

**Abstract submitted for the WAS Congress SYDNEY APRIL 15-19, 2007****Presentation Style:** Podium**Theme:** MISCELLANEOUS: 99: Sexual Surrogacy.

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**Title:** Sexual Surrogacy and Sex Work: similarities and differences.**Author:** Rachel Wotton and Saul Isbister: ISIS CATS**Introduction:** This presentation seeks to explore the similarities and differences within the professional capacities of sexual surrogates and sex workers, drawing from the personal experiences of both authors.**Background:** Sexual surrogacy has formally occurred as an adjunct therapy option since Masters & Johnson famously introduced it in the 1960's. Since then sexual surrogacy has been utilised in a variety of manners in various countries around the world, including America, Australia and Israel. In contrast, sex work occurs almost universally around the world.**Issues:** Sexual surrogacy and sex work may both include sexual interactions with a client. Myths and preconceptions about both occupations abound. A lack of knowledge of what actually occurs in either work environment can cause confusion in differentiating roles played and the different intentions behind services provided to clients. This may contribute to a failure of therapists to adequately consider sexual surrogacy as a possible treatment option to be incorporated into a therapeutic plan.

In addition, emerging and current practises in both fields, in conjunction with changing legal frameworks, have not yet been incorporated into many therapeutic Codes of Conduct/ Ethics. This places an additional barrier for those wishing to pursue sexual surrogacy as a viable therapeutic option.

**Recommendations**

Increasing awareness and knowledge of developments in both fields will allow therapists to be better informed about the potential benefits of sexual surrogacy.

We believe the practice of sexual surrogacy will predominately remain 'underground' until fears of some stakeholders can be addressed. Consultation, as part of the creation of Better Practice Guidelines, could address such fears. Guiding Principles could facilitate a more secure working environment between therapists and surrogates in the future, building upon positive outcomes we and others, have previously observed.