 Duty holders under HSWA
- 2.2 PCBU primary duty of care
- 2.3 Worker duties
- 2.4 Duties of other persons at a workplace
- 2.5 Overlapping duties
- 2.6 Worker engagement, participation and representation
- 2.7 General Risk and Workplace Management Regulations (GRWM Regs)
- 2.8 What does reasonably practicable mean?
- 2.9 HSWA and the Prostitution Reform Act 2003 (PRA)

The Health and Safety at Work Act 2015 applies to all businesses and workers in the sex industry in New Zealand.

HSWA is New Zealand's primary work health and safety legislation. HSWA covers all work-related activities – wherever they take place. It includes physical and mental health and safety. WorkSafe New Zealand is the main regulator responsible for administering and enforcing HSWA.

The requirements of HSWA apply to all PCBUs and workers in the New Zealand sex industry. This section highlights aspects of HSWA that are particularly important to understand when operating a business or working in the New Zealand sex industry.

2.1 Duty holders under HSWA

A duty holder is a person who has a duty under HSWA. There are four types of duty holders – PCBUs, officers, workers, and other persons at workplaces.

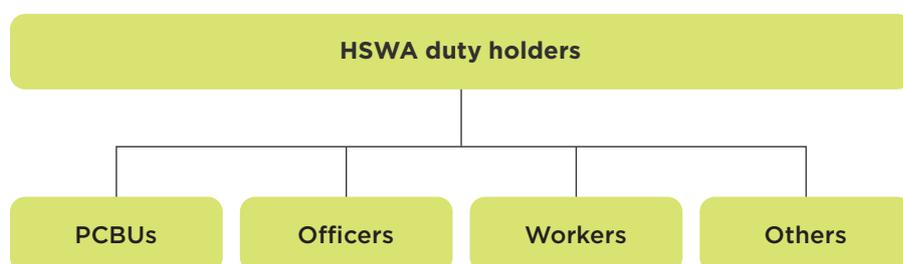


FIGURE 1:
HSWA duty holders

PCBUs

A PCBU is a 'person conducting a business or undertaking'. It includes businesses, companies, sole traders or self-employed people, and not-for-profit organisations.

Examples of PCBUs in the sex industry include:

- brothel owners/operators (for example, parlours, clubs, and lounges)
- escort agency owners/operators
- strip club owners
- stripping agency owners
- bondage and discipline, sadism and masochism (BDSM) house owners
- private/independent sex workers (self-employed owner-operators)
- owners/leaseholders of properties where sex work is the primary activity taking place at the property (includes sex work accommodation providers)
- operators of websites where sex workers advertise their services

- specialist health care services
- any other owner, operator of a business that offers sexual services
- industry organisations and unions – such as NZPC/New Zealand Sex Workers Collective.

In these guidelines, when reference is made to **PCBUs**, we primarily mean brothel/agency owners, strip club/agency owners, or operators of premises where sex work is taking place. In small operation situations – where there are four or less sex workers operating independently but from the same location – each sex worker is a PCBU as well as a worker.

Officers

An officer is a person who occupies a position within a business or organisation where they have significant influence over the management of the business or undertaking. Businesses/organisations can have more than one officer.

Examples in the sex industry include:

- company directors (even if they do not have 'director' in the title)
- any partner in a partnership (other than a limited partnership)
- any general partner in a limited partnership
- any person who occupies a position that allows them to exercise significant influence over the management of the business or undertaking.

Officers have a duty to exercise due diligence because they make decisions that can affect workers' health and safety.

Workers

Under HSWA, a worker is an individual who carries out work in any capacity for a business or undertaking (PCBU).

Examples of workers in the sex industry include:

- sex workers – whether as an employee, contractor, or sub-contractor
- adult entertainers/strippers – whether as an employee, contractor, or sub-contractor
- outcall only workers
- office/administration/reception staff
- cleaners
- security workers/drivers.

In these guidelines, when reference is made to **workers** we mean any worker working in the sex industry (such as sex workers or adult entertainers/strippers) – regardless of their contractual status with the business they are working for or their immigration status.

Where the guidelines relate specifically to full service sex work only, the term **sex worker** is used.

Where sex workers are working as a part of a small operation (four or less sex workers operating independently but from the same location), each worker is a PCBU as well as a worker.

Others

Under HSWA, **other people** are people who are present at a workplace but are not workers.

Examples of 'others' in the sex industry:

- clients/customers/patrons
- visitors
- visiting laundry/maintenance people
- members of the public who may be affected by the work activity
- casual volunteers.

For more general information see [Introduction to the Health and Safety at Work Act 2015 – special guide](#)

2.2 PCBU primary duty of care

A PCBU has the main responsibility for people's health and safety at work:

- PCBUs must ensure (so far as is reasonably practicable) the health and safety of the workers who work for them (or workers they influence) while they are working.
- PCBUs must also make sure (so far as is reasonably practicable) that other persons' health and safety is not put at risk by the work that they do.
- PCBUs must (so far as is reasonably practicable) have effective practices in place for providing and maintaining:
 - a work environment that is without risk to health and safety
 - safe plant and structures
 - safe systems of work
 - adequate facilities for the welfare of workers at work.
- PCBUs must provide (so far as is reasonably practicable) information, training, instruction or supervision to protect people from work-related risks to their health and safety.
- PCBUs must (so far as is reasonably practicable) monitor the conditions at the workplace and worker health to prevent illness or injury to workers related to the work that they do.
- Where worker accommodation is provided, the PCBU must (so far as is reasonably practicable) maintain the accommodation so that the worker is not exposed to risks to their health and safety arising from the accommodation.

Self-employed people (such as sex workers working independently from a private location) must take all reasonably practicable actions to ensure their own health and safety while at work

See [s36 Primary duty of care](#) of HSWA.

2.3 Worker duties

Workers have duties under HSWA. While at work, workers must:

- take reasonable care of their own health and safety, and take reasonable care that others are not harmed by something they do or do not do
- follow any reasonable health and safety instructions given to them by the PCBU, as far as they are reasonably able to
- cooperate with any reasonable business policy or procedure relating to the workplace's health and safety that they have been told about.

See [s45 Duties of workers](#) of HSWA.

For more general information see [Your rights and obligations](#) (available in multiple languages).

2.4 Duties of other persons at a workplace

Other people present at a workplace also have duties under HSWA. They must:

- take reasonable care of their own health and safety, and take reasonable care that others are not harmed by something they do or do not do
- follow any reasonable health and safety instructions given to them by the PCBU as far as they are reasonably able to.

See [s46 Duties of other persons at a workplace](#) of HSWA.

For more general information see [What to know about 'other persons' at work](#)

2.5 Overlapping duties

When two or more businesses operate together, for example at the same location or in a contracting arrangement, they must **consult, cooperate** and **coordinate** together to fulfil their primary duties of care.

A PCBU cannot contract out its duties. However, reasonable arrangements can be made with the other PCBUs to fulfil its duties. While a PCBU can enter into reasonable agreements with other PCBUs, this does not mean they no longer hold any health and safety responsibilities. They must still monitor the other business to ensure they follow through on what was agreed.

The more influence and control a PCBU has over a health and safety matter, the more responsibility it is likely to have. This is especially important in the sex industry where most workers are employed as contractors. The main business owners (such as brothel/agency owners or strip club/agency owners) generally have most of the control over health and safety matters in their workplace.

The PCBU with more influence and control (and the greatest share of the responsibilities) will usually be in the best position to manage the associated risks.

All PCBUs with overlapping duties should:

- discuss what work activities are being carried out
- agree on the degree of influence and control each business has
- agree on who will manage what and how it will be managed
- monitor and check how things are going on an ongoing basis.

Example 1

In a small operation (as defined in the PRA), all sex workers (who are PCBUs in this scenario) must agree together how risks will be managed regarding their operation/shared space, such as safer sex signage, cleaning, personal protective equipment (PPE), and security.

Example 2

A strip club that shares premises with a brothel – both businesses should work together, and with the workers, to make sure all risks to workers and others are being managed effectively.

See [s34 PCBU must consult other PCBUs with same duty](#) of HSWA.

For more general information see [Overlapping duties](#)

2.6 Worker engagement, participation and representation

PCBUs have two related duties to engage with workers and enable them to participate in improving health and safety. They must:

- ensure that workers' views on health and safety matters are asked for and considered
- have clear, effective, and ongoing ways for workers to suggest improvements or raise concerns on a day-to-day basis.

This is most often done by having workplace Health and Safety Representatives (HSRs) and Health and Safety Committees (HSCs).

Under HSWA, workers you must engage with includes:

- workers you employ directly
- independent contractors you have engaged.

[Section 7.5](#) of these guidelines goes into more detail about what worker engagement, representation and participation may look like in the New Zealand sex industry.

For more general information see [Worker engagement and participation](#)

2.7 General Risk and Workplace Management Regulations (GRWM Regs)

These regulations sit alongside HSWA and cover general requirements for workplaces that all PCBUs must meet. They cover things such as:

- workplaces and workplace facilities
- providing information, instruction, training and supervision for workers
- personal protective equipment (PPE)
- workplace first aid
- workplace emergency plans.

For more general information see [General requirements for workplaces](#)

[Section 7](#) of these guidelines goes into more detail about aspects of these regulations that are particularly important in the New Zealand sex industry.

2.8 What does reasonably practicable mean?

Health and safety duties need to be performed 'so far as is reasonably practicable'. There are two parts to 'reasonably practicable'. First consider what is **possible** in your circumstances to ensure health and safety. Then consider, of these possible actions, what is **reasonable** to do in your circumstances.

When deciding what is 'reasonably practicable', consider:

- How likely is the risk and how severe is the illness or injury that might result?
- What do you know, or should reasonably know, about the hazard or risk and ways of eliminating or minimising the risk?
- What is the availability of control measures, and how suitable are they for the specific risk?
- What are the costs of the control measure and are the costs grossly disproportionate to the risk?

For more information see [Reasonably practicable](#)

2.9 HSWA and the Prostitution Reform Act 2003 (PRA)

The [Prostitution Reform Act](#) was passed in 2003. The Act decriminalised prostitution in New Zealand and created a framework that:

- safeguards the human rights of sex workers and protects them from exploitation
- promotes the welfare and occupational health and safety of sex workers
- is conducive to public health
- prohibits the use in prostitution of persons under 18 years of age
- implements certain other related reforms.

HSWA provides for the overall health and safety of all workers and others affected by work activities. [Section 10](#) of the PRA states that when a sex worker is providing commercial sexual services they are at work and that such work is covered by the requirements of HSWA. The PRA has some specific safer sex/ public health requirements for sex work that are in addition to the general requirements of HSWA. Nothing in the PRA limits the requirements of HSWA.

Note: Under [section 83](#) of HSWA, all workers have the right to stop work if they believe it is unhealthy or unsafe. This is in addition to the right of sex workers to refuse to provide, or to continue to provide, a commercial sexual service to any other person, at any time under [section 17](#) of the PRA.

3.0

General principles of good health and safety management

IN THIS SECTION:

- 3.1 Risk management generally
- 3.2 Step 1: Identify the hazards
- 3.3 Step 2: Assess the risk
- 3.4 Step 3: Manage the risks
- 3.5 Step 4: Review control measures

Using a risk management approach can help you to identify and manage health and safety risks.

This section offers an introduction on ways PCBUs can apply good risk management principles in the sex industry. Where reference is made to PCBUs we primarily mean brothel/agency owners, strip club/agency owners, or operators of premises where sex work is taking place. Where four or less sex workers are operating independently from the same location (a small operation), each sex worker would be considered the PCBU in this and following sections.

3.1 Risk management generally

Risks to health and safety arise from people being exposed to a hazard. A hazard is a potential source or cause of harm (such as a physical injury, or harm to a person's health) and can include a person's behaviour.

As a PCBU, you must manage risks so that workers and other peoples' health and safety is not put at risk by the work that you do.

Good risk management can be broken down to four main steps:

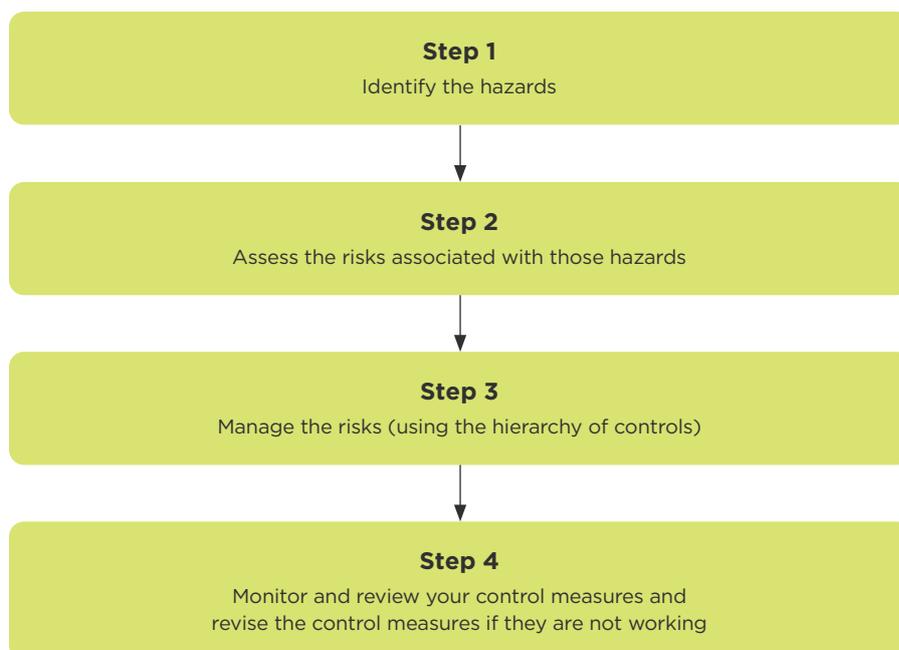


FIGURE 2:
Risk management steps

You must engage with your workers and their representatives at all steps of the risk management process. For more information see [Section 7.5 Worker engagement, participation and representation](#)

3.2 Step 1: Identify the hazards

With your workers, identify hazards that could be associated with the work activity.

Every work environment will be different. Looking at your work environment and thinking about things that could go wrong may help you to identify hazards. Reviewing your incident and injury records (including near misses) may also help identify hazards. Ask your workers what hazards they can identify.

Sections 4 to 6 of these guidelines provide examples of the kinds of hazards and risks common to the sex industry and possible control measures. They are grouped into health-related risks, psychosocial risks, and physical safety risks.

3.3 Step 2: Assess the risk

With your workers, you will need to carry out a risk assessment for each hazard you have identified. Things you should consider include:

| THINGS TO THINK ABOUT | CONSIDER |
|---|---|
| Who might be exposed to the hazard? | Who may be at the workplace, for example, workers, clients/customers, receptionists, security, cleaners, or drivers. |
| How could workers or others be harmed? | What type of harm might occur - this includes physical and mental health harm as well as the risk of physical injury. |
| How severe could the harm be? | Could someone be seriously harmed or injured? Could many people be harmed at once? |
| How often is the hazard likely to cause a risk? | How often could people be harmed - very rarely, sometimes, or frequently? |
| How could people's health be affected? | Could the affected person/people develop short- or long-term health problems? |
| How likely are these consequences? | What is the likelihood of somebody being harmed? |

TABLE 1: Things to think about when assessing risks

When deciding which risks to deal with first, prioritise risks with potentially significant consequences such as serious injury or death, chronic ill-health, or those with a high chance of happening.

3.4 Step 3: Manage the risks

You must take all reasonably practicable actions to eliminate or minimise the risks you and your workers have identified.

Think of what you can do to reduce the risk of harm. The different ways of managing risk are called control measures. Control measures can be ranked from those with the highest level of protection and reliability to the lowest. This ranking is known as the hierarchy of control measures. Using the hierarchy of control measures when choosing how to manage risks will help you to make sure you are using the most effective control measures first.

The best action is to eliminate the risk. If you are unable to eliminate the risk, then work down from the top of the hierarchy to find the next most reasonably practicable control measure.

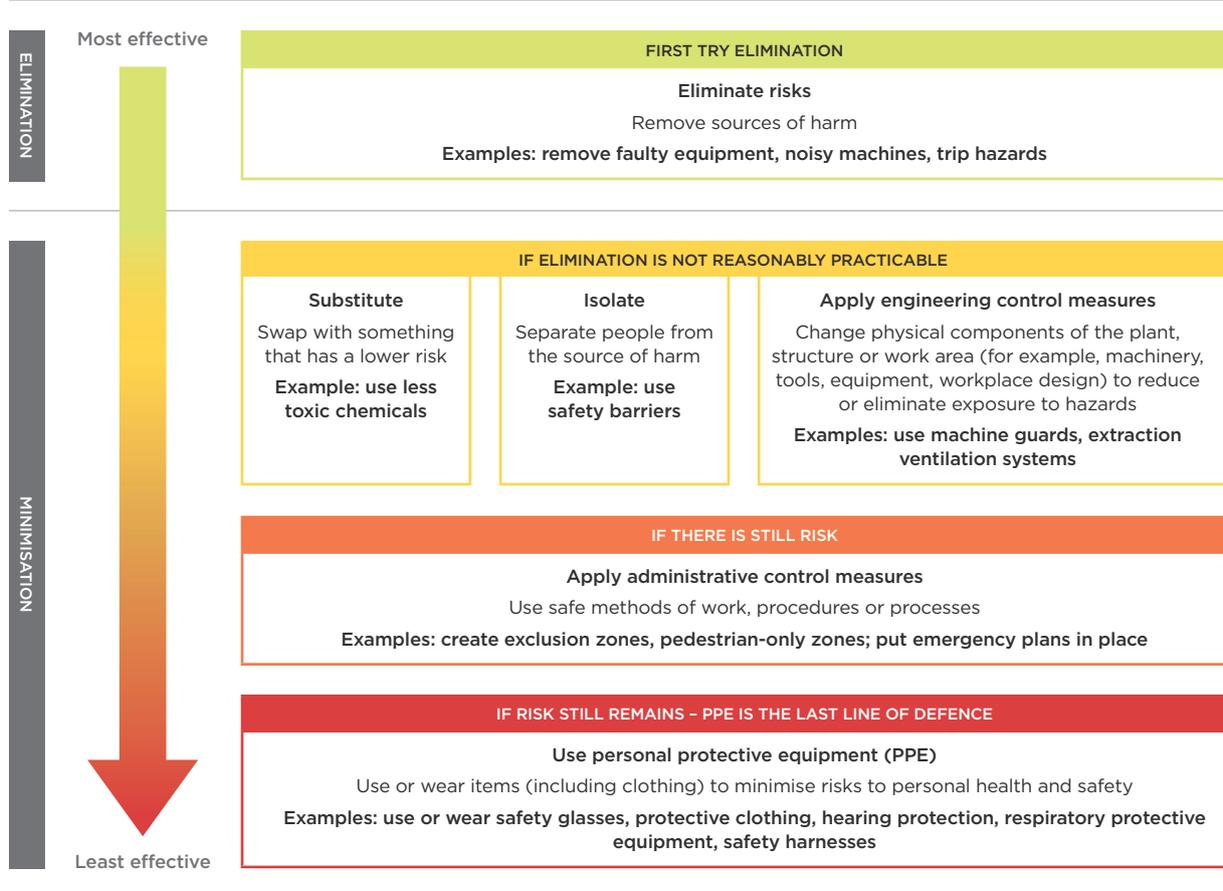


FIGURE 3: Hierarchy of control measures

Condoms and other types of barriers are considered PPE. PPE is typically considered the least effective control measure and should normally be considered last. However, when offering full-service sexual services, they must always be used regardless of what other control measures you put in place. This is a requirement of the PRA.

A combination of control measures can be used if a single control measure is not enough to eliminate or minimise the risk. When considering which control measures are the most suitable, check that the proposed control measure will not introduce new risks.

Sections 4 to 6 of these guidelines provide examples of the kinds of hazards and risks common to the sex industry and possible control measures. They are grouped into health-related risks, psychosocial risks, and physical safety risks.

3.5 Step 4: Review control measures

Check your control measures regularly to make sure they are working as planned. Control measures need to be regularly reviewed in consultation with your workers or their representatives to make sure they remain effective.

For more information see [Section 7.5 Worker engagement, participation and representation](#)

If your workplace or work activities change, you need to check that your existing control measures are still the most appropriate ones to use. If an incident happens or there is a near miss, you should also review your control measures and make changes if needed.

For more general information see [How to manage work risks](#)

4.0

Managing physical health risks

IN THIS SECTION:

- 4.1 Musculoskeletal harm
- 4.2 Fatigue
- 4.3 Smoking, vaping, drugs, and alcohol
- 4.4 Common infectious illnesses
- 4.5 Sexually transmitted illnesses (STIs)
- 4.6 Safer sex practices
- 4.7 STI screening
- 4.8 Reproductive health

PCBUs must have procedures and practices in place to manage health risks. No worker should suffer ill-health because of their work.

There are aspects of sex work that can pose a risk to a worker's physical health.

There can be immediate health harm or longer-term health harm. Harm can occur from a single exposure or event, or develop because of continual exposure over time.

This section covers some of the more common health risks faced by workers in the sex industry, and provides examples of control measures PCBUs can put in place to eliminate or minimise those risks:

- 4.1 Musculoskeletal harm
- 4.2 Fatigue
- 4.3 Smoking, vaping, drugs, and alcohol
- 4.4 Common infectious illnesses
- 4.5 Sexually transmitted illnesses (STIs)
- 4.6 Safer sex practices
- 4.7 STI screening
- 4.8 Reproductive health

Examples of risks and control measures provided in this section will not cover all possibilities. There may be other health-related risks that are not mentioned in these guidelines that you will need to identify and manage as well. You can apply control measures that are not suggested in these guidelines, if you are satisfied that they provide equal or better protection.

4.1 Musculoskeletal harm

Musculoskeletal disorders are injuries and conditions that affect muscles, ligaments, bones, tendons, blood vessels and nerves. Areas particularly at risk include the back and neck, hands, arms and shoulders, hips, legs, and feet. Common symptoms can include fatigue, aching or sore muscles, joint pain, numbness or disturbed sensation, weakness, and stiffness.

Musculoskeletal harm can be caused by a single injury or develop over time due to repeated exposure to a risk factor.

Examples of activities in the sex industry that may increase the risk of musculoskeletal harm include:

- sustained awkward postures while providing sexual services
- repetitive movements, such as those involved in providing sexual services, performing stage routines, or texting clients for long periods

- using restrictive tools and equipment while providing services
- moving heavy or bulky furniture or equipment
- high-force activities such as pole dancing
- working in stressful conditions.

For more general information see [Musculoskeletal disorders](#)

Things that can be done to manage the risk of musculoskeletal harm include:

| CONTROL MEASURE | EXAMPLES |
|---|---|
| Make sure furniture and equipment is fit-for-purpose, adjusted properly, and well maintained | <ul style="list-style-type: none"> - Make sure all beds and other work equipment support the back and allow for a variety of services to be performed without strain or discomfort. - Where possible, equipment like beds and massage tables should be easily adjustable. Workers should be trained on how to adjust them to a comfortable height and work position. - Train workers in the safe use of all equipment, particularly equipment used in B&D (bondage and discipline), and S&M (sadism and masochism) fantasy work. - Make sure all equipment is regularly maintained. |
| Provide information on safe techniques | <ul style="list-style-type: none"> - Make sure workers know correct massage techniques that will keep themselves and their clients from getting soft tissue injuries. - Encourage workers to shift their posture regularly when doing repetitive tasks. - Workers should focus on maintaining overall fitness and flexibility to help reduce the chances of injuries happening. |
| Keep work areas comfortable | <ul style="list-style-type: none"> - Keep the workplace at a comfortable temperature for the services provided. For more general information see Managing thermal comfort at work - Provide secure and private surroundings with appropriate support arrangements. |
| Allow for breaks in work activities | <ul style="list-style-type: none"> - Plan breaks or rotate between repetitive and non-repetitive activities. For example, repetitive massage which could cause overuse injury to the hands, arm and back could be alternated with other (non-repetitive) activities. - Workers should be allowed to end a shift early if they are feeling muscle soreness or other discomfort such as tenderness from anal or vaginal friction, burns, or tearing. - Allow longer breaks between stage routines especially if workers are experiencing muscle or joint tenderness - Enable workers to take time off if needed to recover from an injury. Support workers to return to work safely without risking re-injuring themselves. |
| High-heeled shoes | <ul style="list-style-type: none"> - Avoid placing requirements on when and how long workers must wear high-heeled shoes. - Alternative options should be available to workers who are experiencing pain due to wearing high-heeled shoes or have any pre-existing conditions that may be aggravated by wearing high-heeled shoes. - Make sure flooring, especially on stages/performing areas is appropriate for performers working in high-heeled shoes. Make sure flooring is level, has no holes, cracks, or gaps, is kept clean, and has appropriate lighting – especially near edges and steps. |

TABLE 2: Examples of control measures for musculoskeletal risks

Talk with your workers about what they think may help make their work more comfortable and less likely to cause discomfort or injury.

4.2 Fatigue

Fatigue is a state of physical and/or mental exhaustion. It can reduce a worker's alertness and ability to perform work safely and effectively. Fatigue is a particular risk for workers in the sex industry as they are often working irregular hours and at night, which can disrupt normal sleep patterns. Working while fatigued can make workers slower to respond and less capable of responding appropriately to other risks. For example, it may be harder to deal with coercive or aggressive clients or customers, follow correct health and safety procedures, and avoid incidents.

Unresolved fatigue can lead to worker burnout. For more information see [Section 5.5 Burnout](#)

PCBUs and workers have a responsibility to manage fatigue at work.

Steps to manage the risks of fatigue include:

| CONTROL MEASURE | EXAMPLES |
|---|---|
| Manage work schedules | <ul style="list-style-type: none"> - Make sure your workers take regular, quality rest breaks in their working day. - Make sure working hours are not too long. If longer working days are required (such as for overnight bookings), make sure workers have a rest day the next day. - Make sure workers are taking at least one full day off per week. This time off should be taken away from the workplace. Rosters should consistently give workers at least two consecutive nights sleep per week. - Try to keep schedules consistent so workers can maintain routines in their personal lives and maintain a consistent sleep pattern. - Monitor and place limits around overtime worked. Workers may choose to work overtime, but PCBUs still have to make sure workers do not put themselves at risk from working excessive hours. PCBUs should: <ul style="list-style-type: none"> - avoid incentives to work excessive hours - not penalise or disadvantage workers who choose not to take on extra hours - monitor and place limits around shift swapping. - Consider travel time when booking outcalls. Make sure there is enough time to rest between bookings after any travel has been completed. - Talk to your workers about what workload and schedule works for them. Avoid situations where workers are overworking themselves due to financial pressures or working more than one job. - Do not contact workers when they have said they will not be available. - Even if a worker is using the accommodation facilities, respect their rest time. Avoid expecting these workers to be available the whole time just because they are present. |
| Make sure there is enough time for sleep | <ul style="list-style-type: none"> - Design rosters to allow for good sleep opportunity and recovery time between shifts. - Design rosters that minimise disruptions to natural sleeping rhythms. For night work, limit the number of night shifts in a row that your workers can work. |
| Consider the effect of workplace or environmental conditions | <ul style="list-style-type: none"> - Provide comfortable facilities for rest breaks well away from client/customer areas where workers can genuinely relax. For more information see Section 7.2 Workplace facilities - Provide clean drinking water. - Workers should be free to leave the premises to take their breaks. - If the business is open through the night, consider having food available for purchase for workers in case there are no outside options to purchase food during their break times. |
| Consider physical and mental work demands | <ul style="list-style-type: none"> - Limit periods of excessive mental or physical demands such as very long bookings (overnighters) without breaks. Workers should be able to leave the room and have regular breaks away from the client. - Ensure fit-for-purpose equipment and facilities are provided. - Create a positive work environment where good relationships exist, and workers are encouraged and supported to seek help if they believe they are experiencing fatigue. - If a worker is too tired to drive home safely after a shift, consider offering a driver to take them home, or let them sleep on site (if there is worker accommodation available). |
| Develop a work fatigue policy | <ul style="list-style-type: none"> - Develop a fatigue policy for all workers, managers and supervisors. This policy should include information about: <ul style="list-style-type: none"> - maximum shift length and average weekly hours - work-related travel - procedures for reporting fatigue risks - procedures for managing fatigued workers. - Make sure anyone can report fatigue-related issues to management. - When investigating incidents, consider if fatigue was a factor and if changes need to be made as a result. - Train your new workers on fatigue management. |

TABLE 3: Examples of control measures for fatigue risks

For more general information see [Fatigue](#)

4.3 Smoking, vaping, drugs, and alcohol

Smoking and vaping

All workplaces in New Zealand are smoke free – this includes brothels and other locations where sex work is taking place. While vaping (using e-cigarettes) is not yet covered by New Zealand smokefree laws, they can be a common irritant and trigger respiratory symptoms in bystanders. To manage this risk, PCBUs should require vaping to only take place in areas approved for smoking. Where possible, provide private/screened off outdoor areas where workers can smoke or vape privately.

Alcohol

Some sex industry businesses are licensed to supply alcohol on their premises while others do not. Those who supply alcohol on premises must ensure that they comply with local and national licensing requirements.

It is strongly recommended that workers do not consume alcohol while working, as this may impair judgment and could result in workers making decisions that negatively affect the health and safety of themselves and their clients/customers.

However, if alcohol is used by workers, an alcohol policy should be established. It should be developed in consultation with workers and provided to each new and existing worker. It should include:

- when it is considered appropriate to consume alcohol
- procedures to prevent drinks from being spiked
- a prohibition on being intoxicated while at work.

PCBUs should never pay or otherwise compensate or incentivise workers with alcohol.

If a worker does become intoxicated, they should not take any more bookings and end their shift. Care should be taken to make sure they get home safely to recover.

Drugs

The possession or use of illegal drugs at the business should not be condoned or allowed. This should be made clear in the terms of entry for clients/customers and in worker codes of conduct. Bringing illegal drugs into a workplace (by workers or clients/customers) compromises the legality of the business. Workers or clients/customers using drugs during a booking can leave workers vulnerable to coercion, stealthing, other types of assault, and generally losing control of the booking.

If a worker is coming to work affected by drugs, they can make themselves and co-workers vulnerable to violent or exploitative clients or customers. Consider referring any workers who are experiencing problems with drug use to a relevant support agency. Consider having information available for drug treatment services in worker rest areas.

First aiders should have training on how to best respond to overdoses and when to call an ambulance.

For more information see [Section 7.3 First aid and emergency plans](#)

4.4 Common infectious illnesses

The close physical nature of sex work means getting an infectious illness is a significant risk for workers. Workers who have existing medical conditions may be particularly at risk from exposure to unwell clients or customers. There are control measures that can be put in place to minimise the risks to workers.

Diseases that can be spread during close physical contact include:

- cold/flu viruses
- COVID-19
- herpes simplex virus (HSV) - cold sores
- measles/chicken pox
- bacterial infections (meningococcal, staph infections, skin infections, impetigo).

See [Health New Zealand | Te Whatu Ora](#) for up-to-date information on the above illnesses, including identification, symptoms and treatment.

There are measures you can take to minimise the chances of catching common viral or bacterial illnesses while working. For example:

- do not see clients that are sick. Consider asking clients before bookings are made or reschedule if they turn up to a booking visibly unwell. In brothels, the operator should be doing this screening at booking time, before a client's booking is confirmed
- keep an eye out for skin lesions or rashes on a client's face or body that could indicate they are unwell). See [Client health](#)
- use masks
- avoid kissing
- encourage workers to keep their vaccinations up-to-date- in particular, for COVID-19, Influenza, and Hepatitis A and B. For more information go to [Vaccines given in Aotearoa](#)
- keep rooms well ventilated
- clean surfaces regularly and keep surfaces clean and dry
- do not share cups, cutlery, water bottles or other personal items
- wash hands regularly (using sanitiser is OK, but soap and warm water is more effective in most cases)
- be aware of early signs of illness and isolate if needed
- do not work when sick - PCBUs should support workers to stay home when sick. Workers should not be penalised for refusing to work when they are unwell.

Cleaning up biological material

PPE (such as masks and long gloves) should be provided and worn while any spills of biological material are being cleaned up (such as vomit, faeces, or blood). Only disposable materials (such as paper towels) should be used and should be disposed of in a sealed bag. The surrounding area should be disinfected and dried. Gloves and other PPE should only be removed and disposed of after all other material has been dealt with.

For more general information see [Poor hygiene, germs, and infections](#)

4.5 Sexually transmitted illnesses (STIs)

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

- bacterial infections such as:
 - chlamydia
 - gonorrhoea
 - syphilis
- viral infections such as:
 - herpes simplex virus (HSV) - genital herpes
 - human papilloma virus (HPV) - genital warts
 - MPX (monkey pox)
- parasitic infections such as:
 - trichomoniasis
 - scabies
 - pubic lice.

There are other conditions that while not STIs, can be associated with sexual activity. For example:

- bacterial vaginosis (BV)
- yeast infections (thrush/candida)
- urinary tract infections (UTIs).

See [New Zealand STI Guidelines](#) website for up-to-date information on the above STIs, including identification, symptoms and treatment.

The risk of transmitting an STI varies between different sexual activities. Different STIs can also be transmitted in slightly different ways. Blood borne viruses (BBVs) are viruses spread via blood. Some of these infections can also be spread via sexual contact and are considered STIs, including HIV and Hepatitis B and C. These guidelines focus on minimising the chances of transmission during sex work.

Examples of control measures to minimise the risk of getting or passing on an STI during sex work include:

- following safer sex practices:
 - use condoms or other appropriate barriers for all penetrative sex or oral sex with appropriate lubricant (the use of these is a requirement under section 9 of the PRA). For more information see [Section 4.6 Safer sex practices](#)
 - do a visual inspection of clients - look for skin lesions or rashes in the genital area that could indicate genital herpes. See [Client health](#)
- covering equipment such as sex toys which have the potential for contact with another person's body fluids with a condom
- where more than one worker is providing service to a client (such as threesomes) make sure equipment such as vibrators and dildos are not shared without being cleaned, disinfected and having a new condom put on first. Alternatively, have each worker use their own equipment only
- making sure any equipment shared between bookings is well-cleaned or sterilised after use, and stored where it will remain clean. For more information see [Appendix 3 Storage, cleaning, and disposal of equipment](#)
- having workers avoid seeing clients for services that include genital contact if they are experiencing active symptoms themselves
- referring workers to where they can find up-to-date information on how to avoid other common health conditions related to sexual activity.

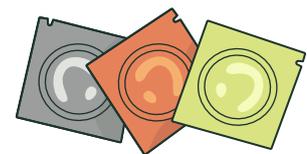


FIGURE 4:
Condom packets

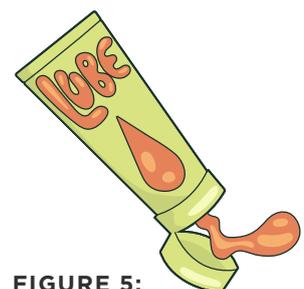


FIGURE 5:
Lubricant

4.6 Safer sex practices

Safer sex refers to sexual activity that minimises the risk of exchanging bodily fluids such as semen, vaginal fluids, or blood. Safer sex practices, such as condom and barrier use, help protect workers and their clients from transmitting STIs and unplanned pregnancy.

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

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

Condom use for oral, anal and vaginal sex is highly effective in protecting against the transmission of most STIs including HIV (when used with an appropriate lubricant). Condoms are less effective against infections that can be spread by skin-to-skin contact such as genital warts/HPV, herpes, and MPX.

Under section 9 of the PRA, the use of condoms or other prophylactic barriers is mandatory. Under HSWA, condoms and barriers are considered PPE. HSWA requires all PCBUs to provide required PPE to workers free of charge.

In the New Zealand sex industry this means operators must provide condoms and barriers (and compatible lubricants) to sex workers free of charge.

See [Section 7.1 Personal protective equipment](#) for general information about providing PPE to sex workers.

See [Appendix 2 Good practice for condom usage](#) for more detailed information on good practice for condom usage and what to do if a condom breaks.

Client duty to practice safer sex

PCBUs should be up-front with clients about required safer sex practices, for example that condom use is non-negotiable. This should be made clear at the time of booking, and information should be clearly stated in the terms of entry to the place of business. This information should again be clearly displayed inside service rooms (in multiple languages if needed).

If a client expresses a reluctance to follow safer sex practices:

- be assertive and let the client know it is non-negotiable. State that it is required under the PRA, and HSWA requires them as 'other people' in the workplace to follow all reasonable health and safety instructions of the business
- refer to signage and the terms of entry
- emphasise that safer sex protects both of you
- point the client to resources about safer sex and sexual health
- offer different types of condoms or swap who wears protection (such as internal condoms)
- remind them that stealthing is considered to be serious sexual assault and can be reported to the New Zealand Police and prosecuted (stealthing is when the insertive partner says they are wearing a condom when they are not or removes it during sex without the knowledge of the other person).

If a client still expresses a reluctance to use a condom or in any other way presents as a possible risk for stealthing, consider eliminating the risk by refusing service to that client. PCBUs should support any worker who wishes to refuse a client for this reason.

Client health

Workers can reduce the risk of becoming ill from contact with a client by being alert for visible signs of illness before beginning a booking.

Signs of general illnesses a worker should look out for include:

- respiratory symptoms such as coughing, or blocked/runny nose
- signs of fever – appearing sweaty or red in the face (not in response to physical activity)
- body rashes
- skin lesions. But be aware not all skin conditions are contagious (for example eczema and psoriasis). The client should be able to advise you if it is one of those conditions.

Be alert for visible signs of STIs (but remember not all STIs have visible symptoms).

Keep an eye out for visible signs of an STI such as:

- sores, ulcers, lumps, warts or blisters on the genitals or surrounding area
- pubic lice (crabs) or their eggs in the pubic hair
- signs of itching or rashes in the genital or anal area
- cold sores on the mouth
- discharges from the genital or anal area. You may also notice an unpleasant odour.

Not all STIs have visible symptoms, and a person may have an STI without showing any symptoms. Checking clients should not be seen as a guarantee that the client does not have a STI. A health check is not a diagnosis or an effective control measure on its own. Barriers should still always be used.

If a worker suspects the client is unwell, they could suggest the client comes back when they are recovered/well again or offer an alternative service that minimises the risk of transmission (such as offering mutual masturbation only).

PCBUs should support workers to refuse a service if they suspect a client is unwell or has an STI.

Safer sex information for sex workers and clients

Sex workers must be provided with training and information on what they can do to protect themselves and others from health harm while working. This is particularly important for preventing the transmission of STIs. The PRA specifically requires brothel owners (PCBUs) to provide safer sex information to workers and clients.

Information must be prominently displayed stating that sex workers and their clients must adopt safer sex practices (by using a condom or other appropriate barrier) to reduce the risk of getting or passing on STIs. This information should be clearly displayed in areas where workers and clients will see it. For example:

- reception areas
- rooms
- toilets and shower areas
- staff rooms
- kitchens.

The information should be provided in a format that is easily understandable by workers. If a worker has difficulty communicating in or understanding spoken and/or written English, PCBUs should provide the information in a language that workers are familiar with. Consider providing information in languages common amongst clients as well.

Additional safer sex resources and support for workers

Workers should be encouraged to access their local sex worker organisation, sexual health service, or other relevant health service. See [Section 9.0 More information](#) for links to more information. Referring workers to an outside organisation for information does not excuse the PCBU from providing the above safer sex information directly.

4.7 STI screening

Workers should undergo regular screening for STIs. The results of screening should be used by workers to make decisions about their own fitness to work. Workers do not have to disclose personal health screening results to a PCBU. However, PCBUs can require that workers participate in regular health monitoring without being provided with the details or results. How often a worker gets tested, and what they get tested for, is for the worker and their medical practitioner to decide. However, it is generally recommended a comprehensive sexual health screen should be obtained at least twice a year.

The results of STI screening cannot be used to make claims of being free of disease by a worker or a PCBU to a client, or in any advertising.

Monitoring for STIs is not an appropriate control measure for preventing the transmission of STIs. Condoms or other appropriate barriers should be used at all times regardless of clear STI screening results. For more information see [Section 4.6 Safer sex practices](#)

4.8 Reproductive health

Damage to reproductive health can be caused by factors related to sex work. Any potential risk to a worker's reproductive health should be eliminated so far as is reasonably practicable.

Pregnant workers in the sex industry should be afforded all possible protection to minimise harm to themselves and the foetus they are carrying.

PCBUs should (in consultation with workers and medical professionals) develop operational policies for workers who are pregnant. This may include:

- a limitation placed on the amount of shift work pregnant workers engage in
- longer breaks between clients
- exemption from performing certain duties such as heavy lifting.

Pregnant workers should be encouraged to seek medical advice regarding any risks to themselves or their foetus which may arise from normal work practices.

Avoiding unintended pregnancy

Unintended pregnancy may be a consequence of working in the sex industry. For guidelines specific to possible unwanted pregnancy, see [Appendix 2: Good practice for condom usage](#)

Sex workers should consult their medical practitioner for advice on other forms of contraception.

5.0

Managing psychosocial risks

IN THIS SECTION:

- 5.1 Bullying
- 5.2 Coercion
- 5.3 Trauma
- 5.4 Sexual harassment
- 5.5 Burnout
- 5.6 Privacy

Creating a mentally healthy work environment is a good way to help prevent mental health harm from happening.

In these guidelines, the term psychosocial risk refers to things that can cause harm to a worker's mental health and wellbeing. There are aspects of sex work that can contribute to mental harm. There are steps PCBU's and workers can take to minimise the chances of mental harm happening.

Workers in this industry frequently experience stigma for the type of work that they do. This can discourage some workers from seeking help, and so compound the effects of mental harm.

This section covers some of the more common causes of mental harm in the sex industry, and provides examples of control measures PCBU's and workers can take to eliminate or minimise those risks:

- 5.1 Bullying
- 5.2 Coercion
- 5.3 Trauma
- 5.4 Sexual harassment
- 5.5 Stress and burnout
- 5.6 Privacy

Examples of risks and control measures provided in this section do not cover all possibilities. There may be other psychosocial risks that are not mentioned in these guidelines that you will need to identify and manage as well. You can apply control measures that are not suggested in these guidelines, if you are satisfied that they are equally or more effective.

Many of the above causes of mental harm can also lead to physical harm if not eliminated or managed effectively early on.

5.1 Bullying

Bullying at work can be described as repeated and unreasonable behaviour directed towards a worker or a group of workers that can lead to psychological or physical harm. Bullying is not limited to managers targeting staff or staff targeting managers - it can also happen between co-workers, and between workers and other people at workplaces such as clients, customers or visitors.

In a sex work environment, this may include behaviours like:

- making belittling or insulting remarks towards or between workers
- ignoring or excluding someone

- managers having clear favourites amongst workers
- managers treating some workers differently to others (either more positively or negatively)
- deliberate attempts to humiliate
- boasting about the number of bookings done, or money earned.

Things you can do to manage the risks of bullying happening include:

- building good relationships with workers - demonstrate respectful behaviours
- making sure all roles and responsibilities are clear - for example, expectations for cleaning and tidying up
- having an anti-bullying policy - make this visible in worker-only areas
- training managers and workers about bullying and how to address it early
- making sure workers know how to report instances of bullying and act promptly on reports made
- maintaining the privacy wishes of workers who report bullying.

For more general information see:

[Preventing and responding to bullying at work](#)

[Bullying at work: Advice for small businesses](#)

[Bullying at work: Advice for workers](#)

5.2 Coercion

Coercion can be described as pressuring or persuading someone to do something they do not want to do. It can involve threats of violence, blackmail, or some other negative consequence (including financial consequences). Younger workers, workers new to the industry, and immigrant workers may be particularly at risk from coercion in the sex industry.

Coercing, forcing or threatening someone to perform a sexual act against their will is considered sexual assault.

For more information see [Section 6.7 Sexual assault](#)

Attempting to coerce a worker to perform a sexual service they do not want to also goes against [section 17\(1\) of the PRA](#) which states that “a person may, at any time, refuse to provide, or to continue to provide, a commercial sexual service to any other person”.

In a sex work environment, coercion may include behaviours like:

- clients pressuring workers to provide services that were not previously agreed to
- PCBUs threatening workers with fines for not undertaking certain tasks or jobs (such as offering extras they are not comfortable doing)
- managers pressuring a worker to see a client they do not want to see
- workers being blackmailed by a client to offer services for free on threat of their job/identity being exposed publicly
- immigrant workers being threatened with being reported to immigration services if they do not perform certain tasks or work
- clients threatening to demand a refund part way through a booking if a worker does not agree to a requested service or extra
- clients who have a connection to the PCBU using that connection to influence a worker to provide extras for free, or services that were not agreed to
- clients offering extremely high payments that in turn make the client feel more entitled to certain services that the worker then feels pressured to comply with
- threatening to remove a worker from provided accommodation if they do not comply with a request.

Things you can do to manage the risks of coercion happening include:

- creating a policy that clearly defines what coercion is and that it will not be tolerated – make this visible in worker and client/customer areas. This may include reference to section 17(1) of the PRA
- encouraging workers to report any instances of coercion to the Police
- supporting workers to confidently refuse requests they are not comfortable doing, and support workers to end a booking early if a client continues to make a request that has been declined
- not taking bookings from clients who have a history of attempting to coerce workers
- respecting a worker's wishes regarding what services or extras they are or are not willing to offer. Do not book a worker for a session that includes services/ requests from a client that the worker has stated they are not willing to offer
- not penalising workers who refuse a booking or extra service, for whatever reason. Penalties include things like:
 - issuing 'fines'
 - making deductions from earnings
 - reducing hours of work without consultation
 - changing the types of bookings they are offered
- not giving booking refunds to clients after a worker has removed their clothing in front of them
- making the business refund policy clear to all clients/customers, workers and managers, and applying it consistently
- not allowing associates (friends or family) of the PCBU or managers to make bookings with workers
- not promoting new workers as being new to the industry in advertising. Doing this may encourage clients to push boundaries with those workers that they would not try with more experienced workers
- making sure workers are aware that regardless of how much they are being paid, they have a legal right to refuse any service at any time. Before accepting any higher-than-normal payment arrangements, make sure the client is aware this does not entitle them to any more than what has already been agreed upon.

Remember section 17(1) of the PRA states that “a person may, at any time, refuse to provide, or to continue to provide, a commercial sexual service to any other person”.

See [section 16 Inducing or compelling persons to provide commercial sexual services or earnings from prostitution of PRA](#).

See [section 17 Refusal to provide commercial sexual services of PRA](#)

5.3 Trauma

Workers can be exposed to trauma while working in the sex industry. This may be by directly experiencing or witnessing traumatic events, or vicariously (hearing about someone else's trauma).

Traumatic events

Experiencing or witnessing a traumatic event can cause long-lasting harm to a worker's mental health. Examples of traumatic events include:

- witnessing assaults or other types of violence
- being present when weapons are presented and/or used

- witnessing an overdose
- witnessing the death of a person (such as a client).

Things you can do to manage the risk of workers being harmed by being exposed to a traumatic event include:

- taking all reasonably practicable steps to avoid traumatic events occurring (as outlined in Sections 5-7 of these guidelines)
- having clear emergency response procedures that all workers are aware of and capable of using if needed
- providing support to workers in the immediate aftermath of a traumatic event (this may include referring them to specialist support agencies. For more information see [Section 9 More information](#))
- allowing workers to end their shift early (without any penalty) and taking time away from work to seek appropriate help
- supporting workers to get ongoing counselling if they want it.

After the initial event has been responded to, managers should meet with workers to discuss what happened. This discussion should include:

- a review of existing control measures
- what other measures could be taken to help prevent a similar event happening again
- what more could be done to minimise the impact.

Consider the privacy of the people involved and be careful to not re-traumatise anyone by how you discuss the event.

Vicarious trauma

Vicarious trauma can be described as the emotional and physical results of exposure to the traumatic stories and experiences of others. Vicarious trauma can be triggered by things like:

- clients disclosing traumatic experiences to workers, both as a victim or as an offender
- hearing about traumatic events experienced by other workers.

Hearing a traumatic story or experience may also trigger a workers' own traumatic memories.

Common signs that a worker might be experiencing vicarious trauma include:

- experiencing lingering feelings of anger, sadness or confusion about a client or co-worker's victimisation
- becoming overly involved emotionally with a client or co-worker
- being preoccupied with thoughts of the client or co-worker outside of the work situation.

Things you can do to manage the risk of vicarious trauma happening include:

- training workers on how to set clear boundaries with clients about what they are comfortable discussing. This could include tactics for diverting the conversation away from topics they are not comfortable discussing
- encouraging clients and workers to seek out professional counselling or support for their issues rather than relying on the worker for support
- making it clear to clients and workers what type of disclosures could be reported to other authorities. This can help remove any conflicting feelings the worker may have
- allowing workers extra time out between bookings where they have had to deal with anything that could trigger vicarious trauma
- not booking a client with a worker if they have said that they do not want to see that particular client again because of previous disclosures.

5.4 Sexual harassment

Sexual harassment is any unwelcome or offensive sexual behaviour that is repeated or is serious enough to have a harmful effect. It may include an implied or overt promise of preferential treatment or an implied or overt threat of detrimental treatment. All workers in the sex industry are entitled to feel respected and treated professionally, just as any other worker is while at work.

In a sex work environment, sexual harassment behaviours may look like:

- unwelcome touching, patting, or pinching by co-workers, managers or clients/customers
- implied or actual threats of being overlooked for work opportunities if workers say no to a manager or owner's advances
- offensive sexual remarks or jokes about a person
- clients/customers in bar areas making remarks about workers that could be seen as derogatory or offensive such negative comments about their appearance or sexual abilities.

Things you can do to manage the risks of sexual harassment happening include:

- educating workers and managers about sexual harassment
- building good relationships in a respectful work environment
- making sure your sexual harassment policies, processes and systems are transparent and known by all managers and workers
- having a code of conduct clearly displayed in worker and client/customer areas
- including in your terms of entry that sexual harassment will not be tolerated, will result in being removed from the business, and may be reported to the Police
- refusing service to potential clients that do not show respect to workers in bar areas. They should be asked to leave
- for venues where full service sex services are not on offer (such as strip clubs and sensual massage businesses), having clear signage for patrons that it is not acceptable to request sexual services from workers
- not promoting or advertising workers in ways that may encourage negative stereotypes or expectations being perpetuated by clients. For example, using a worker's age, experience/lack of experience, sexual orientation, gender identity, or race to imply what kind of service a client might expect
- making sure your workers and others know how to report sexual harassment
- providing protection and support to workers who experience sexual harassment or witness sexual harassment (bystanders).

For more general information see:

[Sexual harassment - Advice for businesses](#)

[Sexual harassment - Advice for workers](#)

5.5 Burnout

Burnout for workers in the sex industry can be described as a worker getting to a point at which they are no longer able to cope with the day-to-day challenges that come with the work. Burnout is often the result of workers experiencing unhealthy levels of stress.

Examples of what burnout might look like in the sex industry includes:

- having difficulty sleeping properly between shifts
- being grumpy or irritable with co-workers and clients/customers
- feeling overly emotional
- finding everyday tasks difficult to complete

- dreading the thought of having to go to work
- feeling depressed
- experiencing low self-esteem
- getting sick more often than normal
- feeling an aversion to being touched by clients.

Things you can do to manage the risks of burnout happening include:

- effectively managing all other risks, in particular psychosocial risks that can contribute to worker stress
- keeping shifts and schedules reasonable so there is plenty of rest time and personal time for workers
- allowing workers to take breaks from working whenever they need to, with the knowledge that they can re-join the business when they are feeling better
- encouraging workers to keep some earnings aside so they can take breaks without feeling financial pressure (if they are employed as contractors) or consider if there are other duties a worker can do at the business while taking a break from sex work.

5.6 Privacy

Workers have a right to privacy while at work. A breach of a worker's privacy in the sex industry can have particularly severe consequences for workers and their families, and can be a significant cause of mental harm.

Information privacy

All personal worker information must be kept private and confidential. Any personal information a PCBU holds about a worker is subject to the requirements of the [Privacy Act 2020](#)

In addition to the general principles of the [Privacy Act 2020](#) - PCBUs in the sex industry should keep in mind the following:

- advertising - always get a worker's consent before using their image on any promotional or advertising material (even if identifying details have been obscured). Workers should know which websites their image has been used on. Workers should be given the opportunity to review any advertising material related to them and make changes to it
- images of workers - remove a worker's images and accompanying details as soon as they cease employment or at any other time a worker requests their image or details to be removed
- health information - you must not disclose any personal health information you may hold about a worker to anybody without the worker's specific consent
- personal details - keep worker's personal details private (legal name, address, personal telephone number etc). Do not leave this information where it may be seen by other workers or clients/customers. Do not share these details with anyone without the worker's specific consent.

For more information see [Office of the Privacy Commissioner](#)

Personal privacy

PCBUs should respect workers who choose to keep their occupation private.

Steps should be taken preserve the privacy of workers such as:

- having a privacy policy that includes that workers should not identify other workers outside of the workplace or discuss the personal details of co-workers with clients

- letting workers screen a client or customer before meeting them to make sure they do not know the client or customer from their personal life. CCTV in secondary entry areas can be useful for this
- letting strippers sit out of a routine if there are people in the audience that they know personally and are not comfortable performing in front of
- providing workers with private areas where they can get ready for bookings or shifts. These areas should only be accessible to sex workers/strippers and be off-limits to other staff (such as reception or security staff), clients/customers, or any other visitors to the business (such as maintenance workers)
- making workers aware of any CCTV cameras in the workplace and making sure footage is only accessible by management
- controlling the use of recording devices:
 - prohibit and monitor for the use of phones cameras and any other devices capable of recording at adult entertainment venues when workers are performing
 - prohibit the use of phones, cameras, or any other device capable of recording during bookings
 - clients/customers should be made aware before a booking or before entering an adult entertainment venue that they must not attempt to film, record or photograph anything during their time there
 - have a specific place inside service rooms where clients can deposit their phones and other devices at the beginning of the booking and leave them until the booking is finished. Make sure that clients cannot leave their phone or other device in a position where it may be able to record unnoticed
 - offer training to workers on how to identify covert recording devices, such as those hidden in items of clothing or accessories, or in places in a room (especially important for workers who do outcalls). If a worker identifies a covert recording device, they should be supported by the PCBU to end the booking immediately and report the offence if they want to
- avoiding conducting job interviews in public places. Workers may not be comfortable discussing job details where members of the public can overhear.

6.0

Managing safety risks

IN THIS SECTION:

- 6.1 Slips, trips, and falls
- 6.2 Work equipment
- 6.3 Entering and exiting the workplace
- 6.4 Outcalls
- 6.5 Intoxicated clients or customers
- 6.6 Aggressive clients or customers
- 6.7 Sexual assault
- 6.8 Illegal activities/weapons

PCBUs must have procedures and practices in place to manage risks to their workers' safety.

Managing worker safety generally refers to managing the risk of hazards that can cause immediate physical harm to a worker or other person in a workplace. Risks to a worker's physical safety in the sex industry can come from injuries sustained from things like slips, trips, or falls, or while using equipment. Workers are also at risk from physical injury resulting from the behaviours of clients/customers or other workers. Many of the risks covered in this section will also contribute to mental harm if not managed.

This section covers some of the more common causes of worker safety risks in the sex industry, and provides examples of control measures PCBUs and workers can take to eliminate or minimise those risks:

- 6.1 Slips, trips, and falls
- 6.2 Work equipment
- 6.3 Entering and exiting the workplace
- 6.4 Outcalls
- 6.5 Intoxicated clients/customers
- 6.6 Aggressive clients/customers
- 6.7 Sexual assault
- 6.8 Illegal activities/weapons

Each section provides examples of control measures PCBUs and workers can take to eliminate or minimise the risks. Examples of risks and control measures provided in this section will not cover all possibilities. There may be other safety-related risks that are not mentioned in these guidelines that you will need to identify and manage as well. You can apply control measures that are not suggested in these guidelines, if you are satisfied that they provide equal or better protection.

6.1 Slips, trips, and falls

Slips, trips, and falls can place workers, clients/customers, and others at risk of injury. PCBUs must manage the risk of slips, trips and falls at their places of work. Below are examples of what to look out for when doing your risk assessment for slips, trips and falls, and lists possible control measures.

Slips

When checking your work area for slip hazards look out for things like:

- wet floors. For example, entrance ways, areas around showers, spas and pools, and from cleaning during work hours
- spills on floors. For example, soaps, lubricants, massage oils and other liquids in worker changing rooms and bathrooms, and client service areas.

The following control measures may help manage the risk of slips in the workplace:

- immediately clean spills of soaps, lubricants, massage oils, and other liquids
- provide non-slip floor mats and additional towels for workers to use to mop up spills and water
- perform routine floor cleaning outside working hours
- install handrails on steps, stairs and ramps, and accessible wet areas
- treat floor surfaces to create slip resistance. Put anti-slip mats at entrances
- encourage workers to remove high-heeled shoes when traveling up or down stairs or on slippery surfaces.

Avoid bringing breakable glassware into wet areas such as spas. Use shatterproof or polycarbonate glassware instead.

Trips

When checking your work area for trip hazards, look out for things like:

- damaged or poorly maintained floors, including broken tiles and worn floor coverings
- uneven or slippery floor surfaces
- equipment and goods stored in walkways
- cords from computers, lighting and other electronics
- poor lighting, particularly on steps and stairs
- lack of handrails on steps and stairs
- uneven flooring, cracks or gaps on performance areas (such as stages or platforms).

The following control measures may help manage the risk of trips in the workplace:

- regularly check floors and fix damaged or uneven floor surfaces
- immediately clean spills of soaps, lubricants, massage oils and other liquids
- provide dedicated storage areas for items such as cleaning goods, trolleys and equipment
- provide lockers for personal items
- do not block walkways. Make sure they are free from clutter at all times
- ensure appropriate cleaning procedures
- provide handrails on steps and stairs
- install floor lighting in dimly lit areas - especially stairwells and hallways
- encourage workers to remove high-heeled shoes when traveling up or down stairs or on slippery surfaces
- make sure performance areas (such as stages and platforms) are level and smooth (with no cracks or gaps that could catch stiletto heels).

Falls

This section refers to managing the risk of falls under 2m or falls from standing height. Falls of less than 2m can still cause serious injuries and even death.

The following guidance may help PCBU's manage the risk of falls of less than 2m.

When checking your work area for fall hazards, look out for things like:

- damaged chairs or seats
- situations where it is necessary to jump or step down to lower levels
- unstable or inappropriate ladders or steps

- stages without clearly marked edges or safety rails
- wearing high-heeled shoes while providing services on sofas, beds and chairs
- improper rigging of hoops, silks and other aerial equipment.

The following control measures may help manage the risk of falls in the workplace (under 2m):

- store things where they can be safely reached without needing a ladder or stepping stools
- if a ladder or step stool is needed, provide one appropriate for that use (do not use other objects like chairs or overturned crates)
- do not climb ladders or stepping stools with platform or high-heeled shoes on
- clearly define the edges of stages or provide safety rails
- where possible, ensure workers avoid wearing high-heeled shoes when working on sofas, beds or chairs
- ensure the correct set-up and use of equipment, in line with the manufacturer's instructions. For more information see [Section 6.2 Work equipment](#)

PCBUs have specific duties under HSWA regulations when there is a risk of a fall of more than 2m. See WorkSafe's webpage [Working at height](#)

For more general information see [Slips, trips and falls](#)

6.2 Work equipment

Equipment such as swings, hoists, or other aerial equipment, poles, massage tables, and BDSM gear can cause injuries to workers and clients if not installed, operated, or maintained properly.

Suggested control measures include:

- making sure all equipment is inspected regularly to make sure all components are in good working order. This is particularly important for any aerial equipment or rigging
- making sure all equipment (such as poles) is installed according to the manufacturer's instructions and meets any relevant New Zealand safety standards (this is particularly important for any imported equipment)
- making sure all equipment is maintained according to manufacturer's instructions
- getting any major modifications to equipment checked/certified by a suitably qualified engineer
- making sure anchor points are secure
- making sure workers are trained in the safe use of all equipment
- only using equipment for the purpose it was designed for
- using equipment within its recommended safe operating limits (such as any maximum weight limits) and make sure any information about safe operating limits is available and known by workers
- making sure workers who operate equipment used in B&D fantasies are fully trained on how to use it safely for themselves and the client
- making sure surfaces such as massage tables, and any waterproof mattress covers are in good condition with no cracks or tears. Poorly maintained surfaces can affect how well they can be wiped clean, or cause skin abrasions while being used.

Product labelling

Products such as lubricants, massage oils, moisturisers, sanitisers, and cleaning chemicals should be stored in their original packaging, so it is clear what they are and what they contain. Where bulk quantities have been transferred to smaller containers, make sure these are clearly labelled, and the contents/ingredients and handling information is readily available.

This will allow workers to avoid using a product that they may have an allergy or sensitivity to, and avoid using incompatible products together. It will also help make sure cleaning chemicals are used and handled appropriately.

6.3 Entering and exiting the workplace

When entering and exiting the workplace, workers (and clients/customers) could be at risk of unwanted attention from members of the public or be potential targets of stalkers.

Suggested control measures for ensuring safe entry and exit includes:

- making sure entry and exit points are well lit
- having a security camera at the exit with a screen visible inside so workers can check no-one is loitering outside before they exit
- installing security cameras to deter inappropriate behaviour
- having a private entrance and exit for workers. This will help them avoid coming into contact with clients/customers outside of their working hours
- having a secondary entry point for clients/customers. This can:
 - let clients/customers enter off the street but not gain immediate access to the business
 - allow the PCBU to screen clients/customers before permitting entry
 - provide a private space for clients/customers to view the posted conditions of entry before entering the business
- having security workers or bouncers present (see [Section 6.5](#) for more details)
- if a worker is feeling unsafe leaving the business, have someone escort them to their transport or next safe location.

6.4 Outcalls

Outcalls are where a worker provides a service in a client/customer's own home, hotel room, vehicle, or place other than a brothel.

Workers doing outcalls are at a greater risk of harm from clients/customers as they do not have supports close by like they would when providing services in-house. Workers also have less control of their surroundings at outcall bookings. PCBUs must take steps to ensure the safety of workers during outcalls.

In this section, an outcall includes:

- where a sex worker takes a booking outside of a brothel
- where an adult entertainer performs at a private location
- where an adult entertainer agrees to go on a paid date with a customer from a strip club.



FIGURE 6:
Mobile phone

The table below outlines suggested control measures and examples at each stage of an outcall booking to minimise the health and safety risks for workers (some examples are more relevant to specific types of outcalls than others):

| CONTROL MEASURE | EXAMPLES |
|---|---|
| Screen the client/customer before committing to a booking | <p>When a client calls, take their name, address and phone number and tell the client you will call them back to take the booking.</p> <p>Before calling them back, check their details to make sure they have not been reported for inappropriate or illegal conduct by previous workers.</p> |
| Confirm expectations for the booking | <p>Discuss and agree what services will be provided and other requirements that must be met for the booking to go ahead. For example:</p> <ul style="list-style-type: none"> - the duration of the booking - who or how many people will be there - the cost of the booking and how/when it will be paid for - for sex work bookings - confirm that the worker will only provide services that conform to safer sex practices - for stripping bookings - confirm that no sexual services will be provided and should not be requested. <p>If it is a receptionist making the booking - do not commit to specific services without checking first with the worker who will be doing the booking. Make sure the worker who will be going to the booking is aware of all the agreed details above prior to the booking.</p> |
| Make sure the worker has all the equipment they might need | <p>Provide workers with operational (fully charged) cell phones and personal alarms that they can use to call for assistance if they need it.</p> <p>Make sure sex workers are equipped with all the equipment and PPE supplies they need to practice safer sex during the booking:</p> <ul style="list-style-type: none"> - condoms and other barriers - lubricant - sex toys - gloves - sealable rubbish bags to dispose of used products - torch. |
| Use a driver/support person | <p>Where possible, use a driver to take the worker to the booking and pick them up afterwards. They can also serve as a support person who can wait nearby for the worker until the booking is finished.</p> <p>Drivers should have adequate driving skills, not be intoxicated, and always interact with workers in a respectful and supportive manner.</p> <p>For smaller business that cannot afford additional support people, limit outcalls to hotels/motels within a short driving distance to the business (avoid doing bookings in private residences).</p> |
| Check the venue before entering | <p>On arrival, the worker should check:</p> <ul style="list-style-type: none"> - if the entrance is well lit, and if there is an easy way to exit if needed - for signs that there may be more than one person if only one person is expected to be there. Listen while approaching the entrance for voices that may indicate more than one person. If the client is not alone, ask the driver to accompany them inside - if the client is intoxicated. The worker may need to cancel the booking if the client is heavily intoxicated. <p>If the worker feels uncomfortable or endangered at any stage, they should leave immediately.</p> |
| Once inside, check the surroundings and confirm if the booking will go ahead | <p>Upon arrival, workers should scan the room to identify and assess potential risks before deciding whether to proceed with the booking. Look out for things like weapons or hidden cameras.</p> <p>If the worker feels safe to proceed with the booking, they should phone an agreed person (such as the driver or support person who is waiting outside), to confirm the start time of the booking and agreed end time.</p> <p>If a worker does not feel safe to proceed with the booking, they should repeat the address and a pre-arranged code word or phrase that represents a dangerous situation so their driver or support person can provide assistance.</p> |

| CONTROL MEASURE | EXAMPLES |
|--|--|
| | <p>If the driver or support person does not hear from the worker within the agreed timeframe they should go to the room or venue to check on the worker.</p> <p>If the worker is working alone, they should still make a phone call to a friend. Even calling their own number is better than nothing, so the client believes that someone is aware of their location.</p> <p>For stripping group bookings, a support person should remain at the venue to support the worker throughout the booking.</p> |
| Get payment before the booking starts | <p>If possible, obtain cleared electronic payment from the client/customer before the booking so no cash needs to be handled during the booking.</p> <p>If payment is collected at the start of the booking, workers should pass the payment to their driver or support person or put it straight into a discreet pocket or bag. The money bag should be always kept within sight, even when the worker goes to the bathroom.</p> |
| Train all workers involved in outcalls on safety procedures | <p>All workers involved with doing outcalls should be trained on safe outcall procedures. For example:</p> <ul style="list-style-type: none"> - reception staff should be trained on how to do their best to screen out unsafe clients before a booking is made - drivers/support people should be clear about their responsibilities, and know how to respond if a worker needs assistance - workers should be trained on how to check for their personal safety at each stage of an outcall booking, and know effective strategies for removing themselves from an outcall booking without inciting conflict. |
| For street-based work | <p>For clients in vehicles:</p> <ul style="list-style-type: none"> - note down the number plate of the vehicle and, if possible, a description of the driver - send this information (via SMS or messaging app) to a trusted person or yourself - let someone know how long you expect to be - do not get into vehicles with more than one person inside - check the back seat before getting in - share information with other street-based workers about any clients who have presented a risk. |

TABLE 4: Examples of control measures for outcall risks

For more general information see [Lone working - what's the problem?](#)

6.5 Intoxicated clients or customers

Intoxicated clients/customers can be a risk to the health and safety of workers and other people at the business. Clients/customers may arrive intoxicated or become intoxicated after arriving, particularly if the workplace is licensed to serve alcohol.

Intoxicated clients can have an increased likelihood of:

- behaving in a way that is disrespectful to workers
- behaving in a way that intimidates workers
- failing to observe the conditions of entry to the business
- failing to follow, or attempting to breach safer sex requirements
- harassing workers
- not respecting workers' personal boundaries
- sexually assaulting workers
- causing fights with other customers or patrons.

Suggested control measures for managing the risk of intoxicated clients/customers includes:

- eliminating the risk by not permitting entry to intoxicated clients/customers into the business in the first place
- screening clients/customers before they are permitted full entry (especially for walk-ins).
- training receptionists to assess the intoxication level of each potential client/customer before allowing entry
- avoiding the client/customer becoming intoxicated while at the business. Follow the requirements of the liquor licence if there is one
- having a security person or 'bouncer' to help with denying entry to or removing intoxicated clients/customers
- supporting workers to leave an outcall booking if the client/customer is intoxicated or becomes intoxicated to a level the worker is not comfortable with.

For more information see [Section 6.4 Outcalls](#)

6.6 Aggressive clients or customers

Aggressive clients/customers are a risk to the health and safety of workers and others at the business. Examples of aggressive behaviour includes:

- refusing to observe the conditions of entry to the business
- behaving in a way that intimidates workers (verbally and physically)
- causing or threatening to cause physical harm to workers or others
- harassing workers
- not respecting workers' personal boundaries
- physically assaulting workers
- sexually assaulting workers
- bringing weapons or displaying weapons while at the business
- causing property damage
- attempting to start fights with other customers or patrons.

Suggested control measures for managing the risk of aggressive clients/customers include:

- eliminating the risk by not permitting entry to aggressive clients/customers in the first place. Screen clients/customers before they are permitted full entry (especially for walk-ins). Train receptionists to assess each potential client/customer before allowing entry. Consider factors such as:
 - their general demeanour - do they appear to be agitated or intoxicated?
 - has the client/customer caused problems for any workers in the past? If so, they should be denied entry
 - is the client/customer known to have been violent or aggressive towards workers at other businesses? If so, they should be denied entry
- having a security person or bouncer to help with screening clients/customers and help remove any client/customers who display aggressive behaviour
- making expectations around behaviour and conduct clear to clients/customers. Include this information in the terms of entry and before a booking begins
- asking for ID from clients/customers as a condition of entry
- avoiding the client/customer becoming intoxicated while at the business. Follow the requirements of the liquor licence if there is one

- providing support and training for workers on:
 - how to de-escalate agitated clients/customers
 - tactics for removing themselves from the room or situation to a safe place where they can get support to have the client/customer removed
- supporting any worker who reports aggressive or threatening behaviour. The business should have the client/customer removed
- supporting workers to leave an outcall booking if the client/customer is showing aggressive or threatening behaviours towards them. For more information see [Section 6.4 Outcalls](#)
- not passing a client/customer on to another worker if they have already been flagged as aggressive, abusive, or have refused to follow reasonable requests by a worker
- trespassing a client/customer who has violated the terms of entry or required removal from the business. If a client/customer is trespassed, take clear steps to make sure it is enforced
- if a client/customer becomes unruly, abusive or in any other way breaches the terms of entry:
 - removing them from the workplace as soon as possible
 - alerting other workers at the business (such as reception staff and security) that the abusive client/customer has been removed and to make sure they are not allowed to re-enter
 - providing any identifying information to reception or security staff to help make sure the client/customer can be stopped from re-entering.

For more general information see [Violence at work](#)

6.7 Sexual assault

Sexual assault includes any sexual contact that happens without consent. It includes when someone is coerced, forced, or threatened to perform a sexual act against their will. A client removing a condom during sex without the worker consenting (known as stealthing) is also considered to be sexual assault. The Crimes Act protects all people against sexual assault including workers in the sex industry.

Even if a particular sexual act was previously agreed to, a sex worker can withdraw consent to do or participate in that act at any time.

PCBUs in the sex industry have a duty to take all reasonably practicable actions to keep workers safe while at work – this includes managing the risk of sexual assault happening.

Some suggested control measures for managing the risk of sexual assault includes:

- having signage that is visible to clients reinforcing a sex worker’s legal right to end a booking at any time, without having to provide a reason
- making sure clients/customers are aware that sexual assaults or attempts at sexual assault will be reported to the Police. For example, by having a warning in the terms of entry stating ‘this business reports sexual assault’
- removing any client/customer from the business that behaves in an unacceptable manner towards any worker (such as being verbally or physically abusive or threatening). For more information see [Section 6.6 Aggressive clients or customers](#)
- not admitting entry to, or booking clients who have a history of behaving inappropriately – particularly stealthing, other forms of sexual assault, or threatening to sexually assault a worker
- having duress alarm buttons installed in service rooms that can be used to attract immediate assistance

- always having someone available to respond to a duress alarm activation that is trained and competent in how to respond
- making sure workers are always able to exit a service room immediately. Service rooms should never be locked, or have the ability to exit controlled from the outside
- providing outcall workers with personal alarms
- training all workers on how to identify potentially dangerous situations and what procedures to follow to protect themselves and safely remove themselves from that situation and seek help.

If an assault has occurred:

- provide full support to the worker in whatever way they say they need. Examples may include:
 - facilitating access specialised emotional support/counselling
 - support to get STI screening
 - support to report the assault to the Police
 - allowing as much time as they need away from work (never expect a worker to continue with their shift after an assault has occurred)
- advise the worker of what resources are available to them to get specialist support. Accessing this support may be time-critical. See [Section 9.0](#) for a list of specialist support agencies
- contact the Police to report the assault (with consent of the worker)
- note the client's details such as their name, phone number, email, and physical description so they can be refused entry in the future.

6.8 Illegal activities/weapons

Illegal activities should not be allowed within any workplace. PCBUs must take all reasonably practicable actions to prevent illegal activities from happening. The presence of weapons or the occurrence of illegal activities within the workplace can create physical risks and psychosocial risks for workers.

Suggested control measures for managing the risk of illegal activities occurring at the workplace includes:

- having a clear policy prohibiting anyone bringing weapons into the workplace
- having a clear policy prohibiting the use of illegal drugs and/or selling of illegal drugs
- having a clear policy prohibiting the wearing of gang patches or insignia
- having security at the entrance to screen clients/customers and visitors for patches or weapons can help stop them getting into the business
- reporting incidents of illegal activity to the Police.

7.0

General workplace requirements

IN THIS SECTION:

- 7.1 Personal protective equipment
- 7.2 Workplace facilities
- 7.3 First aid and emergency plans
- 7.4 Training and inductions
- 7.5 Worker engagement, participation and representation (WEPR)

HSWA regulations outline specific workplace requirements that all PCBUs must meet

This section offers guidance for PCBUs on general workplace requirements that promote good health and safety for workers.

A 'workplace' is any place where a worker goes or is likely to be while at work, or where work is being carried out or is usually carried out. This includes when workers are doing outcalls.

This section contains information about:

- 7.1 Personal protective equipment
- 7.2 Workplace facilities
- 7.3 First aid and emergency plans
- 7.4 Training and inductions
- 7.5 Worker engagement, participation and representation

7.1 Personal protective equipment

PCBUs have a duty under HSWA to provide workers with appropriate personal protective equipment (PPE). For work in the sex industry, this may include items such as:

- condoms and barriers
- water-based lubricants
- latex and non-latex gloves
- personal alarms and mobile phones (for outcalls)
- other items deemed necessary to keep workers safe while providing services.

There are general requirements for all forms of PPE:

- PPE should be easily accessible to the worker at all times while working.
- PPE must meet basic requirements for fit, function and performance.
- PPE must be reasonably comfortable to wear or use.
- PPE must be clean, hygienic, and in good working order.
- PCBUs should make sure that (where relevant) PPE is maintained, repaired, or replaced so that it continues to minimise risk to the worker who uses it.
- PPE should never be used past the expiry date.
- Disposable PPE should never be reused.
- Workers should receive training in how to wear, use, and (where relevant) clean, and store PPE correctly.

PCBUs must provide PPE free of charge:

- PCBUs cannot pass on the cost of providing PPE (in full or part) to their workers. PCBUs cannot charge, levy or make deductions from workers to pay to cover the costs of providing PPE.
- Workers can choose to provide their own PPE (condoms, barriers and lubricant) but cannot be compelled to do so by the PCBU.
- Workers can also change their mind about providing their own PPE (but should give their PCBU reasonable notice so the PCBU can make arrangements to provide PPE).

All PPE, including condoms and other barriers, should comply with relevant New Zealand Standards.

Workers have duty to follow the PCBU's reasonable instruction and requirements regarding PPE, such as:

- what and when it should be worn or used
- how it should be cared for and stored (where relevant)
- telling their manager as soon as there are any issues with the PPE (such as when supplies are running low, when it is no longer fitting properly, or has been broken).

For more general information see [Personal protective equipment – a guide for businesses](#)

Special PPE requirements

Where reasonably practicable, PCBUs should cater for workers or clients who have specific PPE needs – such as latex-free condoms or special hypoallergenic lubricants for skin sensitivities. A variety of condoms of different sizes and thicknesses should be provided.

Where workers can demonstrate an allergy to latex products (for example, through a medical certificate), the PCBU should take steps to minimise the likelihood of the worker having an allergic reaction to latex. Latex allergy may result in asthma, anaphylaxis and other serious reactions in some sensitised individuals. PCBUs should provide an alternative means of protection for those who are allergic to latex, such as condoms made from polyisoprene or polyurethane.

Workers can choose to supply their own PPE for their own convenience but cannot be forced by a PCBU to do so.

Disposal of used PPE

PCBUs should provide closed-top disposal bins for used condoms, barriers, gloves, and used tissues. These bins should be provided in all service rooms and bathrooms. Sex workers who do outcall bookings should be provided with sealable plastic bags in which to dispose of used PPE.

For more information see [Appendix 3 Storage, cleaning and disposal of equipment](#)

7.2 Workplace facilities

The Health and Safety at Work (General Risk and Workplace Management) Regulations 2016 outline what facilities a PCBU must provide for their workers at their workplace.

Facilities that must be made accessible to workers, so far as is reasonably practicable, includes:

- toilets
- drinking water
- first aid facilities, see [Section 7.3 First aid and emergency plans](#)
- hand-washing facilities
- eating and rest facilities.

Work areas, rest areas, and any worker accommodation areas must be adequately ventilated, heated, and cooled. Workers are commonly wearing very little clothing between bookings, so worker areas should be kept at a comfortable temperature that reflects this.

For more general information see [Managing thermal comfort at work](#)

Additional facilities that must be provided for sex workers includes:

- showers
- changing rooms
- storage areas for workers' personal belongings – such as secure lockers.

Facilities must be kept clean and well-maintained. Any faults or breakdowns should be resolved as soon as practicable. Facilities should be in a separate area to client/customer or service-providing areas. Facilities for cleaning cups, plates and food preparation utensils should be separate to cleaning areas for sex toys and equipment. If this is not possible, the area should be thoroughly disinfected after being used for cleaning sex-related items.

Laundry facilities

Used bedding, towels, clothing or costumes should be washed between uses. While not required under the regulations, consider providing washing facilities on-site or arrange for these items to be commercially cleaned.

Storage areas for clean and dirty laundry should be clearly labelled and separated to avoid cross-contamination.

Worker accommodation

In situations where accommodation is being provided for workers, PCBUs must, so far as is reasonably practicable, maintain the accommodation to minimise any health and safety risks arising from the accommodation.

Adequate facilities and amenities should be provided. Such as:

- private sleeping areas
- bathrooms
- showers
- a kitchen to prepare food.

The accommodation and amenities should be kept clean.

For more general information see [Worker accommodation](#)

For more general information see [Workplace and facilities requirements](#)

7.3 First aid and emergency plans

All workplaces must have first aid facilities and emergency plans.

First aid

All workers must be provided with first aid facilities and access to first aiders.

There should be at least one person present in the workplace with basic first aid training. This could be a manager or a worker.

There should be a first aid kit that is stocked with the equipment needed to provide first aid for the types of injuries that might be expected. In a sex work environment, this may include items necessary to respond to drug overdoses. The contents of the first aid kit should be regularly checked to replace any missing or expired items.

All workers must be given clear information about the first aid available at the workplace, including the:

- location of first aid kits
- name(s) and locations of first aider(s)
- location of a first aid room (if there is one)
- procedures to follow when they need first aid.

This information should be given:

- when a worker first joins the business
- when there is a change in the nature or location of their work
- when there is a change in first aiders (for example, if a first aider leaves or a new one is added)
- at regular intervals as a reminder (for example, annually).

For more general information see [First aid at work](#)

Emergency plans

Emergency plans must include procedures for responding to different types of emergencies the workplace might encounter (for example, fire, earthquake, robbery, lockdown, assault, or medical emergency/overdose). An emergency plan should include things like:

- evacuation procedures - including the location of emergency exits (which must be kept clear at all times)
- procedures for notifying emergency services at the earliest opportunity
- medical treatment and assistance procedures (for workers and clients/customers)
- procedures for how to respond to an assault (including how/when to contact the Police and appropriate ways to support the victim)
- procedures to make sure there is effective communication between whoever has been authorised to coordinate the emergency response and all other persons at the workplace
- a detailed floor plan showing where emergency equipment and first aid supplies can be found.



FIGURE 7:
First aid kit

Essential details from emergency plans should be clearly displayed in worker areas, service rooms and in client/customer areas such as bathrooms.

All workers should be provided with information on emergency procedures, and be trained about what to do in the event of an emergency.

Emergency procedures should be tested and reviewed regularly, especially if there have been changes made at the workplace.

For more information see:

- WorkSafe: [Workplace emergency plans](#)
- Fire and Emergency NZ: [Fire safety for business and landlords](#)

7.4 Training and inductions

PCBUs must provide information, instruction and training for workers on how to keep themselves and others safe while working. This includes training workers on their role in managing the risks outlined in these guidelines, and any other risks a PCBU identifies. This does not include training on how to provide sexual services.

Initial training should be done before the worker starts and during their induction phase.

Training for new workers should include information in relation to work health and safety policies and practices such as the following information.

For all workers:

- how to operate all equipment safely to prevent injury to themselves and clients or customers
- how to respond to aggressive/intoxicated clients/customers or threatening behaviour
- information on general workplace requirements and expectations such as:
 - security procedures (location of emergency exits etc)
 - emergency procedures (fire, earthquake, tsunami etc)
 - cleaning and spill procedures
 - conduct expectations
- when/how to report a health and safety incident
- where they can get additional support – give the details for support agencies such as the NZPC. For more information see [Section 9 More information](#)
- information on how they can engage meaningfully on work health and safety matters.

For more general information see [Providing information, training, instruction or supervision for workers](#)

For sex workers specifically:

- the right to refuse any requested service and right to stop a booking at any time
- the requirement to follow safer sex practices at all times
- how to use condoms and other barriers safely, including which lubricants to use
- information about STIs and BBVs, including identification and testing recommendations
- how to check clients for visible signs of an STI and how to recognise symptoms (consider seeking the advice of health professional who specialises in sexual health)

- correct storage and disposal of used condoms and other barriers
- cleaning, disinfecting and good hygiene practices for shared equipment and work areas
- managing clients who are pressuring for services not previously agreed to/on offer or refusing to use a condom or barrier. Discussing hypothetical but realistic scenarios and recommended ways to respond may be useful
- their rights under the PRA.

7.5 Worker engagement, participation and representation (WEPR)

PCBUs have two duties to engage with workers and enable them to participate in improving health and safety. These requirements apply to all workers whether they are permanent employees or contractors.

PCBUs must:

- make sure that workers' views on health and safety matters are asked for and considered
- have clear, effective, and ongoing ways for workers to suggest improvements or raise concerns about health and safety matters on a day-to-day basis.

This is most often done by having Health and Safety Representatives and/or a Health and Safety Committee. You can find out more about Health and Safety Representatives and Health and Safety Committees at the following links:

[Health and safety representatives](#)

[Health and safety committees](#)

Even if your workers choose not to have formal Health and Safety Representatives or a committee, you still must engage meaningfully with workers on matters that affect them regarding their health and safety while at work.

This could look like:

- having regular meetings with workers where time is set aside to discuss any health and safety issues or concerns
- initiating a conversation with workers when a new hazard or risk is identified to discuss how it might best be eliminated or managed
- having an online chat channel available where workers can raise and discuss health and safety concerns. This can be helpful if it is difficult to get workers available for a meeting at the same time due to varying shifts and availability.

For more general information see:

[Good practice for worker engagement, participation and representation](#)

8.0

Notifications and reporting

IN THIS SECTION:

- 8.1 Notifiable events
- 8.2 Reporting a health and safety concern
- 8.3 When WorkSafe might intervene
- 8.4 Other agencies that may be able to help

Anyone can raise a work-related health and safety concern with WorkSafe.

In this section, notification refers to the legal requirement for a PCBU to notify WorkSafe of particular types of work-related health and safety events. Reporting refers to anybody reporting an unhealthy or unsafe work situation to WorkSafe.

This section explains notifications and reporting in more detail, and gives examples of when it might be appropriate to contact WorkSafe. WorkSafe will not necessarily respond to every health and safety report. Sometimes there are other agencies that are more appropriate to contact about certain issues:

- 8.1 Notifiable events
- 8.2 Reporting a health and safety concern
- 8.3 When WorkSafe might intervene
- 8.4 Other agencies that may be able to help

8.1 Notifiable events

WorkSafe must be notified when certain work-related events (notifiable events) happen.

The PCBU must make sure WorkSafe is notified as soon as possible after becoming aware that a notifiable event related to the PCBU has happened.

This allows WorkSafe to immediately investigate or follow up on events that cause, or have the potential to cause, death, serious injury or illness (serious health and safety risks).

A notifiable event is any of the following work-related events:

- **a death**
- **a notifiable injury or illness** - A notifiable injury or illness is a specified serious work-related injury or illness. For example, all injuries or illnesses that require (or would usually require) a person to be admitted to hospital for immediate treatment are notifiable
- **a notifiable incident** - A notifiable incident is where someone's health or safety is seriously endangered or threatened.

Only serious events need to be notified. These events trigger requirements to preserve the site, notify the regulator and keep records.

The notifiable incident, injury, illness or death could be due to the condition of the work site, the way the work activity is organised, or the way equipment or substances are used.

Notifiable events may happen inside or outside the actual work site (for example during an outcall).

For more information WorkSafe's [Notifications](#) webpage.

How to make a notification to WorkSafe

- If someone has been killed as a result of work, notify WorkSafe immediately by phone: 0800 030 040 (24/7).
- In the case of emergency, phone 111.
- For all other notifications, go to [Notify WorkSafe](#)

8.2 Reporting a health and safety concern

If anyone has a concern about an unsafe or unhealthy work situation that could lead to a death or serious injury or illness, they can contact WorkSafe to raise their concerns.

Before deciding whether to raise a health and safety concern with WorkSafe, think about the following:

| QUESTION | DETAILS |
|---|---|
| Is the health or safety concern work-related? | WorkSafe can only consider concerns that relate directly to work health and safety. See Section 8.4 for details of other agencies that may sometimes be more appropriate. |
| How serious is the health or safety risk? | Only very serious or urgent health and safety concerns will be responded to. However, data is collected on all concerns raised. If this data over time shows a particular industry or PCBU has frequent concerns raised about it, it may prompt further action or investigation. |
| Is WorkSafe the best placed agency to respond? | In some cases, WorkSafe may refer a person to a different agency such as the Police. For more information see Section 8.4 Other agencies that may be able to help |
| Has the concern been raised with the business that the matter relates to? | Ideally, the person should have raised the concern with the PCBU first and given the PCBU an opportunity to address the concern. This can be done either directly or, if this is not possible, then via a Health and Safety Representative or other worker support service (such as NZPC). |
| Are you able to provide the required information? | To assess the concern, the following details will be needed: <ul style="list-style-type: none"> - the name and contact details of the person raising the concern - details about the incident/s - who was involved (both who caused the harm and who experienced it) - what has been done about it including who else has been told about it. <p>The more information provided, including specific examples where possible, the more it will assist WorkSafe in reviewing the concern being raised.</p> |

TABLE 5: Things to think about when raising a health and safety concern with WorkSafe

How to report a health and safety concern

There are two options for how to raise a concern depending on the type of concern:

1. For a general health and safety concern

- Phone: 0800 030 040 (24 hours)
- Fill out an online [Concern form](#) on the WorkSafe website
- For more information see WorkSafe webpage [Raise a health or safety concern](#)

2. For a mentally healthy work concern

- Phone: 0800 030 040 (24 hours)
- Fill out an online [mentally healthy work concern form](#) on the WorkSafe website
- For more information WorkSafe webpage [Raise a mentally healthy work concern](#)

Information provided will be kept as outlined in WorkSafe's privacy statement and policy. There is an option on the form to request WorkSafe does not share your name or identifying information with the business or organisation if we have to contact them. Workers can also use a support agency such as [NZPC](#) to make a report on their behalf.

8.3 When WorkSafe might intervene

WorkSafe can only respond to **work-related** health and safety concerns. This means it can only look into concerns if there is a clear link between the concern and work. WorkSafe is unlikely to intervene in one-off cases. However, may consider intervening where:

- a business has failed to manage significant work-related health or safety risk
- there are multiple incidents arising at one business/organisation
- if a high level of harm has resulted from the failure to manage risks
- there are industry-wide or organisation-wide failings.

Reporting concerns (even if WorkSafe does not investigate) allows WorkSafe to gather accurate industry data to help prioritise future activity.

For more information see:

[When we intervene](#)

[How we intervene](#)

8.4 Other agencies that may be able to help

Sometimes there are other organisations which may be more appropriate to help with certain concerns. For example:

New Zealand Police

The Police's responsibilities include enforcing the Crimes Act 1961, which makes it a criminal offence to assault or intentionally injure someone, or to threaten to kill or seriously injure a person or damage property.

You should contact the Police without delay if the concern relates to:

- violence (involving workers and/or clients/customers, or other people in the workplace)
- assault/sexual assault
- threat of violence or presentation of a weapon
- use of a weapon
- criminal harassment
- any other illegal activity that would normally be reported to the Police.

If you have already contacted the Police about a concern and they have confirmed it is not within their threshold to act upon, you can still raise your concern with WorkSafe. If there are possible contributing factors (such as actions or inactions from the PCBU that caused or contributed to an incident occurring) WorkSafe can still be notified as well. This should only be done after the Police have been notified in the first instance.

Ministry of Health

Unsafe sex practices that are in breach of the PRA can be notified to the Medical Officer of Health or local health inspector. NZPC may also be able to pass on a complaint.

Employment Relations Authority (ERA)

You can contact the ERA for employment relations issues. This will depend on the type of employment agreement a worker has with a PBCU. But remember this only relates to employment matters. For work health and safety matters, the type of contract does not affect the PCBUs' obligations about providing a healthy and safe workplace.

The Ministry of Business, Innovation and Employment (MBIE)

You can contact MBIE for employment-related matters. MBIE provides a free mediation service for help with employment relationship problems.

Human Rights Commission (HRC)

You can contact the HRC if your concern relates to human rights. The HRC can help you understand your rights, or you can make a complaint about discrimination and other matters.

Citizens Advice Bureau (CAB)

You can contact CAB for free. CAB can provide confidential information and advice on most issues. They will be able to steer you toward the service which is most likely to be able to help you if you are not sure who you should contact.

New Zealand Sex Workers Collective (NZPC)

The NZPC provides information and services for people who are doing sex work or thinking about doing sex work. They can provide further support and advice on things like the rights of sex workers, laws and bylaws affecting sex work, and other services available to assist sex workers and other workers in the sex industry [NZPC > New Zealand Sex Workers Collective](#)

9.0

More information

IN THIS SECTION:

- 9.1 WorkSafe resources
- 9.2 Other government agency resources
- 9.3 Legislation
- 9.4 Specialist support services

- 9.1 WorkSafe resources
- 9.2 Other government agency resources
- 9.3 Legislation
- 9.4 Specialist support services

9.1 WorkSafe resources

Health and Safety at Work Act 2015

- [Introduction to the Health and Safety at Work Act 2015 – special guide](#)
- [Overlapping duties](#)
- [Worker engagement and participation](#)
- [General requirements for workplaces](#)

General principles of good health and safety management

- [Reasonably practicable quick guide](#)
- [How to manage work risks](#)

Managing physical health risks

- [Poor hygiene, germs, and infections](#)
- [Musculoskeletal disorders](#)
- [Managing thermal comfort at work](#)
- [Fatigue](#)

Managing psychosocial risks

- [Preventing and responding to bullying at work](#)
- [Bullying at work: Advice for small businesses](#)
- [Bullying at work: Advice for workers](#)
- [Sexual harassment: Advice for businesses](#)
- [Sexual harassment: Advice for workers](#)

Managing safety risks

- [Working at height](#)
- [Slips, trips and falls](#)
- [Lone working – what’s the problem?](#)
- [Violence at work](#)

General workplace requirements

- [Personal protective equipment – a guide for businesses](#)
- [Worker accommodation](#)
- [Workplace and facilities requirements](#)
- [First aid at work](#)
- [Workplace emergency plans](#)
- [Providing information, training, instruction or supervision for workers](#)
- [Health and safety representatives](#)
- [Health and safety committees](#)
- [Good practice for worker engagement, participation and representation](#)

Notifications and reporting

- [Notifications](#)
- [Raise a health or safety concern](#)
- [Raise a mentally healthy work concern](#)
- [When we intervene](#)
- [How we intervene](#)

9.2 Other government agency resources

- [Health New Zealand | Te Whatu Ora - Infectious illnesses](#)
- [Vaccines given in Aotearoa](#)
- [New Zealand STI Guidelines](#)
- [Office of the Privacy Commissioner](#)
- [Businesses and landlords | Fire and Emergency New Zealand](#)
- [HealthEd](#)

9.3 Legislation

- [Health and Safety at Work Act 2015](#)
- [Prostitution Reform Act 2003](#)
- [Privacy Act 2020](#)

9.4 Specialist support services

General support for sex workers

- [NZPC - New Zealand Sex Workers Collective](#)

Health services

- [List of sexual health clinics across New Zealand](#)
- [Burnett Foundation Aotearoa](#)

Sexual harm support

- Rape Crisis 24 hour helpline 0800 883 300
- [Women's Refuge](#) 24 Hours crisis line 0800 733 843 (0800 refuge)
- [Safe to talk](#) - 0800 044 334 or free text 4334 for help to do with sexual harm. Available 24/7 and staffed by trained counsellors.

Appendices

IN THIS SECTION:

Appendix 1: Glossary

Appendix 2: Good practice for condom usage

Appendix 3: Storage, cleaning, and disposal of equipment

Appendix 1: Glossary

| TERM | WHAT THIS MEANS |
|--|--|
| Adult entertainment | Entertainment that includes age-restricted content, such as nudity or sexually-explicit material or themes. |
| Adult entertainer | A person who performs in an adult entertainment venue or provides an adult entertainment-themed service. It often involves nudity or partial nudity. |
| Antiviral | A term describing a type of drug which blocks the replication of particular viruses. |
| B&D | Bondage and discipline. |
| Brothel | Defined by the Prostitution Reform Act as any premises kept or habitually used for the purposes of prostitution. It does not include premises at which accommodation is normally provided on a commercial basis if the prostitution occurs under an arrangement initiated elsewhere. |
| Booking | An agreed time and location where a sex worker provides agreed/specified sexual services to a client for a specified fee/cost. Sometimes referred to as a session or appointment. |
| Business of prostitution | Defined by the Prostitution Reform Act as a business of providing, or arranging the provision of, commercial sexual services. |
| Client | A person who receives, or seeks to receive, commercial sexual services as outlined in the Prostitution Reform Act. |
| Commercial sexual services | Defined by the Prostitution Reform Act as sexual services that: <ul style="list-style-type: none"> - involve physical participation by a person in sexual acts with, and for the gratification of, another person, and - are provided for payment or other reward (irrespective of whether the reward is given to the person providing the services or another person). |
| Control measure | A control measure is a way to eliminate or minimise (reduce) a risk to health and safety. For more information see How to manage work risks |
| Customer | A person seeking or using the services of a business operating in the sex industry. For example, at a brothel or strip club. Can sometimes be used to describe a client or patron. |
| Dams | A very thin, rectangular latex barrier, dams are utilised during oral/vaginal and oral/anal sex to prevent transmission of sexually transmissible infections (STIs). |
| Duty | A duty is a legal requirement that must be met. Under HSWA, there are four groups with health and safety duties: <ul style="list-style-type: none"> - persons conducting a business or undertaking (PCBUs) - officers - workers - other persons at the workplace. <p>See s30 of HSWA</p> |
| Eliminate | To eliminate a risk means removing the hazard (the source of harm). For more information see How to manage work risks |
| Engagement, participation, and representation | A key part of health and safety involves PCBUs and workers working together. There are three parts to this: <ul style="list-style-type: none"> - PCBUs talking with workers about health and safety (engagement) - workers being able to raise health and safety concerns and suggest improvements (participation) - workers being represented on health and safety matters. This could be by a Health and Safety Representative (HSR), a worker’s union, or a person that workers authorise to represent them (for example a kaumātua, or community or church leader) (representation). <p>For more information see Good practice for worker engagement, participation and representation</p> |

| TERM | WHAT THIS MEANS |
|--|--|
| Hazard and risk | <p>A hazard is something that could cause harm. It could be an object, activity, event, or even a person's behaviour.</p> <p>Risks to health and safety occur from people being exposed to hazards. Risk has two components – the likelihood that it will occur and the consequences (degree of harm) if it happens.</p> <p>For more information see How to manage work risks</p> |
| Health and Safety at Work Act 2015 (HSWA) | <p>The Health and Safety at Work Act is the key work health and safety law in New Zealand. It is often shortened to 'HSWA'.</p> |
| Health and safety inspector | <p>A person employed by WorkSafe (or Civil Aviation Authority or Maritime New Zealand) to assess health and safety compliance, and investigate work health and safety incidents.</p> <p>Inspectors have a range of powers under health and safety laws, including being able to enter and inspect a workplace, to require answers to specific questions, and to seize items for use as evidence.</p> |
| Health information | <p>Described in the Prostitution Reform Act, as information on safer sex practices and on services for the prevention and treatment of sexually transmissible infections.</p> |
| Health inspector | <p>An inspector is a person authorised by section 25 of the Prostitution Reform Act 2003 to determine whether or not there is compliance with the safer sex requirements of that Act.</p> <p>The inspector may be a Medical Officer of Health or a suitably qualified person appointed by them.</p> |
| Hierarchy of control measures | <p>Using the hierarchy of control measures is a way PCBUs can manage health and safety risks. Following this approach, PCBUs first consider if the most effective control measures can be put in place before considering less effective ones.</p> <p>The first step is to try to eliminate a risk by removing the hazard. If a risk cannot be eliminated, the next step is to minimise the risk.</p> <p>This involves first trying to:</p> <ul style="list-style-type: none"> - substitute – by swapping with something that has a lower risk - isolate – by separating people from the source of harm - apply engineering control measures – by changing physical components of the plant, structure or work area. <p>If there is still risk, put in place administrative control measures – using safe methods of work, procedures or processes.</p> <p>The last step involves personal protective equipment (PPE) – using or wearing items (including clothing) to minimise risks to personal health and safety.</p> <p>For more information see How to manage work risks</p> |
| HIV | <p>Human Immunodeficiency Virus. Infection with this virus may result over time in a person having AIDS, which stands for Acquired Immune Deficiency Syndrome.</p> |
| Insertive partner | <p>The person who during sex places their penis, other body part or a sex toy into the mouth, vagina, neo-vagina or anus of the other person.</p> |
| Medical Officer of Health | <p>A person appointed by the Director-General of Health under the Health Act 1956.</p> <p>Medical Officers of Health are employed by the Ministry of Health and have a number of roles and responsibilities set out under several statutes and regulations including the PRA.</p> <p>Legislated roles and responsibilities include information-gathering, reporting and notification, entry and inspection into premises of various sorts, sampling or testing, compulsorily requiring or giving a medical examination, and isolation or detention of patients in a centre for care and treatment.</p> |
| Minimise | <p>To minimise (reduce) a risk means to:</p> <ul style="list-style-type: none"> - reduce how serious the consequences are if it does occur or if a worker is exposed to the hazard (source of harm) - reduce the chances of it occurring or a worker being exposed to the hazard. <p>For more information see How to manage work risks</p> |

| TERM | WHAT THIS MEANS |
|---------------------------------------|---|
| Must | When 'must' is used in these guidelines, it means a legal requirement that must be complied with. |
| Neo-vagina | The name used for a constructed vagina, which replaces the male genitalia, removed during a surgical process undertaken by some male to female transgender people. |
| Notifiable disease | A disease that, by legal requirements, must be reported by medical practitioners to public health services (Health Act 1956). |
| Notifiable event | <p>WorkSafe must be told when certain things occur that are related to the work you do. These are called notifiable events. There are three kinds of notifiable events:</p> <ul style="list-style-type: none"> - deaths - certain injuries or illnesses (called notifiable injuries or illnesses) - certain incidents (called notifiable incidents). <p>For more information see What events need to be notified?</p> |
| NZPC | New Zealand Prostitutes Collective. Now called NZPC: Aotearoa New Zealand Sex Workers' Collective |
| Officer | <p>An officer is someone who has a specified position (like a company director).</p> <p>An officer is also someone who has a strong influence over how a business or undertaking is run. An example is a Chief Executive. Officers have health and safety duties.</p> <p>For more information see Officer duties</p> |
| Operator | <p>Defined in section 5 of the Prostitution Reform Act 2003 in relation to a business of prostitution, as a person who, whether alone or with others, owns, operates, controls, or manages the business; and includes (without limitation) any person who:</p> <ol style="list-style-type: none"> a. is the director of a company that is an operator, or b. determines: <ul style="list-style-type: none"> - when or where an individual sex worker will work, or - the conditions in which sex workers in the business work, or - the amount of money, or proportion of an amount of money, that a sex worker receives as payment for prostitution, or c. is a person who employs, supervises, or directs any person who does any of the things referred to in paragraph (b) above. <p>A sex worker who works at a small owner-operated brothel is not an operator of that business of prostitution; and for the purposes of the PRA, a small owner-operated brothel does not require an operator certificate.</p> |
| Operator certificate | A certificate issued to an operator of a business of prostitution under section 35 of the Prostitution Reform Act |
| Other persons at the workplace | <p>'Other persons at the workplace' is the term used to describe the people at a workplace who are not workers. This includes:</p> <ul style="list-style-type: none"> - customers or clients - visitors - passers-by - casual volunteers (not volunteer workers). <p>Like workers, these people have health and safety duties.</p> <p>For more information see Other persons at the workplace duties</p> |
| Outcall | <p>Where a sex worker provides commercial sexual services in a client's own home, hotel room, vehicle, or place other than a brothel.</p> <p>or</p> <p>Where an adult entertainment worker provides adult entertainment at a private venue outside of a strip club.</p> |

| TERM | WHAT THIS MEANS |
|--|---|
| Overlapping duties | <p>Overlapping duties is the term WorkSafe uses to describe when a PCBU shares duties with other PCBUs.</p> <p>Overlapping duties can occur in a shared workplace (for example, a building site or a port) where more than one business and its workers control and influence the work on site.</p> <p>Also, PCBUs do not need to be at the same worksite to have overlapping duties. For example, overlapping duties can also occur in a contracting chain, where contractors and subcontractors provide services to a head contractor or client.</p> <p>For more information see Overlapping duties</p> |
| Patron | <p>A person visiting a strip club, also referred to as a customer.</p> |
| Person conducting a business or undertaking (PCBU) | <p>'Person conducting a business or undertaking' (PCBU) is a term used to cover all types of working arrangements.</p> <p>PCBUs can range from businesses (large corporates, small-medium companies, partnerships, sole traders) to non-commercial organisations (like not-for-profit groups).</p> <p>PCBUs have many health and safety duties.</p> <p>Certain people/organisations are not PCBUs – including certain types of volunteer organisations.</p> <p>For more information see What is a PCBU</p> |
| Personal protective equipment (PPE) | <p>Personal protective equipment (PPE) are items used or worn by someone to reduce risks to their health or safety.</p> <p>Examples of PPE in the sex industry are:</p> <ul style="list-style-type: none"> - condoms - dams - water-based lubricants - latex and non-latex gloves - items required for proper maintenance of equipment and facilities such as disinfection agents. <p>For more information see Personal protective equipment</p> |
| PRA | <p>The Prostitution Reform Act 2003.</p> |
| Prostitution | <p>Refer to 'Business of prostitution' above.</p> |
| Reasonably practicable So far as is reasonably practicable | <p>Certain legal requirements require you to do something 'so far as is reasonably practicable'.</p> <p>'Reasonably practicable' is the term used to describe what you need to think about when deciding how to meet certain health and safety duties.</p> <p>There are two parts to 'reasonably practicable'.</p> <ul style="list-style-type: none"> - You first consider what is possible in your circumstances to ensure health and safety. You then consider, of these possible actions, what is reasonable to do in your circumstances. - You need to achieve a result that provides the highest protection that is reasonably practicable in your circumstances. <p>For more information see Reasonably practicable</p> |
| The receptive partner | <p>The person during sex who has their mouth, vagina, neo-vagina or anus entered by the other partner using their penis, other body part or a sex toy.</p> |
| Sexually transmissible infection (STI) | <p>An infection or disease spread by the transfer of organisms from person to person during sexual contact.</p> |
| Sex worker | <p>A person who provides commercial sexual services that meet the criteria as outlined in the Prostitution Reform Act.</p> |
| Should | <p>When 'should' is used in our guidance, it means a recommended practice or approach.</p> |
| S&M | <p>Sadism and masochism.</p> |
| Small owner-operated brothel | <p>Defined by the Prostitution Reform Act as a brothel:</p> <ul style="list-style-type: none"> - at which not more than four sex workers work, and - where each of those sex workers retains control over their individual earnings from prostitution carried out at the brothel. - Do not require an operator certificate |

| TERM | WHAT THIS MEANS |
|--|---|
| Strip club | An age-restricted adult entertainment venue where customers can watch adult entertainers/ strippers. Other services (such as private dances) may be offered but not those covered by the Prostitution Reform Act. |
| Stripping/Stripper | A form of adult entertainment where the worker performs to an audience or person while nude or partially nude. Usually performed in a strip club or other age-restricted private venue. |
| Taping, tucking or strapping | Refers to the practice of securing the male genitals up between the legs using surgical tape or tight undergarments. |
| Volunteer | <p>A volunteer is someone not paid for the voluntary work they do. Volunteers can be reimbursed for out-of-pocket expenses (for example, petrol expenses if the volunteer work requires them to drive).</p> <p>Depending on what tasks they carry out, volunteers are classed as 'volunteer workers' or 'casual volunteers'. Volunteer workers are classed as workers. They:</p> <ul style="list-style-type: none"> - work with the knowledge or consent of the PCBU on an ongoing and regular basis, and - are an integral part of the business or undertaking. <p>If you are not a volunteer worker, you are called a 'casual volunteer' by WorkSafe. Casual volunteers are treated as 'other persons at the workplace'.</p> <p>For more information see Volunteers</p> |
| Workplace | <p>A workplace is where work is carried out.</p> <p>It includes any location where a worker goes or is likely to be while working.</p> |
| Worker | <p>A worker is someone who carries out work for a PCBU, like:</p> <ul style="list-style-type: none"> - employees - contractors or sub-contractors - employees of contractors or sub-contractors - outworkers (including homeworkers) - apprentices and trainees - people gaining work experience or on a work trial - volunteer workers - self-employed people (who are PCBUs as well as workers). <p>Workers have health and safety duties.</p> <p>For more information see Worker duties</p> <p>Note: A sex worker is not an 'employee' of a client for commercial sexual services</p> |
| WorkSafe New Zealand (WorkSafe) | <p>WorkSafe is New Zealand's main work health and safety regulator.</p> <p>In addition to WorkSafe:</p> <ul style="list-style-type: none"> - Maritime New Zealand deals with ships as workplaces and work aboard ships. - Civil Aviation Authority (CAA) deals with work preparing aircraft for imminent flight and aircraft in operation. <p>OSH, Department of Labour, and MBIE (Ministry of Business, Innovation and Employment) were earlier work health and safety regulators.</p> |

Appendix 2: Good practice for condom usage

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

To maximise their effectiveness, a condom must be used appropriately and with a compatible lubricant.

The effectiveness of a condom can be compromised in the following ways:

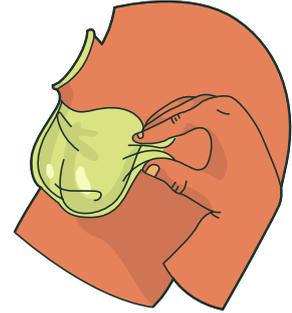
- using a condom that is too loose or too tight
- continuing to have sex after a condom has broken
- continuing to have sex after the person wearing the condom has ejaculated
- not using lubricant or using an incompatible lubricant
- trying to re-use a condom
- using a condom that is past its expiration date
- having sex when one or both partners have an open cut or wound.

How to apply a condom correctly

- 1 Clean hands to make sure there is no oily residue such as from massage oils.
- 2 Check the expiration date and condition of the packet. Make sure has not expired or is not damaged in any way.
- 3 Carefully open the packet, take care not to damage the condom with long nails, jewellery, or teeth.
- 4 Check the condom is the right way round. The pointy top part should be facing away from the tip of the penis before you put it on. The condom can only easily roll on in one direction so you need to make sure it is the right way up.
- 5 Roll the condom on. Pinch the top of the condom to remove any air in the tip, then carefully roll it all the way down. If there is a foreskin, make sure it is pulled back first. If the condom will not unroll, it is probably on inside out - start again with a new condom, as there may be sperm on it.
- 6 Apply lubricant. Make sure you use a lubricant that is compatible to the type of condom being used. Lubricant is important to help to avoid any breakages and help to protect against irritation.
- 7 Once finished, hold the base of the condom in place while pulling out to make sure it does not slip off.
- 8 Remove the condom, being careful not to spill any contents and dispose of it in a lined, closed-top bin, or sealable plastic bag.

How to use a dam or barrier correctly

- 1 Clean hands to make sure there is no oily residue such as from massage oils.
- 2 Check the expiration date and condition of the packet. Make sure it has not expired or is not damaged in any way.
- 3 Carefully open the packet, taking care to not damage the condom with long nails, jewellery, or teeth.
- 4 Place the oral dam flat over the anus, vulva or scrotum/testicles. The person receiving oral sex can help keep the oral dam in place by holding the top two corners of the sheet. The person giving oral sex can hold the bottom two corners in place.
- 5 Use a fresh dam if you move from the anus to the vulva.
- 6 Once finished, dispose of the dam in a lined, closed-top bin or sealable plastic bag.



Lubricants

Always use a condom with a compatible lubricant to prevent breakage.

Lubricants come in a variety of bases including oil, water, and silicone. Oil can degrade latex, and should never be used with latex condoms or barriers. Check the condom package to see which lubricants are compatible. If you are using oil-based products for providing massages, make sure the massage oil does not come into contact with latex-based condoms and barriers. Clean massage oil from hands before handling latex-based products.

If a worker has an allergy to particular type of lubricant, you should work with them to find a suitable alternative lubricant that is still compatible with the type of condom being used.

HSWA requires that PPE must be fit-for-purpose and meet the needs of the worker so far as is reasonably practicable. This means providing specialty lubricants where there is a genuine need for them. For more information see [Section 7.1 Personal protective equipment](#)

How to avoid a condom breaking or slipping off

The table below outlines control measures and examples for managing the risks of a condom breaking or slipping off.

| CONTROL MEASURE | EXAMPLES |
|--|--|
| Store condoms in a suitable place | To prevent premature deterioration, condoms and other barriers and lubricants should be stored away from light and heat. |
| Check condom quality | Only use condoms with indication on the packaging that they meet New Zealand Standards. |
| Check expiry dates | If the condom or lubricant has passed its expiry date or has been stored incorrectly do not use it. If bulk supplies are kept, make sure that the bottom of the supply is rotated to the top of the pile when stocks are replenished. |
| Be careful when unwrapping and handling condoms | Make sure the condom is not torn or damaged while being opened and applied. Be particularly careful of long fingernails or jewellery during application or use (consider having nail files available to minimise this risk). |
| Make sure enough lubricant is used | Make sure sufficient lubricant is used (particularly for anal sex or just after menstruation when the vagina can be drier than usual). |
| Make sure only compatible lubricant is used | Oil-based lubricant can break down latex condoms. Only use water-based lubricant with condoms and dams. If oil-based products have been used earlier in the booking (such as during a massage), make sure it is all washed off before handling and using latex condoms. Using water-dispersible massage oils will make it easier to wash off. |
| Use the right size condom | Have various sizes on condoms available and select the size that is most appropriate. If it is too small, it may be more likely to break. If the condom is too large, it may slip off. |
| Check the condom is rolled all the way down | If the insertive partner does not have the condom rolled on all the way to the base of their penis, it may slip off more easily. |
| Regularly check the condom when the service has been occurring for more than five minutes | If the sexual act is of particularly long or vigorous duration, consider swapping for a fresh condom. Replace the condom if needed. Relubrication is a good excuse to use to stop the service and check/change the condom. |
| Hold the condom in place when withdrawing | If the insertive partner fails to hold on to the end of the condom at the base of their penis while withdrawing, it may slip off. Extra care should be taken if the insertive partner's penis is only semi-erect or flaccid, small and/or thin, or flared, as there is greater risk of the condom slipping off. |
| Pay attention for sensations that may indicate the condom has been broken or has fallen off | Become familiar with what a condom breaking, and a broken condom feels like, possibly by discussing it with other workers who have experienced it. |

What to do if a condom breaks or slips off

Even when used appropriately, condoms can still break or slip off, exposing workers and clients to possible STI infection or pregnancy.

If a condom breaks or slips off, regardless of whether ejaculation is involved, there is the potential for the exchange of body fluids, in either direction, between participants.

A worker may also be a victim of stealthing or another form of assault where a condom was not used. In these situations, workers should be provided with all the information and support they need to take appropriate action. This includes the steps listed below for the receptive partner. See [Section 6.7 Sexual assault](#) for more information about supporting a worker who has been a victim of stealthing.

If the worker or the client realises that the condom has broken, slipped off, or otherwise been removed unexpectedly, the following steps should be carried out:

During vaginal or anal sex

| RECEPTIVE PARTNER | INSERTIVE PARTNER |
|---|--|
| <ul style="list-style-type: none"> - Stop the activity immediately. - Remove any excess semen (and condom or fragments) present: <ul style="list-style-type: none"> - From the vagina by squatting and squeezing it out using vaginal muscle exertion. Fingers can be used to scoop out any excess semen or material that remains, but be careful of scratching the lining of the vagina with nails or jewellery - From the neo-vagina by urinating. Fingers may be used to remove excess semen or material, but be careful of scratching the lining of the neo-vagina with nails or jewellery - From the anus by sitting down on the toilet and bearing down. Fingers should not be used in the anus. - Douching should only be used in vaginas if a diaphragm is present, otherwise you risk pushing any bodily fluids up into the cervix. Only douche with products specifically designed for that purpose. Excessive douching or using alterative products can damage delicate vaginal tissues and cause irritation, leading to BV, thrush, and can make it easier to be infected with an STI. - Douching neo-vaginas or the anus is not recommended. | <ul style="list-style-type: none"> - Stop the activity immediately. - Withdraw holding the condom on at the base of the penis (if still on). - Urinate to clear the urethra. - Wash the genital area thoroughly, particularly under the foreskin if present. |

During oral sex

| RECEPTIVE PARTNER | INSERTIVE PARTNER |
|--|--|
| <ul style="list-style-type: none"> - Stop the activity immediately. - Spit out any semen. - Rinse the mouth with a chlorhexidine-based mouthwash, a diluted tea tree oil mixture or Betadine. - Do not brush, floss teeth or eat for at least an hour after. | <ul style="list-style-type: none"> - Stop the activity immediately. - Urinate to clear the urethra. - Wash the penis thoroughly, particularly under the foreskin. |

During trick sex

Trick sex is having intercourse between the thighs, under the armpits or in a cupped hand held in the genital area. If a worker has shaved or waxed their body or pubic hair, they need to be careful of cuts and scrapes. Any cuts, abrasions, rashes or grazes should be covered to prevent possible contact with body fluids.

If a sex worker is taping, strapping or tucking, it could create a warm, moist area which may lead to skin disorders, chafing or dermatitis. Removal of tape can also cause breaks in the skin. Protecting these breaks from contact with another person's body fluids is vital.

| RECEPTIVE PARTNER | INSERTIVE PARTNER |
|--|---|
| <ul style="list-style-type: none"> - Stop the activity immediately. - Wash the area with a mild antiseptic like chlorhexidine-based preparations or a solution such as Betadine. | <ul style="list-style-type: none"> - Stop the activity immediately. - Wash the genital area thoroughly, particularly under the foreskin if present. |

Preventing pregnancy after condom breakage or slippage

Workers who are capable of getting pregnant, and who are not using another form of contraception may also require emergency contraception.

Workers should attend a sexual health or family planning clinic or visit their GP within 72 hours of the breakage or slippage to discuss emergency contraception options.

Medical follow-up – STI checks

Sexual health screening following a condom break or slippage event is always recommended.

If there are no symptoms after a break or slip has occurred, then testing for STIs should be taken two weeks after the event. If symptoms develop before then, the person should see a healthcare professional as soon as possible.

If there is a risk of pregnancy or HIV transmission resulting from the incident, the person should get healthcare advice as soon as possible. They may need post-exposure prophylaxis (such as antivirals) for HIV, or emergency contraception.

Appendix 3: Storage, cleaning, and disposal of equipment

PCBUs must provide adequate facilities for the storage, cleaning, and disinfecting of non-disposable items that may become contaminated with bodily fluids. PCBUs must provide appropriate facilities for the safe disposal of single use/disposable items.

PCBUs must also provide training for workers on cleaning and safe disposal practices related to activities during a booking and equipment they use during a booking. For more information see [Section 7.4 Training and inductions](#)

Commercial cleaners should be used for general cleaning and deep cleaning requirements.

Storage and handling of PPE, sex toys and other equipment

- To prevent premature deterioration, condoms and other barriers and lubricants should be stored away from light and heat.
- Sex toys and other hand-held equipment should be stored somewhere where they cannot become contaminated between uses. They should always be cleaned and disinfected before being stored.
- Clean bed linen and towels should be stored in clearly labelled containers, separate from used/dirty bed linen and towels.

Cleaning fixed/heavy equipment

- All fixed or heavy equipment, such as restraints, furniture, bench tops, massage tables and mattresses, must be disinfected after each use.
- Scrub or wipe all surfaces with antibacterial cleaner and water. Make sure there is no residue left that could cause skin irritation for later users.
- Make sure surfaces such as massage tables, and mattress covers are in good condition with no cracks or tears that could affect how well they can be wiped clean, or cause skin abrasions.
- Wipe down high-touch areas such as door handles, lube dispensers, and towel warmers.
- Bed linen and towels should be changed after every booking. There should be clearly labelled, separate containers for holding used bed linen and towels.
- A regular thorough clean of service rooms and bathrooms should be done in addition to cleaning between bookings.

Cleaning handheld equipment

For equipment that is safe to immerse:

- rinse it and immerse it for 10 minutes in warm soapy water. After immersion, rinse and dry the equipment before storing for its next use.

For equipment which will not tolerate immersion (for example vibrators):

- clean it by wiping with antibacterial cleaner and water, and then rinse and dry the equipment before storing for its next use.

Disposing of equipment (including PPE)

PCBUs should provide lined closed-top disposal bins for used condoms, barriers, gloves, used tissues, and other contaminated disposable equipment. These bins should be provided in all service rooms and bathrooms and emptied regularly. Workers doing outcall bookings should be provided with sealable plastic bags for disposing of used PPE.

Workers should wash their hands with soap and water after disposing of condoms and other barriers, or handling other equipment which has been used or could be contaminated.

All workplaces should provide non-reusable sharps containers for objects such as syringes, needles, razors and scalpels. Any object that cuts, punctures or otherwise breaks the skin should be disposed of in a sharps container immediately after use. Any object which has come into contact with a client's blood or has broken the skin should only be handled for disposal by the client, or by a worker wearing gloves.

There should be sufficient time allowed between room bookings for workers or cleaners to change out bed linen and follow correct room and equipment cleaning protocols without having to rush.

Disclaimer

This publication provides general guidance. It is not possible for WorkSafe to address every situation that could occur in every workplace. This means that you will need to think about this guidance and how to apply it to your particular circumstances.

WorkSafe regularly reviews and revises guidance to ensure that it is up-to-date. If you are reading a printed copy of this guidance, please check worksafe.govt.nz to confirm that your copy is the current version.

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