Sex work & violence in Botswana.
Needs Assessment report
Reducing violence against sex workers
The Hands Off! programme focuses on the reduction of violence against sex workers in Southern Africa through prevention, care and support activities. Violence is a key factor in the vulnerability of sex workers to HIV/AIDS. It leads to inconsistent condom use and prevents sex workers from accessing valuable legal support and health care. Hands Off! works with sex worker-led groups, law enforcement, health and support services, legal centres and non-governmental organisations (NGOs) working on human rights.

Research findings on sex work and violence in Southern Africa
This report presents the main findings of a study in Botswana examining violence against sex workers. It is part of a regional study in the Southern African region under the Hands Off! programme.

The research was designed by sex workers and partner organisations in the Hands Off! consortium. Sex workers in the five programme countries – Botswana, Mozambique, Namibia, South Africa and Zimbabwe – participated in the implementation of the research and the dissemination of results. Regionally the quantitative research part entailed more than 2000 surveys conducted by 37 sex workers who were trained to interview their peers. For the qualitative part of the study researchers conducted 115 semi-structured in-depth interviews and 25 Focus Group Discussions with sex workers. Topics included: violence, social networks, police attitudes, safety, security and risk mitigation strategies.

Country reports and fact sheets on sex work and violence are available for:

Botswana
Mozambique
Namibia
South Africa
Zimbabwe
Southern Africa (regional)

Collaborating institutions
Sisonke Botswana
Botswana Network on Ethics, Law and HIV and AIDS (BONELA)
North Star Alliance
Vrije Universiteit, Amsterdam

June 2017
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## Abbreviations

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<th><strong>AIDS</strong></th>
<th>Acquired Immune Deficiency Syndrome</th>
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<tr>
<td><strong>ART</strong></td>
<td>Anti-Retroviral Treatment</td>
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<td><strong>BBSS</strong></td>
<td>Behavioural and Biological Surveillance Survey</td>
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<td><strong>FGD</strong></td>
<td>Focus Group Discussion</td>
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<td><strong>HIV</strong></td>
<td>Human Immunodeficiency Virus</td>
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<td><strong>IBBS</strong></td>
<td>Integrated Biological and Behavioural Survey</td>
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<td><strong>NGO</strong></td>
<td>Non-governmental organisation</td>
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<td><strong>STI</strong></td>
<td>Sexually Transmitted Infections</td>
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<td><strong>VU</strong></td>
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Executive summary

Background
Violence is a key factor in the vulnerability of sex workers to HIV/AIDS. Violence prevents sex workers from accessing valuable information, support and services that help to protect them from HIV/AIDS. With the Hands Off! Programme, Aidsfonds (www.aidsfonds.nl/handsoff) and partners1 aim to reduce violence against sex workers in Southern Africa. The programme, a regional response, offers a comprehensive and joined-up approach to working with sex workers, police, law enforcement and service providers in Botswana, Mozambique, Namibia, South Africa and Zimbabwe.

Methods
A mixed method community-based participatory research (CBPR) approach was used. All partners, including sex workers, contributed to the design and implementation of research and tools. Both quantitative and qualitative components were developed in cooperation with the Vrije Universiteit (VU University) in Amsterdam. In Botswana, eight sex workers were trained as research assistants working alongside a social scientist specialised in qualitative methods. In total, 545 surveys, 14 in-depth interviews and three Focus Group Discussions (FGDs) with in total 19 participants were conducted. Participants were selected through snowball sampling techniques, through which each respondent invited a fellow sex worker to participate in the survey.

Results
Results show that sex workers in Botswana experience high levels of violence, ranging from societal stigma and discrimination to beatings, theft and rape. The main perpetrators are clients and law enforcement workers, although sex workers can be highly violent towards each other as well. Sixty-six percent of sex workers in this study experienced violence in the past year. Sex workers from Francistown and Gaborone experience increased violence compared to those from Kasane/Kazungula and Palapye. Substance use significantly impacts sex workers’ risk of experiencing violence. The study also uncovered a surprising correlation between being HIV negative, or not being aware of one’s HIV status, and increased risk of experiencing violence.

Relationships of sex workers with law enforcement workers are problematic and characterised by mistrust. Many law enforcement workers abuse their power, and demand bribes in exchange for freedom. Although some sex workers do report positive police assistance, many are reluctant to seek help.

In an environment in which sex work is criminalised and violence widespread, sex workers have various strategies to promote safety and mitigate the risk of violence. Clients and working locations are carefully chosen. On the streets, sex workers work in pairs or groups to increase their security. To avoid economic violence, sex workers hide their money or give it to their friends for safekeeping.

Thirty percent of sex workers in this study are HIV positive. More than half (55%) of HIV positive sex workers receive regular treatment. This study suggests that positive health support largely depends on the health clinic they go to and the nurses they encounter. Many sex workers turn to support organisations, including those specifically for sex workers, for health, social and legal support.

Conclusions
Sex workers in Botswana face high levels of violence, stigma, discrimination and other human rights violations. To secure safety and wellbeing of sex workers in Botswana, the government is urged to decriminalise activities associated with sex work; to adopt supportive laws; and to develop preventative and protective services, care and support. In addition, specialised training and guidelines for law enforcement officers and improved police accountability are needed. Lastly the sex worker movement needs to be strengthened and supported to protect and defend sex workers’ rights.

1 The partners under the Hands Off! programme are the African Sex Worker Alliance (ASWA), BONELA, Sisonke Botswana, Sisonke South Africa, Sex workers Education and Advocacy Taskforce (SWEAT), Rights not Rescue Trust, Pathfinder, Tiyane Vaavasate, Sexual Rights Centre, Women’s Legal Centre, North Star Alliance and CDC.
Introduction.
Violence is a critical factor in the vulnerability of sex workers to HIV/AIDS. It prevents sex workers from accessing valuable information, support and services that can help protect them from HIV/AIDS. It also puts them in situations that make them more vulnerable to HIV/AIDS. Modelling estimates show that a reduction of almost 25 percent in HIV infections among sex workers can be achieved when physical or sexual violence is reduced [1]. A systematic review indicated a correlation with violence and condom use and HIV infection. Evidence also shows that psychical and sexual violence decrease condom use and increase HIV infection [2].

Numerous studies indicate a high level of violence towards sex workers, and linkages have been made between laws that criminalise sex work and increased vulnerability to violence [3]. Sex workers experience violence in different forms and on different levels. It ranges from blatant physical and sexual violence to social stigma, discrimination, coercion and harassment. Perpetrators are clients, pimps and brothel owners, but also family and community members [4], [5]. Even police are involved, and in some cases increase violence rather than protect sex workers from it. Thus violence against sex workers is not only widespread, but legitimised and accepted by many [6].

Laws and policies that criminalise sex work leave sex workers very vulnerable to sexual and physical abuse. Sex work is currently criminalised in most Southern African countries through national laws and municipal by-laws. Criminalisation contributes to an environment in which violence against sex workers is tolerated. Lack of protection of street sex workers and those working in isolated places is generally the result of anti-prostitution laws and police policies. The criminalisation of sex work also means that sex workers operate in unhealthy and unregulated conditions.

An overarching study by Decker at al. [7] reviewing 800 individual studies provides evidence of the global burden and impact of human rights violations against sex workers on HIV. The reviewed studies indicate that the rates of homicide are 17 times that of the general public, 7-89 percent of sex workers indicated sexual violence and 5-100 percent indicated psychical violence. Four to 75 percent experienced arbitrary arrest and detention, while 7-80 percent had condoms confiscated. Impunity or the failure to investigate and report police threats and violence is reported by 39-100 percent, highlighting the importance of sensitising police officers [7].

Through the Hands Off! programme, Aidsfonds (www.aidsfonds.nl/handsoff!) and partners2 aim to reduce violence against sex workers in Southern Africa. The programme offers a comprehensive and joined-up approach to working with sex workers, police, law enforcement and service providers in Botswana, Mozambique, Namibia, South Africa and Zimbabwe. Hands Off! involves the meaningful participation of sex workers and is based on sex workers’ own priorities and needs.

The programme aims to make health clinics more accessible to sex workers and uses community rapid response methods3 and sex worker-led protection systems as intervention strategies. Police sensitisation is employed to work towards a police force that respects the rights of sex workers. In addition, the programme partners work to improve sex workers’ access to justice by providing legal services and facilitating reform by bringing legal cases to court. Hands Off! has a strong capacity building component focusing on sex workers and sex worker-led organisations in the region. Lobbying and advocacy activities are carried out on law reform, and policies and practises involving sex workers. Research is carried out to generate evidence and knowledge on the effectiveness of the implemented intervention strategies.

Lack of reliable data makes the provision of comprehensive violence reduction and HIV prevention challenging. Data and information on human rights violations towards sex workers is often underestimated. Lack of systematic documentation of cases amongst this highly mobile target group challenges insight into the extent of the problem. In addition many of the strategies to reduce violence against sex workers have not been formally researched and evaluated [1]. To help bridge this gap, Hands Off! studied the needs of sex workers in Southern Africa using a team of 11 researchers, 37 sex workers trained as research assistants, and five coordinators.

2 The partners under the Hands Off! programme are the African Sex Worker Alliance (ASWA), BONELA, Sisonke Botswana, Sisonke South Africa, Sex workers Education and Advocacy Taskforce (SWEAT), Rights not Rescue Trust, Pathfinder, Tiyane Vaasvata, Sexual Rights Centre, Women’s Legal Centre, North Star Alliance and COC.

3 Sex worker-led referral network for medical, psychosocial and legal support.
Methods.
2. Methods

A mixed method community-based participatory research (CBPR) approach was used. This means that all partners, including sex workers, contributed to the design of the research and tools, selection of the hired researchers, gathering of the data and writing up of the results. Through the involvement of sex workers themselves, the programme aimed to reflect the actual needs of the sex worker community.

The research has two components – a quantitative and a qualitative aspect – and both worked with informed consent. During the initial meeting of the Hands Off! programme staff, experts and sex workers from all the participating countries developed the Theory of Change and established a topic list for the research. Based on this list both the qualitative and quantitative tools were developed in cooperation with the VU University in Amsterdam.

2.1 Quantitative methods

The survey questionnaire was established following participatory principles. The questionnaire was based on the established topic list and took into account existing questionnaires on violence related topics. Drafts were shared with experts and partner organisations within the five participating countries, and discussed among sex workers through Focus Group Discussions (FGDs) in each country. The final questionnaire had 88 questions and an approximate duration of 1.5 hour focusing on the following themes: 1) aspects of sex work, (such as working location, economic incentives, clients, immigration and reasons to enter sex work), 2) social network of violence, 3) violence and law enforcement, 4) prevention strategies, harm reduction and risk mitigation, 5) health and services, and 6) demographic variables.

In total 37 sex workers were trained as research assistants, based on standardised training focusing on different aspects of the questionnaire administration. In Botswana, 8 research assistants were trained. The following issues were part of the training: 1) violence as a concept, 2) different research methods and tools, 3) open versus closed question, 4) the research protocol, 5) different types of violence, 6) sampling techniques, 7) effect of attitude of interviewer, 8) ethical consideration and referrals. There were many opportunities to practise using the tool in the field.

Through snowball sampling, whereby respondents invited fellow sex workers to participate in the study, a total of 1800 questionnaires were administered in the region. All questionnaires were uploaded in SPSS, a software package for statistical analysis. In Botswana, 545 surveys were administered.

2.2 Qualitative methods

For the purpose of this report, violence has been categorised and defined as:

**Physical violence:** Any deliberate use of physical force against sex workers with the potential for causing harm. This includes, but is not restricted to, beating with hands or objects, kicking and pushing.

**Sexual violence:** Any sexual act, or attempt to obtain a sexual act, to which consent is not being given. This includes, but is not restricted to, rape, attempted rape, unwanted sexual touching and sexual harassment.

**Emotional violence:** Any act that diminishes sex workers’ sense of identity, dignity, and self-worth, including threats, harassment, belittling and shaming and being made to feel unworthy. This includes, but is not restricted to, discrimination.

**Economic violence:** Any act aimed at depriving sex workers from their money, including, but not restricted to, exploitation, theft, and clients not paying for sex workers’ services.
2.3 Study sample

The total sample of this study (N=545) consists of sex workers from Gaborone (N=201), Kasane/Kazungula (N=151), Francistown (N=101) and Palapye (N=92). Within this sample, the average age of sex workers was 31 years (range of 16-54 years). Most of them (92%) were female, five percent were male and three percent were transgender. The majority of sex workers (55%) were originally from Botswana, 42 percent from Zimbabwe and the remaining three percent from countries such as Malawi, Mozambique, Swaziland and South Africa.

The majority are single (71%), 22 percent are in a relationship but not married, one percent are currently married, four percent divorced and another two percent are widowed. Almost all sex workers have children (93%), with an average of two. Thirty percent of respondents completed grade nine or ten of secondary school. Others completed primary school (9%), secondary school grade eleven or twelve (28%), vocational training (7%) or university (4%). Sixteen percent attended school but never completed any level, and five percent never attended school at all. The majority (85%) of sex workers in this sample have an ID card or passport.

The average age when these sex workers started working in the sex industry is 25 years (minimum 13 and maximum 47 years). Twenty-one was the most common age to start. Most common reasons for entering sex work were: need for money (91%), looking for a better life (91%) or the situation forced them (86%). Others needed to take care of the children (73%) or their parents (68%), they needed money for their studies (64%), liked the job (66%), or the freedom that comes with it (57%). Sixteen percent were forced into sex work and 10 percent indicated that drug use played a role.

Sex workers in this sample operate from streets (84%), clubs (83%), a bar/tavern/shebeen (80%), or truck stops (71%). Other working locations mentioned were: hotel (58%), casino (43%), market places (41%) and brothels (37%). Sex workers on average work from six different locations. They stay in contact with their clients through their phone (84%) and through the internet (39%). Eleven percent of sex workers in this sample work with a pimp.

Almost half of sex workers (45%) have additional sources of income: working in an office (22%), selling clothes (16%), working as a nanny (13%), domestic worker (9%) or cleaner (7%), running a food or beverage stall (6%), working at a bar (6%) or at the market (5%).
Country context.
3. Botswana country context

3.1 Legal framework

Legislation in Botswana does not criminalise the selling or buying of sexual services per se. Sex work is in effect criminalised by legal provisions that prohibit a wide range of activities associated with sex work such as soliciting clients, public indecency or living on the earnings of sex work. In Botswana, the following laws maintain the criminalised nature of sex work:

- **The Botswana Penal Code, section 149, 154, 155, 156 and 157.** These sections criminalise procuring any person to have unlawful carnal connection or become a prostitute; living on the earnings of prostitution; persistently soliciting for prostitution; aiding prostitution for gain and brothel keeping. Soliciting to sell sex in public places is criminalised by provisions about nuisance and loitering.

- **The Botswana Penal Code, section 184** makes it an offence for an HIV positive sex worker to do anything which is likely to spread the infection. Sexually Transmitted Infection (STI) and HIV testing are officially voluntary and confidential. [8]

- Sex workers have also been arrested and detained under Section 176 of the Penal Code which broadly prohibits 'common nuisance'.

Section 50 (2) and (3) of the country’s Immigration Act 4 prohibits sex workers or people who live or have lived on the earnings of prostitution from entering the country. The Minister of Labour and Home Affairs can issue a deportation order against undesirable immigrants and if they do not comply with a deportation order, undesirable immigrants are subject to involuntary removal.

**Lesbian Gay Bisexual Transgender and Intersex rights**

Botswana criminalises sexual activities between women and women as well as men and men through the Penal Code and is referred to as an ‘unnatural act’. Transgender and Intersex are also not recognised in terms of gender identity; therefore, finding themselves marginalised and vulnerable to all violence.

3.2 Context of sex work in Botswana

Estimating the character and magnitude of sex work in Botswana is challenging, since limited data exists. The 2012 HIV/STI Bio-Behavioral Study (BBSS) provides the best research of the context of sex work in Botswana. This study surveyed female sex workers in the urban centres of Gaborone, Francistown and Kasane. The BBSS estimates that 4,153 sex workers operated in the three major cities of Botswana: Gaborone (2,722), Francistown (1,065) and Kasane (366). [9] Size estimates for male or transgender sex workers are not available.

The study shows that sex work is conducted in a wide range of locations: from outdoor and street based sex work to bars, hotels, homes or hostels. In the three studied districts, sex workers were mobile, but more so in Kasane, since travelling to and from neighbouring countries is easy in this border town. [9] Another study shows that sex work is also widespread in mining and border town; along major roads and at truck stops, and that the women carry out sex work as a means to achieve financial and personal autonomy. [10]

3.3 HIV and violence

The 2012 HIV/STI BBSS estimated an HIV prevalence of 54 percent amongst sex workers in Francistown, 65 percent in Gaborone and 69 percent in Kasane. The majority of sex workers in this study (88%) had never been tested for HIV. More than half were tested in the past year (65%) and sixty-one percent of sex workers in this sample had attended an HIV-related meeting in the past year. Sex workers were highly exposed to HIV information through mass media. Sex workers received HIV related information from health workers and NGOs (respectively 57.8% and 23.2%). They received condoms from clinics (56,8%) and peer or health educators (8.5%) [9].

Despite high HIV prevalence, only about 56 percent of female sex workers in capital cities have been reached by HIV prevention services. Punitive policies and criminalisation of sex work, enforcement efforts, stigma, substance abuse, and the threat of violence all limit sex workers’ access to HIV prevention services, undermine their ability to negotiate condom use, and limit rigorous assessments of HIV interventions targeting sex workers. [9] Although Botswana’s National Strategic Framework 2010-2016 emphasises the need to increase HIV prevention for most at risk populations as one of its key prevention measures [11], to date the government has not sufficiently prioritised the prevention of HIV and other STIs in sex work settings. [12]

The offer of higher payments for not using condoms and excessive alcohol and drug use influence sex workers’ safer sex decision-making. The majority (73.4%) of sex workers in this sample consumed alcohol in the past month, with 10.6% drinking alcohol daily, and a further 47.2% at least once a week. Ten percent of sex workers used marijuana in the past month. [9].

Up until now, a limited number of studies have shed light on violence against sex workers in Botswana. Most of the information is about emotional violence, showing that sex...
workers face discrimination and degrading treatment at health care facilities, which discourages health-seeking behaviour. In these studies, sex workers report that they experience harsh, abusive and discriminatory language and that some health workers fail to provide Anti-Retroviral Treatment (ART) treatment [13].
4. Violence against sex workers

This Hands Off! study revealed that 66 percent of sex workers experienced violence in the past 12 months. In Botswana, violence takes different forms and is perpetrated by different actors, meaning that sex workers are confronted with emotional, physical, sexual and economic violence on a regular basis.

4.1 The community

The general attitude towards sex workers in Botswana is moralistic, embedding sex work in a context of stigma and discrimination. This study revealed that the majority of sex workers (73%) experienced discrimination in the past 12 months. More than half (55%) experienced being called names. The word *me-nice*\(^5\) is often used to humiliate them.

Forty-two percent of sex workers were blackmailed in the past year. All of this shows that sex workers are confronted with emotional violence from the community on a regular basis. In order to avoid violence and to avoid gossip and humiliation, respondents prefer keeping their work secret.

> When we walk in the streets we encounter violence of being called different names. We are being discriminated by what we wear. When I have put on stilettos it means I am a ‘me nice’. I am the lady who sells her body.

- Female sex worker, Gaborone

In Gaborone, gangs assault and attack sex workers while at work. It is assumed that these attacks partly account for the physical (26%) and sexual violence (13%) perpetrated by community members, in this study. The exact nature of physical and sexual violence perpetrated by the community, however, remains unclear.

4.1.1 Family, friends and partners

The relationship of respondents and their families is often double-edged. On the one hand, family members can provide sex workers with all kinds of support, ranging from shelter, food and advice, to taking care of their children. However, family members can also be harsh, especially if they know their child or sister is involved with sex work. One Gaborone respondent said that she sometimes feels she is considered a means of income more than a family member. She explains that she is regularly chased away from home to do sex work when her family runs out of money: ‘If you are a sex worker, you are not treated like others, you are not being loved’.

Quantitative data shows that sex workers experienced physical violence (19%) and sexual violence (12%) perpetrated by family members although the qualitative data does not show exactly how this violence occurs. Sex workers in this study refer to sisters as friends and friends as sisters. The findings suggest that these ‘sisters’ and ‘friends’ are often sex workers as well. Respondents are secretive about their work with friends outside of the business. They experienced physical (18%) and sexual (10%) violence perpetrated by friends, but the exact dynamics of this violence remain unclear and needs further in-depth investigation. Respondents also reported physical (23%) and sexual (17%) violence by intimate partners. The specifics of this violence remain unclear, although it is assumed it mostly happens in domestic spheres.

4.1.2 Clients

Clients are the main perpetrators of violence against sex workers in Botswana, and mistreat sex workers in numerous ways. This study shows that sex workers experienced high levels of economic (49%), sexual (35%) and physical (40%) violence by clients in the past 12 months. The study shows that these different forms of violence might happen simultaneously. For example, it is common for sex workers to be beaten up for money.

\(^5\) Derogatory word used to shame sex worker, but also used by sex workers amongst themselves.
Economic violence

This study revealed that economic violence is most commonly perpetuated by clients, and was experienced by almost half (49%) of respondents in the past year. Economic violence takes different forms: clients steal money and belongings from sex workers, or consider buying drinks and food for sex workers as a means of payment for services. Other clients pay less than the amount initially agreed on, or refuse to pay at all.

I used to have a regular client who would normally give me P250. I even serviced him in the afternoons when the kids went to school, so I trusted him because he was also an older man. One day he came and after the sex he said ‘let me go get something from Spar’ and went forever. He switched off his phones, and until now he never paid me.

- Female sex worker, Gaborone

Economic violence often leads to physical conflict between clients and sex workers. Clients sometimes turn aggressive in order to avoid payment, whilst sex workers get aggressive in order to defend themselves and make sure that they receive the amount that was initially agreed on. Respondents admitted they sometimes also steal money and belongings from clients. Although this happens when clients do not pay, sex workers also steal from clients who have paid them. One respondent considers this stealing a means of taking the law into her own hands.

Physical violence

Physical violence is another form of violence frequently experienced by sex workers. Almost half of them (40%) experienced physical violence by clients in the past 12 months. According to respondents, clients can be very aggressive: respondents shared stories of being beaten, or being stabbed with tyre levers. Several also report being left behind in remote areas by clients.

When the client told me to come and find him, instead he followed me and wanted to rape me. He beat me up and my leg was injured, the other one cut my hair and twisted my waist because I said ‘no condom, no sex’ but he beat me up and promised to kill me. He threw me in water and left me there.

- Female sex worker, Gaborone

Sexual violence

Sexual violence is frequently experienced by sex workers in this study. In the past 12 months, 35 percent experienced sexual violence by clients. Many respondents talked about being gang raped, or having sex without giving their consent. Clients also force sex workers into unprotected sex and can turn very aggressive if sex workers refuse this.

You might go to a client expecting to find him alone and when you get there you find 10 of them. Then they tell you, you know what we are all in and they will exchange you and there will be nothing you can do. They will switch off your phone, use you and after they finish they will take all the money you made and leave you there.

- Participant focus group discussion, Francistown

What fuels violence?

Study outcomes show that the more alcohol or drugs a sex worker uses, the higher the likelihood is that she or he experiences violence. Sex workers acknowledge this and explain that substance use makes them less aware of what happens to them while at work.

When you are drunk and sleep in the car of a client he might drive with you and go throw you in the bush or just somewhere you don’t know or any other dangerous place.

- Participant in Focus Group Discussion, Palapye

You become brave, you are not scared of anything. When you see a big car you don’t think anything can happen. You are just thinking about money and you are dizzy.

- Participant in Focus Group Discussion, Francistown
The geographical area a sex worker operates from is an additional risk factor for violence. Quantitative data shows that sex workers from Francistown and Gaborone experience increased violence compared to sex workers from Kasane, Kazungula and Palapye. The study also found a link between violence and sex workers being HIV negative, or not being aware of their HIV status. This finding is in contradiction with other global research [14]. Sex workers themselves also note that asking clients for a condom sometimes leads to violence. Respondents believe that their criminalised status is a trigger for violence. One of them said: ‘If it [sex work] was legal there would be no violence. Because of this status, perpetrators know sex workers stand no chance in going to the police.’ As another sex worker in Palapye said: ‘They know that we cannot report them.’

I really do judge, I pay attention to detail what kind of a person you are, because some can come and just say ‘hey I want to buy’ and others just come flashing their money and saying ‘where are the girls selling the vagina’. That one will not pay you, he just can't, so it’s better you don’t go far.

- Participant in Focus Group Discussion, Palapye

Violence also occurs when sex worker and client are together. In these cases, self-defence is of major importance. Respondents said: ‘Fight as much as you can’, and ‘Look for stones or a bottle, whatever you can find so that you can run away’. To defend themselves, sex workers bring all sorts of tools ranging from pepper spray and knives to sewing nails and chillies. Using chillies is most common amongst respondents:

Put it into the toilet paper to make things easier so that he doesn’t know what you got. When he is delayed by the chillies on his eyes, you run for your life.

- Participant in Focus Group Discussion, Palapye

To avoid economic violence, respondents insist on receiving their payments before providing any services, or they leave their money with colleagues. When asked what measures need to be taken to make life safer for sex workers in Botswana, respondents said that sex work should be decriminalised and that safe working places should be established. Several respondents propose legalising brothels.

Prevention strategies and risk mitigation
To avoid and mitigate the risk of violence, sex workers in Botswana adhere to a variety of strategies and techniques. Quantitative data shows that sex workers select their clients carefully. Almost all sex workers in this study (96%) refused clients in the past. Specific reasons for refusing clients were: the payment was too low (77%), he did not want to use a condom (75%), the sex worker knew the client (73%), did not like the client (71%), or knew about his violent character (70%). Other reasons included: the client did not look healthy (71%), was not respectful (66%), wanted to use alcohol or drugs (56%) or had sexual preferences the sex worker did not like (51%). Moreover, some respondents prefer regular clients over one night stands for they believe regular clients are less risky. Working places are considered important: several respondents refuse clients who try to take them to unsafe and remote places. In addition, respondents agree that being sober can be an effective prevention strategy for violence.
4.1.3 Other sex workers

Relationships amongst sex workers are double-edged. On the one hand, sex workers can be highly violent towards each other. Quantitative data shows that in the past 12 months, 46 percent of sex workers experienced economic violence, and 39 percent experienced physical violence by other sex workers. This violence is often fuelled by feelings of competition and jealousy. On the other hand, the qualitative research shows solidarity amongst sex workers as well. This is not to say that all relationships between sex workers are strong, but sex worker friends are usually very central to respondents’ social networks. Respondents frequently refer to ‘sex worker friends’ and groups of sex workers they live and work with.

Study outcomes show the importance of sex worker groups in mitigating the risk of violence. Respondents emphasised that sex workers should avoid working and walking alone. Instead they try to work with one or more sex workers at all times. This way, sex worker friends can get hold of each other’s clients’ number plates, names and telephone numbers. As one interviewee said: ‘If something goes wrong tomorrow, we will know where to go’ (interviewee Gaborone). Relationships between sex workers are important to share experiences of violence and develop joint strategies for preventing it. This happens, for example, in Freetown where groups get together to discuss experiences of violence and ways of preventing it from happening the next time. Respondents note that sex workers educate each other, for example on the importance of using condoms and sex workers’ rights.

4.2 The role of law enforcement officers

This study revealed that law enforcement workers are major perpetrators of violence against sex workers in Botswana. In the past 12 months, almost half (40%) of respondents experienced physical violence by police, and 25 percent experienced sexual violence.

There is consensus among respondents that law enforcement workers do not protect them. Instead, they search them for hotspots. This is often accompanied by physical violence. Law enforcement workers demand bribes – either sex or money – and arrest sex workers who refuse.

““So when you are at that spot whether you like it or not you have to run when you see the police, because they take our things. Some even take our phones and tell us they will take it from the charge office if we do not have money.””

- Female sex worker, Gaborone

Arrest

Almost half (48%) of respondents in this study were arrested in the past 12 months. On average, respondents were arrested six times and stayed in jail for four days. Specific grounds for arrest were: being a sex worker (43%), getting caught in a police raid (41%), carrying a condom (33%), soliciting clients on the street (27%) and stealing from a client (26%). During arrest, almost half of sex workers (49%) experienced violence, including physical violence (35%), and beatings (28%), or money (28%) and condoms (23%) being stolen. Twenty-six percent of sex workers were forced into sex during arrest. To prevent getting arrested, 37 percent of sex workers paid a bribe, and 32 percent had sex with the police.

In order to avoid arrest, respondents try to work at hidden locations. Working from a hotel or bar, for example, is considered safer than working from a hotspot. In addition, respondents bring an extra pair of clothes to change into in case police turn up. In order to avoid arrest, respondents try to work at hidden locations. Working from a hotel or bar, for example, is considered safer than working from a hotspot. In addition, respondents bring an extra pair of clothes to change into in case police turn up. Others plan their working hours carefully, trying to avoid working at times when police officers are more active.

4.2.1 Seeking police assistance

Because of the hostile attitude of law enforcement workers towards sex workers, respondents are reluctant to seek their assistance. They are afraid to reach out for fear of discrimination and judgement. Others suspect the police won’t help them anyway.

Although more than half of sex workers (52%) received positive police assistance in the past year, another significant proportion (40%) experienced discrimination in doing so. For example, respondents who did approach the police for help, were laughed at and were refused assistance.

In the past 12 months, 34 percent of sex workers filed an incident with the police. The majority of them (68%) were unhappy with the process. This can be explained by the fact that the police investigated only 19 percent of these cases. The remaining incidents were filed but received no follow up (29%), were refused (23%) or considered too complicated (12%). Seventeen percent of respondents do not know what happened to their cases.
Respondents feel that police rarely follow up incidences of violence, and rarely arrest their perpetrators. In fact, they explain, it is much more likely for police to arrest a sex worker instead. Nevertheless, respondents did refer to police officers who ‘understand’ and ‘help’ them as well. They may, for example, warn them of police raids. Respondents also gave examples of police officers making sure that clients paid them.

4.3 Health

4.3.1 Health services

Study findings suggest that respondents do receive health services, and that specific services for sex workers are available in Botswana. These services seem to be provided by civil society, and sex worker organisations. For example, sex workers in Palapye receive condoms distributed by the NGO Tebelopele which also facilitates HIV testing for sex workers in the city.

Having a positive experience seems to depend on the health clinic one goes to and the nurse(s) one meets.

Sex workers in Gaborone feel that hospitals and clinics are ‘fine’ and meet their needs. Several respondents mention they receive support from psychosocial workers, who are understanding and enable them to ‘offload their heart’.

However, some respondents are afraid to visit clinics. As an interviewee from Gaborone said: ‘because there is violence there’. Respondents are particularly afraid nurses will disclose their health issues to others. Over half (51%) of sex workers in this sample reported being verbally abused or judged by health workers in the past 12 months.

HIV/AIDS

Thirty percent of respondents are HIV positive, 17 percent said they are HIV negative, 11 percent have never been tested and 42 percent prefer not to disclose his or her status. More than half (55%) of HIV positive sex workers in this study receive regular treatment.

As mentioned earlier in chapter 4.1.3., this study shows a surprising correlation between HIV and violence. HIV negative sex workers, or those who do not know their HIV status, are at higher risk of experiencing violence compared to HIV positive sex workers.

Eighty-two percent of respondents report that they always use a condom while selling sex. They explain, however, that prices offered for having sex without a condom are sometimes hard to refuse. As a result, some of them would accept having sex without a condom. Several respondents mention they use female condoms to protect themselves.

A person knows very well that we like money. So, he puts money here and asks you whether you want to use a condom or not. You end up being tempted because you want money.

- Female sex worker, Gaborone

4.3.2 Supporting organisations

In Botswana, there are several support organisations for sex workers: Sisonke and BONELA are mentioned most often. The latter provide sex workers with legal and social support, as well as information about their health and rights. Respondents appreciate the workshops given by Sisonke and BONELA, and see them as contributing to their safety. Another support group often mentioned is Silence Kills. Several respondents said they would like to know more about their legal rights.
Conclusion.
5. Conclusion

Sex workers in Botswana work in a setting where activities associated with prostitution are criminalised. In this climate, they face high risks of violence and lack adequate access to health care and justice.

Sex workers in this study experience various forms of violence, ranging from discrimination and humiliation to beatings, rape and theft. The main perpetrators are clients and law enforcement workers. Sex workers can also be violent towards each other and their perpetrators. Sex workers from Francistown and Gaborone experience increased violence compared to those from Kasane/Kazungula and Palapye. Substance use significantly impacts their risk of experiencing violence. Being HIV negative, or not being aware of one's HIV status, increases sex workers' risk of experiencing violence as well.

In an environment where sex work is criminalised and violence widespread, sex workers have various strategies to improve their safety and mitigate risk. Clients and working locations are carefully selected. On the streets, sex workers work in pairs or groups to protect their security. To avoid theft and violence, they hide their money or give it to another sex worker for safekeeping.

In general, relationships between law enforcement workers and sex workers are problematic and characterised by mistrust. Many law enforcement workers abuse their power, and demand bribes in exchange for freedom. Although some sex workers do report positive experiences of police assistance, many are reluctant to seek help.

This study suggests that sex worker’s experience of health services largely depends on the health clinic they go to and the health workers they meet. Many sex workers turn to support organisations, including those specifically for sex workers, for health, social and legal support.

5.1 Recommendations

This Hands Off! study has three main recommendations:

1. Decriminalise sex work
Criminalisation of sex work in Botswana has created a climate of stigma, discrimination and violence. This affects not only sex workers’ personal safety but also their right to fair legal protection [15]. In addition, criminalisation of sex work leads to a ‘climate of impunity’ [7], enabling the perpetration of violence against sex workers with impunity whilst sex workers lack access to justice, legal aid and assistance [16] [17]. To address this, it is essential to remove laws that target the sex work industry. In a decriminalised setting, sex workers will be able to: report crimes to the authorities, expect protection from the police and have better access to health care. This will result in better protection of sex workers’ rights and greater opportunities for sex workers to organise themselves and work together for their improved safety and security.

2. Develop guidelines for law enforcement officers
Interventions to reduce violence need to include reform of current police practices. Since police behaviour is often shaped by moral judgements and personal standards, it is essential to shift police attitudes towards sex workers through training. This training should reflect the universal application of human rights, which are guaranteed to all persons including sex workers, as well as specific training and information on human rights issues facing sex workers. Guidelines should be developed, focusing on how to handle arrests related to violence against sex workers, how to register complaints from stigmatised people and above all how to handle cases with sensitivity and accountability.

3. Support and empower sex workers to advocate for their rights
Awareness of sex workers’ rights and equal protection before the law are needed to address the climate of impunity around violence and discrimination against sex workers. This not only requires an enabling legal and policy environment, but also empowerment and networking of sex workers. By working together, sex workers can protect and assist each other from, and in, violent situations and can advocate for their rights. Support and funding of sex worker-led initiatives is crucial to empower sex worker groups and communities.

Additional recommendation
In Botswana, studies on sex work and violence, and sex work in general, are limited. Therefore more research should be done in this area. Further research could also be conducted to determine the correlation between sex workers’ HIV status and risk of violence experienced in Botswana. The results of this needs assessment indicate a surprising correlation between violence and being HIV-negative, in contrast to findings from global literature indicating that sex workers who are HIV-positive face higher risk of violence [14]. More in-depth investigation in this research area is required.
References


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