

UNAIDS STRATEGY DEVELOPMENT

UNAIDS STRATEGY REVIEW: Focus Group Synthesis template

Country: Continental Focus Group Discussion (Africa)

Organizer: UNAIDS Regional Support Team for Eastern and Southern Africa (RST ESA) and Africa Sex Workers Alliance (ASWA)

Date: 12 October 2020

Theme discussed: **Sex workers, a community left behind in the HIV response, left behind in humanitarian crises responses. Can we break the cycle?**

Copyright © 2020
Joint United Nations Programme on HIV/AIDS (UNAIDS)
All rights reserved.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of UNAIDS concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. UNAIDS does not warrant that the information published in this publication is complete and correct and shall not be liable for any damages incurred as a result of its use.

UNAIDS STRATEGY REVIEW: Focus Group Synthesis template

Please use the template to organize your feedback from the session. Please keep responses succinct and as clear as possible to ensure our synthesis is a reflection of the focus groups hosted.

You can enter your report directly into a form on SurveyMonkey:

<https://www.surveymonkey.com/r/3HC9Q6M>

If you are not able to enter it on line you can send us a copy via e-mail strategyteam@unids.org

Would you accept for UNAIDS to make your report publicly available: **Yes** (without participants' names)

SECTION 1: Information about the focus group (to be completed by host of Focus Group)

Organization leading discussion: UNAIDS RST ESA and ASWA

Date of discussion: 12 October 2020

Theme to be discussed: **Sex workers, a community left behind in the HIV response, left behind in humanitarian crises responses. Can we break the cycle?**

Participants (types of organizations participating): 15 members of sex worker networks from ESA, 5 from UNHCR and UNAIDS Secretariat,

Country, regional or global focus: Continental focus (Africa) – with focus on two regions: Eastern and Southern Africa and West and Central Africa

Introducing the theme

- Sex workers around Africa face overwhelming stigma and discrimination, partly driven by social and moral norms, but predominantly due to criminalization of sex work, which represents a very substantial risk in the lives of sex workers.
- Stigma, discrimination and overall poor access to services, leading to human rights abuse, are exacerbated in humanitarian settings, where immediate response to a crisis with basic provision of services (shelter, food security, basic health, etc.) tends to overshadow more complex needs such as protection of human rights and inclusion of impacted communities (i.e., sex workers within a physically displaced community).
- Inclusion of sex workers is often tokenistic being regarded as passive “recipients” or mere “statistics”, and rarely as real agents of change, engaged in design and delivery of interventions.

- The needs of sex workers need to be approached more holistically beyond HIV- and health-related services, considering the social and political implications of sex work, to address livelihoods, access to justice, human rights violations. This need becomes more pronounced in crises and humanitarian settings where sex workers and other marginal populations are more vulnerable.
- Sex workers live in a constant humanitarian context at a micro-level (unable to access services, unable to access social protection, routinely facing personal violence and unable to access justice). *Sensu strictu* humanitarian crisis is defined as famine, drought, war, conflict etc., which means the daily life of a sex worker is not defined as a humanitarian crisis. Yet the consequences are the same.
- Meeting of sex workers in ESA requires a humanitarian crisis response approach – in the presence of or in absence of a natural or political disaster that affects a geographically-defined population. COVID19 and other emergencies only amplify the need for a humanitarian context approach.

SECTION 2: People-centered response to HIV – key emerging messages

Please enter the main messages coming out, up to 5 points maximum per section

REACHING THE PERSON	
How do we see the current situation?	During any humanitarian crisis, regardless of its classification, the overall situation for sex workers deteriorates including their ability to access services and claim their rights.
What concerns us?	<ul style="list-style-type: none"> • Sex workers over the age of 18 are normally considered by governments, donors and NGOs as either forced into sex work, and thereby exploited, or entering sex work at their own will. For some young sex workers this dichotomy results in receiving inappropriate treatment or being exposed to even greater risk (e.g., a victim of trafficking who receives care because a service provider does consider this factor, or a sex worker who entered sex work at their own will is 'rescued' - against their will) • Most programmes highlight the risks related to sex work or approaching sex workers from a medical point of view, very few programmes promote fair treatment of sex workers, address issues of violence against them, etc. Interventions should include sex workers at all levels and at all phases to ensure a rights-based approach. • Sex workers often need immediate flexible support and not a long-term plan. Most programmes aimed at sex workers target livelihoods (getting out of sex work) but little attention to immediate needs (food, shelter, medication)
What gives us hope?	<ul style="list-style-type: none"> • Interventions that promote income-generating activities coupled with training in business literacy and resource management, these programmes work and need replicating • Community-led HIV services (testing, prevention, treatment and care) are often more effective than services provided at facilities AND their impact goes beyond HIV. CSOs that provide these services -whether they are registered or not- should be enabled, funded and strengthened.
What constrains our ability to achieve our goals?	<ul style="list-style-type: none"> • The inability to communicate effectively, efficiently and swiftly across networks (both in terms of lack of capacity of sex workers organization and the lack of tools (laptop, generator, internet, etc)) • The disconnect between sex workers networks and service providers in training of trainers and peer-to-peer learning: impact and efficiency would be higher if health and social workers could support sex workers' networks in the development of training, rather than only providing services when needed. • Key population-earmarked funding, that considers sex workers as part of a homogenous "key population" group: sex workers are a highly diverse and intersectional group and need dedicated funding.

THE STRUCTURES THAT RESPOND TO HIV

<p>How do we see the current situation?</p>	<ul style="list-style-type: none"> • Most interventions focusing on sex workers are interventions designed for the general population: this may lead to services that do not respond to the specific needs of sex workers or delivered in an acceptable way to sex workers. • Sex work is highly stigmatized even in the “HIV cosmos”, sex workers living with HIV are always seen first and foremost as sex workers, not as people with health needs due to their HIV status. This leads many sex workers living with HIV to avoid healthcare settings unless absolutely necessary and contributes to loss to follow up. • Many services that would dramatically reduce imminent threats to sex workers (e.g. violence prevention) are not considered as essential, with detrimental effects on delivery of the so called “holistic approach”. • Domestic funding for comprehensive services to sex workers is widely lacking, this threatens the sustainability of donor-funded programmes that may change radically (e.g. lose the focus on diversity) or be dropped entirely should the lending donors withdraw.
<p>What concerns us?</p>	<ul style="list-style-type: none"> • Health and livelihood: The COVID-19 pandemic has exposed how, while the world responded to the health crisis, little to no measures were taken to protect sex workers from abuse, loss of livelihood and health crises they were facing. Sex workers were affected by the pandemic from a clinical perspective (many sex workers live in confined spaces and with other people, with little to no ability to self-isolate if they or anyone in the household is sick), but as most sex workers live hand to mouth, the impact of the pandemic -especially in humanitarian settings- has exposed how fragile the context is for them. Unable to work and provide for their families, and to move freely, many have interrupted ART, others have suspended it for fear of being outed in new living arrangements. The same applies to SRHR services and other broader health services: the onset of COVID-19 has uncovered the shortcomings of health systems that don't tailor their services for the diverse needs of different populations. • Safety: COVID-19 has had an impact beyond health on sex workers: increasing their vulnerability to corruption and personal safety (including sexual exploitation and abuse). • Social protection: Being unable to work (or work at staggering risk) should make any person eligible to access social protection to avoid or reduce to the bare minimum exposure to risk. This has not been taken into account in the case of sex workers – who are largely ineligible for SP programmes due to criminalization (leading to the inability to state the reason behind the loss of income).
<p>What gives us hope?</p>	<ul style="list-style-type: none"> • The drafting of the new Global AIDS Strategy 2020-2030 is an opportunity to transform how the HIV response could meet the needs of sex workers in all their diversity. But this would require fundamental change in how different sectors design outreach programmes for sex workers across the spectrum of basic needs and rights – health, social protection, protection/safety, education, employment recognition.
<p>What constrains our ability to achieve our goals?</p>	<ul style="list-style-type: none"> • Fluctuating funding, which reflects on how much and how often networks of sex workers can do for their constituencies. Many sex workers organizations solely rely on one (or few) donor with whom they have established a strong relation, which has strong limitations: first and foremost sustainability in the long term and the

	<p>ability to scale up – and promote integration and acceptance in the local community.</p> <ul style="list-style-type: none"> • Varying degrees of institutional capacity, which hinder the ability of sex workers organizations to deliver services of equivalent quality across the sex worker populations. Most sex worker organizations lack the skills, including communication competencies with figures of authority that would create an enabling environment
--	--

<h2>CONTEXTUAL ENVIRONMENT</h2>	
---------------------------------	--

<p>How do we see the current situation?</p>	<p>The current situation is very focused on what is traditionally depicted as a sex worker (female, heterosexual, able bodied), which is excluding, both in practice and in terms of communication, all sex workers who don't conform with the above, for example, from LGBTI communities.</p> <p>Currently, the main challenges faced by sex workers are:</p> <ul style="list-style-type: none"> • Lack of education and challenges in speaking and understanding different languages, especially for refugees, asylum seekers, migrants and IDP sex workers, not only puts them at higher risk, but is also an impediment to finding alternatives to sex work, especially for older sex workers. • Migrant sex workers often concentrate in one place and, while providing safety in numbers, a high concentration of sex workers can also translate into higher stigma and discrimination (e.g. forced evictions, discrimination from the local population, etc...). • Humanitarian settings pose an ulterior challenge to sex workers: lack of livelihood decreases their negotiating power -sex workers are not used to begging, but they will negotiate lower prices or more dangerous practices. • Sex workers living with HIV in humanitarian settings face dire situations where they often can't access drugs in the country of origin, transit or destination, they may not have a place to live and are forced to hide ARVs among their possessions, which may be lost or damaged when faced, for example, with arrest and incarceration. • With the breakdown of codes of conduct, and faced with life threatening circumstances, stigma against marginal groups, such as sex workers, tends to increase in crises and humanitarian situations, e.g. people refusing to buy masks from suspected sex workers, sex workers being removed from lines as they queue for assistance
---	---

<p>What concerns us?</p>	<p>Discrimination against sex workers is widespread, in particular in humanitarian settings because:</p> <ul style="list-style-type: none"> • Social exclusion is omnipresent, partly driven by criminalization and partly by the perception that sex workers are a detriment to the "morals" of a country. This is particularly true for migrant sex workers, who are often deported with no notice or support to a third country. • Rights abuses and protection: legal recourse by sex workers and access to justice are limited, sex workers are also vulnerable to violence and need to deal with requests for money and sexual services by law enforcement agencies.
--------------------------	--

	<ul style="list-style-type: none"> • Social protection and wider access to poverty relief measures for sex workers are virtually non-existent across regions: sex workers are widely excluded from poverty relief measures, access to housing, pension funds, etc. • Almost no focus is put on older sex workers, who are exposed to a diverse set of challenges and vulnerabilities and who, during the COVID-19 outbreak, were more at risk of adverse effects. • The COVID19 outbreak has highlighted how any upcoming crisis builds on an already fragile context, putting the lives of sex workers at extreme risk (e.g. loss of livelihood, extremely dangerous working conditions for those who continued working, mental health impact, etc.)
<p>What gives us hope?</p>	<p>Embryonic attempts at building a stronger sex workers movement are being made, but in order to be successful and sustainable they should be more comprehensive and include:</p> <ul style="list-style-type: none"> • Capacity building: <ul style="list-style-type: none"> ○ Peer-to-peer informal education and training, access to formal education, vocational training and access to income generating activities. ○ Work with police, healthcare workers, social workers ○ Capacity strengthening on how to deploy different coping mechanisms • Resilience and preparedness: <ul style="list-style-type: none"> ○ Sex workers are by definition flexible and innovative as demonstrated by the resilience and strength against COVID19 ○ Sex workers know that this global situation of uncertainty could happen again and need to be supported to devise alternative livelihoods plans to face extreme conditions. ○ Mutual support between sex workers is not always organic and continuous but dictated by the context – building stronger networks can help in increasing solidarity across sex workers groups. • Health access: <ul style="list-style-type: none"> ○ Community-led services have proven to have impact beyond HIV – this impact would be strongly heightened if said services were delivered by sex workers, who know the social context they operate in, the challenges fellow sex workers face, etc. • Civic identity and advocacy: <ul style="list-style-type: none"> ○ The media has traditionally covered sex work a lot, usually in a negative light. The media interest in sex work gives hope that, with advocacy towards it, there could be a narrative shift. ○ Sex workers need to be empowered to take all the necessary legal steps to be formally acknowledged as human beings, as for instance claim their citizenship, birth registration, etc.
<p>What constrains our ability to achieve our goals?</p>	<p>The COVID19 outbreak has given a very clear picture of what the situation of sex workers can be in a time of crisis, even to those living in countries not currently (or cyclically) affected by a humanitarian crisis.</p> <ul style="list-style-type: none"> • Compromised leadership (management made of people who are not/have not been sex workers, conflicts of interest,...) affects the ability to support the sex work community

	<ul style="list-style-type: none"> • Most civil society organizations are not deemed as “essential workers”, with movement restrictions, the vast majority of sex workers have no access public places and are unable to receive and deliver services as needed. • COVID19-related financial constraints: the emerging pandemic affected the entire population, which led to both funding and technical assistance being diverted towards other priorities. • Lack of basic services and consumables (e.g. condoms, lubricants, contraception, etc...) have pushed sex workers into much more dangerous practices. • Extreme conditions create friction among sex workers and unfortunately solidarity is often not the first response.
--	---

EMERGING PATTERNS:

- Intersectionality: Sex workers are not a homogenous group, they have different needs, different situations and different long term plans. This diversity is often not reflected, with detrimental effects on the interventions that are put in place, especially in crises and humanitarian settings.
- Due to criminalization, stigma and discrimination, sex workers are often in a situation of crisis even when they are not in a context that is defined as a “humanitarian setting” and this must be considered in any intervention addressing sex workers.
- Sex work is often a flexible definition: sex workers may slide in and out of it as their situation changes, and it’s important to have a set-up of services (health, education, social protection, etc) that consider this and allow sex workers to leave sex work if they wish to (with viable alternatives) or to continue to sex work with both personal and financial safety.
- Education (primary, secondary, tertiary, vocational training, institutional capacity building) and participation are key to improve the lives of sex workers and give them better opportunities to organize networks, advocate for themselves and seek alternatives to sex work if they wish to.
- “Nothing for us without us” sex workers demand more inclusion in all phases of strategy and programme design and not just their inclusion as tokens when substantive decisions have already been made. They also demand that their voices are captured even when they are “controversial” as they are the only ones who know about the details of being a sex worker in a crisis and humanitarian setting, therefore policies and programmes should align more to their inputs and not the other way around.

SECTION 3: RECOMMENDATIONS World Café

Please enter the main messages coming out, up to 5 points maximum per section

What are the key recommendations back to UNAIDS in terms of the strategy specifically?	
CONTINUE	<p><i>What is working that we must continue to do?</i></p> <ul style="list-style-type: none"> • Continue to advocate for the recognition of sex workers as people (beyond their occupation) with the rights and needs all other citizens have, and specific needs that -like those of all other citizens- must be taken into consideration. • Continue advocating for human rights-based approach programmes for sex workers that promote better access to health and fundamental human rights. • Continue building on the current advocacy to ensure long-term goals are realized.
STOP	<p><i>What must we stop doing, that if we don't stop will ensure failure?</i></p> <ul style="list-style-type: none"> • Stop only working on the long-term wins (e.g. decriminalization), if you are not at the same time acting on the short-wins (e.g. access to health without disclosing occupation). That does not mean that work on decriminalization should stop, but what it means is that it cannot be the only intervention. • Stop objectifying sex workers: Sex workers feel they are often included in the discourse when they represent a statistics, for example in terms of HIV prevalence, ART coverage, etc., if programmes are people-centred, as they claim to be, they need to look at the person holistically, in all their diversity and with all their needs, even if they don't fit specifically in the "HIV box". • Stop issue-driven funding: Funds shouldn't be driven by the issue, e.g. HIV, but by the population, e.g. sex workers in all their diversity and with all their diverse needs. For example → promote more health programs for sex workers, that include ALSO HIV and SRH, but also look at health as a whole (chronic health needs, NCDs, mental health, etc...) • Stop creating, maintaining and promoting structures that address sex workers only as sex workers (and not as human beings), and for a limited amount of time e.g. 3 months vocational training programme, support must be made available in the long term in order to be sustainable (because the needs of each person are unique and in order for it to be sustainable interventions must be somewhat "personalized"). • Stop partnerships that are rigid and don't allow for unforeseen circumstances: during the COVID19 outbreak many sex workers have found themselves unable to access help from established programmes because said programmes had not considered a situation in which all/the majority of sex workers faced similar hardships and were ultimately unable to provide support. • Stop clustering sex workers into a general "key population" group: this is impersonal and ultimately doesn't consider the myriad of differences among sex workers and between sex workers and other groups. • Stop normalizing discrimination – this includes supporting sex workers to know about their rights, be empowered enough to demand they are respected and support them to be organized in official groups that can provide support and protection, as needed.
START	<p><i>What are we not doing that we have to start doing?</i></p> <ul style="list-style-type: none"> • Start addressing the needs of sex workers beyond their occupation - A more holistic approach includes empowerment and capacity building of sex workers in different fields: programmes need to be more flexible and consider issues related to sex work itself (e.g. learn new negotiation skills, communication methods for wider outreach among sex workers, train peer educators in the HIV response in situations of crisis, community leaders for access to SRHR and GBV services in humanitarian settings) as well as supporting sex workers who want to, to stop sex working. • Start defining sex workers in their diversity from inception, to leave no sex worker behind and put a stronger focus on the needs, solutions and coping mechanisms identified by sex workers themselves.

	<ul style="list-style-type: none"> • Start making Accessibility accessible and inclusive – it should be people centered, focused, and enabling, friendly and non-biased, to facilitate service uptake, adherence, retention, treatment, care and support for sex workers. • Start considering preparedness plans that are sex workers specific and look at the needs of sex workers in humanitarian settings before they emerge • Start making better use of the media – As sex workers get into the public eye, start identifying way to leverage that for their own benefit.
<p>What is the one key recommendation you want to reiterate for strong consideration?</p>	<p>It is imperative that we look at how similar, despite their diversity, sex workers' issues and challenges are to those of the "general population", we shouldn't forget that we are 'human, before we are sex workers....'</p> <p>Sex workers are intersectional: no one is a sex worker, and a sex worker only. Each person has unique needs and challenges based on who they are, their gender identity and sexual orientation, HIV status, disability, whether they use drugs, have children, are victims of GBV as well as being a sex worker. The diversity of sex workers should support their inclusion in national discourses that go beyond sex work itself.</p> <p>On the concept on diversity: sex workers communities and leadership acknowledge that in many settings they still have a long way to go to understand the complex needs of diverse sex workers within the industry.</p>

Please share with us any references you think would be useful for the Strategy Development, such as examples of case studies that illustrate the challenges or recommendations you outlined in the discussion report.

Please also share a list of names and email addresses of participants who would wish to continue to be informed of the Strategy development process. Note names and contacts will not be shared publicly or with any third party.

You can send us additional documents via e-mail strategyteam@unaid.org

UNAIDS

20 Avenue Appia
CH-1211 Geneva 27
Sex workersitzterland

+41 22 791 3666

unaids.org