Sexual and reproductive healthcare services for female street-and hotel-based sex workers operating from Johannesburg City Deep, South Africa

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Sex work is a crime in South Africa. With the prevalence and deleterious social and economic effects of HIV, in health literature sex work has often been understood in relation to the way that it intersects with the transmission of the epidemic. This positioning of sex work then inadvertently stigmatises sex workers who are often cast outside the rights-based discourses that characterise South Africa’s post-apartheid democracy. In order to address this problem, this study explored the perceived barriers and facilitators to sex workers’ accessing sexual and reproductive healthcare (SRHC), gaps in the current service offerings relating to sex worker’s sexual and reproductive health (SRH) and the general experiences of SRHC amongst 11 female sex workers in Johannesburg, South Africa. Semi-structured in-depth interviews were conducted with these sex workers, who were based in Johannesburg City Deep. The resultant data were transcribed and subjected to a thematic analysis. The study shows that various structural and individual level barriers are perceived to prevent access to SRH. In particular, the analysis suggests that the disease-specific focus on sex worker-specific projects poses a barrier to sex workers’ accessing a complete range of SRHC services. Violence enacted by healthcare professionals, police and clients fuelled a lack of trust in the healthcare sector and displaced the participants from their basic human rights. It is also worrying that religion posed a threat to effective SRHC because some religious discourses label sex workers as sinners who are perceived to be excluded from forgiveness and healing. Finally, motherhood proved to be a point at which the participants actively managed their health and engaged with and in broad-based SRHC. Participants frequently only sought SRHC at the point at which an ailment affected their livelihood and ability to provide for a family. Taken together, these findings seem to show a range of formidable challenges to sex workers’ understanding of themselves in a human rights discourse. This study’s findings are of particular importance to rethinking the legislation that
criminalises sex work, as well as healthcare initiatives geared both towards sex workers and women in general.