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To:  
The Joint Multi-Party Women's Caucus  
Chair: Hon RMS Morutoa

Attention:  
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**Response to the South African Law Reform Commission's Report on 'Sexual Offences: Adult Prostitution'**

This submission is made by the South African National AIDS Council (SANAC), established in 2000 to enhance and drive South Africa's multi-sectoral response to HIV, tuberculosis (TB) and sexually transmitted infections (STIs). SANAC brings together role-players from government, civil society, and the private sector, and its efforts are guided by the priorities and objectives set out in the National Strategic Plan for HIV, TB and STIs (NSP).

In South Africa, modelled estimates of HIV incidence show that female sex workers and their clients account for upwards of 6% of heterosexual transmission. Our national effort to arrest new HIV infections will not succeed if new infections in sex workers are not stopped.

Because sex work is criminalized, it is viewed in a negative light and health care workers, amongst other public servants, perpetuate high levels of stigma and discrimination against sex workers. As a result male, female and transgender sex workers are often excluded from the community and health system increasing their vulnerability to illness, the likelihood of negative health outcomes and further health and social inequities. The limited provision of targeted, appropriate services compounds the consequences of feared and experienced negative health service contacts. These factors essentially push sex workers away from accessing health services and increase their likelihood of developing complications of infections.

This is in direct conflict with global and national efforts to increase prevention, diagnosis and treatment initiatives to limit catastrophic expense of chronic and untreated infections. It also increases their likelihood of defaulting treatment, resistance to antiretroviral medication and increased likelihood of onwards transmission of these infections to sexual partners and their clients.

The report further records *“On the non-legislative front, the Commission has found that despite isolated cases of private and state run and funded programmes there is no national strategy to deal with prostitution and recommends that irrespective of the policy option chosen, a national strategy should be implemented to deal with prostitution. It further recommends that this national strategy should do the following: seek to implement the proposed legislation or policy; offer viable alternatives to prostitution; assist a person to exit prostitution should he or she express a willingness to do so; support reskilling, health and education initiatives for prostitutes; promote economic independence; and promote sexual health and safer sexual practices”*. While there were a few references to the National Strategic Plan on HIV, TB and STI 2012-2016, the report does not make reference of any sort to ‘The South African National Sex Worker HIV Plan 2016/2019’ which addresses these issues.

Decriminalising sex work globally could avert 33% to 46% of HIV infections among women sex workers and their clients in the next decade. It is in view of the current barriers to health care, social support and human rights that SANAC, in partnership with sex workers and using an evidence based approach, developed a package in the Sex Worker HIV Plan to guide the human-rights country response to sex workers. The document states that we should “secure a commitment for decriminalisation of sex work” which enables access to services. This activity was informed by evidence provided through the SANAC technical working group on sex work that decriminalisation is the best legal framework from a public health perspective to support the country in reaching its goals and targets as laid out in the National Strategic Plan (NSP) 2017-2022.

The SANAC Secretariat supports efforts towards securing political commitment for the decriminalisation of sex work to achieve public health goals and to safeguard human rights.

SANAC would like the opportunity, at the time when oral submissions are made, to address the Committee in person.

Yours sincerely,



Dr. Sandile Buthelezi  
Chief Executive Officer  
South African National AIDS Council