



A RAPID SCOPING ASSESSMENT OF

THE IMPACT OF COVID-19 ON SEX WORKER PROGRAMMES

IN EAST AND SOUTHERN AFRICA

UNFPA East and Southern Africa

SUMMARY



Summary

This report investigates the impact of COVID-19 on sex worker communities and sex worker organizations in East and Southern Africa. It details their struggle to survive in the face of the twin threats of contagion and unemployment and the difficulties encountered when attempting to access formal government-led assistance programmes. The assessment also describes how community-based organizations — drawing heavily on trusted community systems established during the earlier HIV response — responded swiftly and creatively to the plight of sex workers, ensuring the continuation of human rights and sexual and reproductive health during the pandemic.

The report considers the successes and failures in this community-led response, identifies good practices, considers the lessons learned, and provides recommendations to ensure that sex workers are not left behind as the COVID-19 pandemic evolves or in future humanitarian crises.



Background

Governments in East and Southern Africa instituted a range of containment measures to prevent and slow the spread of COVID-19, including declaring states of emergency, states of disaster and public health emergencies. These measures resulted in economic contraction across the region and surges in unemployment, poverty and hunger. At the same time, unprecedented powers were conferred on police and security forces, resulting in widespread human rights violations against citizens under the guise of enforcement of lockdowns.

Like all humanitarian crises, COVID-19 affects different people differently, highlighting structural inequalities, exacerbating gender inequality and disproportionately impacting the marginalized and dispossessed. This study demonstrates that sex workers' vulnerabilities are compounded when they have multiple identities and acknowledges the intersecting vulnerabilities of sex workers who are lesbians, gay and bisexual men, transgender people, migrants and sex workers who are homeless.

This report follows a rights-based framework as recommended by UNFPA, WHO, UNAIDS and others, that puts sex workers at the centre of any strategy to improve the health, human rights and gender equality of sex workers. It recognizes the complex nuances of agency and choice involved in the sale of sex and does not seek to frame sex workers as victims. In this respect, it differs from historical reports that tend to frame sex work as a negative coping strategy in the face of humanitarian disasters.

Methodology

This study examines the impact of the COVID-19 pandemic on three domains of sex workers' lives (livelihoods, human rights and health), as well as the effect on the functioning and responsiveness of organizations that provide services to sex workers (which may or may not be sex worker-led).

Findings

The widespread hardship, disruption and violations of health and human rights described in the report are attributed less to the pandemic itself than to containment measures imposed on communities. The consequent lockdowns, social distancing measures and quarantine procedures saw the closure of entertainment venues, the imposition of dusk-to-dawn curfews, stay-at-home orders, border closures, and the suspension of the hospitality and tourism industry. The result was a sudden and dramatic loss of income for the vast majority of sex workers with profound consequences for their livelihoods, human rights, and health care.

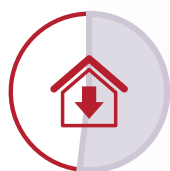
Impact on livelihoods



Predictably, loss of income was identified as the greatest challenge to livelihoods by **78 per cent** of respondents in the online survey.



Almost **54 per cent** linked loss of income to food insecurity for themselves and their dependents.



Loss of housing was cited by **52 per cent**.



Other livelihood impacts included displacement or migration (**4 per cent**).



Exclusion from government social protection schemes and other relief efforts (nearly **12 per cent**).

Almost 80 per cent of respondents in the online survey (78.26 per cent) identified loss of income as the greatest challenge to livelihoods. Fifty-four per cent linked loss of income to food insecurity for themselves and their dependents, while 52 per cent cited loss of housing as having the biggest impact. Other factors impacting sex workers' livelihoods included displacement or migration (4 per cent) and exclusion from government social protection schemes and other relief efforts (12 per cent). Many sex workers faced eviction from their homes,

either through the closure of venues that provided accommodation or because they could not pay rent. Others migrated to rural and peri-urban areas to stay with family or search for clients in areas with fewer lockdown restrictions. Where social protection measures or humanitarian relief was available, sex workers struggled to access it due to stigma and discrimination. Lack of information and no identity documents or proof of address compounded their difficulties. The illegal nature of sex work also made it difficult to access formal unemployment insurance.



Impact on human rights



Police violence (including murder, assault, rape, harassment and extortion) was mentioned by **49 per cent** of survey respondents.



Respondents also noted an increase in stigma and discrimination towards sex workers (**42 per cent**).



As well as an increase in arrests, including arbitrary or unlawful arrest (**36 per cent**).

Just under half of the respondents (49 per cent) reported having been a victim of police violence (including murder, assault, rape, harassment and extortion) during lockdown. Respondents also noted an increase in stigma and discrimination towards sex workers (42 per cent), as well as an increase in arrests, including arbitrary or unlawful arrest (36 per cent). In total, sex workers experienced the following human rights violations: the right to life; the right to liberty and security of person; the right to freedom from discrimination; the right to freedom from gender-based violence; the right to social security; the right to an adequate standard of living, including adequate food, clothing and housing; and, the right to the enjoyment of the highest attainable standard of physical and mental health.

Impact on health care

Access to health care for non-COVID conditions proved the biggest challenge for 49 per cent of respondents, specifically as they related to HIV treatment services (52 per cent); HIV prevention services (22 per cent) and sexual and reproductive health services (22 per cent). Stigma and discrimination in health services were also reported by 12 per cent, with sex workers labelled as vectors of the COVID-19 virus. Surprisingly, few sex workers cited the risk of contracting COVID-19, even though the nature of sex work makes it highly risky for COVID-19 transmission. This is significant given preliminary findings that suggest that people living with HIV are at increased risk of mortality from the coronavirus. Additionally, hunger impacted the ability of HIV-positive sex workers to adhere to antiretroviral therapy.



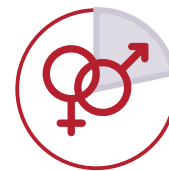
49 per cent of respondents reported that sex workers had challenges accessing health facilities.



Specifically, as they related to HIV treatment services (**52 per cent**).



HIV prevention services (**22 per cent**).



Sexual and reproductive health services (**22 per cent**).



Stigma and discrimination in health services were reported by **12 per cent**.

Impact on sex worker programmes

Sex worker organizations had to respond to the new challenges posed by the pandemic and find ways to continue providing their usual health and human rights services. Immediate priorities included conducting rapid needs assessment surveys, applying for donor emergency grants, and negotiating with donors to reprogramme. Others appealed for funds and goods from their members, set up crowdfunding campaigns, partnered with humanitarian and charitable organizations, or implemented income-generation schemes. Interventions to meet the urgent humanitarian needs of sex workers included: assisting sex workers to apply for emergency grants where these existed, partnering with humanitarian relief organizations, distributing food and hygiene hampers, advocating with landlords to prevent evictions, and sourcing emergency accommodation. Despite these efforts, the gap between the need for livelihood support and the available resources remained one of the biggest challenges of the COVID-19 response.

To maintain access to HIV and SRHR services, sex worker organizations mobilized peer educators to provide decentralized services, including home deliveries of ARV and PrEP refills, condoms and lubricants. Organizations also accelerated the implementation of multi-month dispensing over a three- or six-month period and made extensive use of WhatsApp groups, which served as a lifeline for mutual support during the crisis.



CONCLUSIONS AND LESSONS LEARNED

Facilitators of an effective response to sex workers' needs during COVID-19

Programmes and organizations that responded rapidly and creatively to sex workers' needs during COVID-19 had at least one of the following enablers in common:

They were community-based and community-led, allowing them to mount a multi-pronged response tailored to the needs articulated by their constituents. The same approaches that civil society organizations (CSOs) deployed to address structural and social barriers to HIV proved equally effective in response to COVID-19: taking services to the community, ensuring participatory processes, protecting human rights, reducing stigma and discrimination, and preventing and responding to violence.

They employed peer educators and used microplanning, allowing them to leverage the strong social relationships with sex workers and maintain virtual or in-person contact and ensure continuity of services, even when sex workers had been displaced.

They leveraged existing partnerships with governments, development partners, and other civil society organizations as part of the HIV response, thereby accessing services and resources that they could not have provided on their own.

They had social capital. Defined as “features of social organization such as networks, norms and social trust that facilitate coordination and cooperation for mutual benefit,” social capital emerged as a critical enabler of an inclusive and equitable public health response to mitigate the impact of COVID-19.

Barriers to an effective response

Criminalization and human rights violations against sex workers increase vulnerability

The criminalization of sex work placed sex workers at greater risk and obstructed an effective, rights-based response.

Critical community-led responses are not adequately supported

The chronic underfunding of key population programmes was a significant barrier to responding fully to challenges experienced by sex workers during COVID-19.



RECOMMENDATIONS

The report ends with recommendations, based on case studies, to improve the livelihoods, human rights and health of sex workers and strengthen sex worker organizations.

Include sex workers in social protection and humanitarian relief efforts

Governments and development partners should recognize sex workers as a vulnerable population and include them in social protection measures and humanitarian relief efforts. There should be greater collaboration between the humanitarian sector, the HIV sector and sex worker organizations.

Provide support for economic empowerment programmes

Governments, UN partners and donors should provide financial and technical resources to support evidence-based, rights-based economic empowerment programmes for sex workers.

Recognize that sex work is work and uphold sex workers' labour rights

States should extend to sex workers all the legal protections and rights to which all workers are entitled. Within the UN, ILO should take the lead in supporting sex workers in advancing a decent sex work agenda and emphasizing that sex work is work. In this, they should be supported by other UN partners, with an alignment of messaging.

Decriminalize sex work

Governments in East and Southern Africa should move decisively towards decriminalizing adult, consensual sex work. UN partners should unequivocally continue to advocate for decriminalization and respect for human rights and should also support the advocacy of sex worker organizations.

Strengthen action to reduce stigma and discrimination towards sex workers

All stakeholders, including governments,

development partners, donors, the private sector, civil society and communities, should work together to reduce stigma and discrimination and ensure access to justice for sex workers.

Address violence against sex workers

Proven strategies to address violence against sex workers must be strengthened and scaled up. This includes community empowerment, documenting human rights violations, fostering police accountability, strategic litigation, legal support, rights literacy training, appealing to National Human Rights Institutions (NHRIs), and leveraging global commitments.

Decentralize and de-medicalize services

Community-based service delivery should continue to be scaled up, and peer educators must continue to be trained to provide these services while ensuring that adequate supervision and quality control are in place.

Harness Internet-based service provision

Harness Information and Communication Technologies (ICT) platforms to enhance community mobilization, capacity-building, advocacy, peer education, dissemination of health and human rights information, adherence monitoring, referrals, and other sex worker programme functions. Sex workers should play a key role in helping to shape new interventions, carefully assessing the risks and dangers as well the benefits.

Strengthen support and funding for community-based and community-led programmes

Community-based and community-led sex worker organizations should be adequately funded and supported by governments, donors, UN partners, and others to provide holistic, integrated, person-centred services to sex workers.

Conclusion

While resources are needed urgently in the short term to allow sex workers to recover from the adverse effects of economic downturns on their health and livelihoods, it is also critical to strengthen community systems and social capital to protect against future crises. The crisis precipitated by the COVID-19 pandemic has provided an opportunity for re-visioning social, political and economic systems and has strengthened calls for an inclusive, transformed, people-centred health care system, including a renewed urgency to achieve universal health coverage.



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