Challenges

Sex workers across Southern Africa experience different forms of violence, ranging from humiliation to physical and sexual violence. Structural barriers such as stigma and discrimination and criminalisation hinder sex workers to access to comprehensive rights based services. In many cases sex workers rely on public health services, however these are often inaccessible for sex workers located outside of the urban areas.

For over a decade North Star Alliance, a health services provider, has been operating a network of Roadside Wellness Centres at border posts, ports and truck stops. Their Blue Boxes are repurposed shipping containers painted blue that have been equipped as clinics. Hands Off partners noticed that while the Blue Boxes fill a significant healthcare gap, sex workers did not feel comfortable and confident enough to use their services. So simply placing clinics in accessible locations was not enough.

What we did

1. Building an inclusive, health-literate community
North Star Alliance trained sex workers as peer educators who can mobilise their peers to visit the clinic, and share information on HIV and STI testing and treatment, negotiating safe sex, personal safety and the importance of regular primary healthcare. Crucially, peer educators are trained to provide psychological and social support and to help sex workers adhere to their antiretroviral therapy protocols. Because they are sex workers themselves, other sex workers are more ready to trust them, and to find a role model in them. Peer educators are added to the typical Blue Box staff of one nurse, one HIV lay councillor, a security guard and a data administrator.
2. Setting up multi-stakeholder teams
Aided by the Hands Off programme, North Star Alliance developed a unique and practical multi-sectoral approach to combat violence against sex workers by setting up four Crisis Response Teams (CRTs). First piloted in Botswana, South Africa and Zimbabwe, they include sex workers themselves, along with members of the surrounding community, such as police officers, religious leaders and legal aid representatives. Influential people whose roles and strengths are relevant to the challenges faced by sex workers but have previously gone untapped.

3. Addressing violence rapidly and effectively
CRTs spring into action when a sex worker is assaulted, threatened or arrested. In a crisis situation they contact the peer educator or local CRT leader, who sets a response in motion: they will inform other CRT members, go to the scene, alert police, ensure the sex worker’s safety and coordinate any health, legal or social services needed. Aidsfonds emergency funds can be applied for to cover hospital bills or the costs of moving a survivor to a safer location.

The diversity of skills present in any CRT means the various tasks are carried out by qualified staff, all the way down to police representatives who will track down the perpetrator.

What has changed?
Crisis response teams address violence against sex workers rapidly and effectively through a collaborative and inclusive response. This has translated into gains in terms of safety for entire communities, and has been found to succeed in combating stigma and discrimination.

Specifically, peer educators have mobilised a growing number of sex workers to access reproductive and sexual health services by using the clinics. Eight Blue Boxes deploying CRTs have seen over 47,000 individual sex worker visits in two years.

Primary healthcare interventions, HIV/STI testing and treatment, pre-exposure prophylaxis (PrEP) and 225 cervical cancer screenings financed by Aidsfonds have been carried out. Nearly 500 sex workers received training on HIV prevention, health seeking behaviour, counselling and testing as well as sexual and reproductive health.

What’s next?
Scale up! CRTs address the immediate and practical needs of sex workers in crisis, as well as the structural roots of violence such as poverty, stigma and discrimination. They are designed in a way that can be replicated, with appropriate support and building on lessons learnt, across Southern Africa to sustainably support the most volatile communities through tailored sexual health services.

“In Victoria Falls, it has been amazing. The police department is totally our friends in the sense that they are part of the Crisis Response Team and they are also in our chat groups, they attend all our meetings. They are basically a WhatsApp message away, they are basically a phone call away. Through this project, they have really become friends of sex workers in Victoria Falls.”

– Programme coordinator North Star Alliance
A COMMUNITY-LED RESPONSE TO VIOLENCE

North Star Alliance provides free and sex worker-friendly health services along main highways. Sex workers face violence from the community, and often don’t find their way to the clinic.

2015: Sex workers are trained to mobilise their peers to visit the clinic.

To reduce community violence, crisis response teams were set up. The teams consist of influential community members.

The teams spring into action when a sex worker is assaulted. The team is just one phone call away.

2019: The approach works. Sex workers feel safer and face less stigma from the community.

More than 42,000 sex workers now receive the healthcare and HIV services they need.

For more information visit www.aidsfonds.org