#WeBelongAfrica

Advancing Equitable Access to HIV/SRHR Services and Protection of Human Rights of Young Sex Workers in the SADC Region

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Executive Summary

The Southern Africa Young Key Population Regional Sex Workers Meeting brought together young sex workers from the SADC region to develop advocacy capacities on policy and law reform processes in the five project countries. The workshop also supported South-South learning and identified regional advocacy priorities based on ASWA's strategy in *Advancing Sex Worker's Health and Welfare Programming in East and Southern Africa* that could be followed up at the national level and facilitate planning for strengthening advocacy agendas for sex workers.

The three-day workshop had various themes: The first session centered around the legal and policy issues affecting young sex workers in the SADC region. In keeping with this, the workshop included a session on introducing participants to international and regional human rights frameworks. Participants were presented with a set of treaties and covenants that could function as tools for advocacy to uphold the rights of sex workers.

This was followed by a session outlining the legal and policy landscape regarding sex work in the region. This session was crucial for participants to understand how countries within the region uphold or fail to uphold the rights of sex workers. In this way, alliances and networks can be formed across countries to facilitate public advocacy and awareness campaigns.

After this, there was a session on how sex workers can exercise their labour rights in line with International Labour Organisation (ILO) guidance tools. Because sex work is criminalized in most countries in the SADC region, there is a belief that sex workers cannot use labour rights to advocate for better treatment. This session was effective in providing information that countered this belief, while also outlining the specific tools, in terms of recommendations ratified by most Member States, to exercise these labour rights.

The final session of the first day was an overview of research done to ensure that sex workers receive sexual and reproductive health and rights (SRHR) that are in line with their needs. A focus on SRHR for young sex workers is incomplete without the active input of young sex workers. For this reason, the session was important in receiving feedback from young sex workers as to what interventions are in line with their realities, and which interventions will require further consultation.

Participants were also introduced to innovative SRHR technologies that prevent HIV for young sex workers. The Wits Reproductive Health and HIV Institute, also known as Wits RHI, showed participants the latest HIV prevention products in the market. The interventions were designed to reduce unprotected sex, reduce HIV transmission, and empower sex workers.

This was followed by a session analysing the decriminalization of sex work in the SADC region, with a case study of South Africa as a country that has engaged its political leaders regarding sex work decriminalization. While South Africa has not legally decriminalized sex work, significant legal advances on this front make decriminalization a feasible possibility.

There was also a session that introduced the participants to shadow reports and the Universal Periodic Review (UPR) process. These are advocacy tools that young sex workers can use to facilitate change once advocacy needs to reach the international community for further engagement. The UPR is an essential part of how U.N. member states can identify and condemn human rights abuses, one of them being the continued marginalization and discrimination of young sex workers.

Participants were also introduced to several strategies they could use to engage parliamentarians in their work. Members of Parliament possess immense power to influence legal reform, it is crucial to communicate with them effectively and precisely. Lobbyists and activists ought to approach parliamentarians with clearly defined problems and plans of action on how the parliamentarians can solve these problems.

A session that highlighted leadership skills for young sex workers was also added to the workshop proceedings. This was an introduction to the ASWA Leadership Programme, which specifically builds the capacity of young sex workers in the continent to lead strong organizations.

The meeting was officially opened by the Health HIV Group Director Dr Mandeep Dhaliwal who underscored the importance of strengthening advocacy for the decriminalisation of sex work in the region to achieve the 10-10-10 targets and 2030 development agenda. The closing session was led by Mesfin Getahun who recognized the partnership between ASWA, SASWA, and the UNDP and called for greater cooperation between the organizations to bring about positive change for young sex workers.

Background

Among other goals, UNDP's #WeBelongAfrica (#WBA) programme works to improve the quality of life and sexual reproductive health outcomes for young key populations (YKPs) in Angola, Eswatini, Mozambique, Zambia, and Zimbabwe, as well as across the SADC region. UNDP's strategies have included conducting research to identify legal and policy barriers that impede access to HIV/SRHR services for young people; supporting SADC to advocate for YKP inclusion; monitoring domestication and implementation of regional instruments; building capacity of and providing technical support to YKP to engage with international bodies and processes; supporting or contributing to the development of appropriate policies and strategies that would increase access to SRHR and services; and creating spaces for young key populations to engage with policymakers at all levels of decision making including influencing policy.

While #WBA seeks to work with young key populations in their diversity, it is also important to work with specific populations with their priorities and needs, and in response to the specific political and policy dynamics associated with diverse groups. This workshop focuses on young sex workers[1]. This is the first time that #WBA has convened an event focused, specifically on this population.

Young sex workers, like other key populations, face stigma and discrimination, human rights violations, gender-based violence, and significant barriers to accessing HIV and sexual and reproductive health services[2]. The lack of access to HIV & SRH services is also exacerbated by criminal statutes and prevailing socio-cultural beliefs and practices that drive marginalization and exclusion; health workers' attitudes at the health facility level; lack of information; age-restrictive laws prohibit young people's access to HIV testing, contraceptives, abortion, and SRH services; and restrictive policies.

UNAIDS estimated that key populations and their sexual partners accounted for 46% percent of all HIV infections in ESA in 2021[3], and all key populations – sex workers in particular - have a higher relative risk of acquiring HIV than the general population.[4] The UNAIDS report further reports that HIV prevalence amongst sex workers ranges from 8% in Angola to 60.8% in eSwatini with Zambia and Zimbabwe accounting for 48.8% and 45.1%, respectively. Access to antiretroviral therapy amongst sex workers diagnosed with HIV at the end of 2021 was at 42% in Angola, 85.9% in Zambia, and 95.3% in Zimbabwe, with no coverage data from Eswatini and Mozambique. Countries reporting HIV prevalence amongst men who have sex with men in Angola accounted for 2%, Eswatini 27.2%, and Zimbabwe 21.1%. Zimbabwe is the only country in the project countries that has statistics on transgender population, including an HIV prevalence rate of 27.5% and 82% ART coverage. Data for key populations remains a challenge due to the criminalization of key populations[5] and a major barrier to accessing HIV/SRHR services.

Amongst the project countries, Eswatini, Zambia, and Zimbabwe criminalize some form of sex work and or have punitive regulations that criminalize sex work including criminalization of same-

1 #WBA defines young sex workers as people who "sell sexual acts" and are above the age of 18 years. They may be young women, men, non-binary, or transgender people. Adolescents 17 years and below involved in transactional sex or commercial sexual exploitation are not classified as sex workers and the act is considered as statutory rape in most countries. Commercial sexual exploitation of children (CSEC) is considered by the International Labour Organization (ILO) as sexual abuse by an adult concerning a child or an adolescent – female or male and under 18 years old.

2https://aidsfonds.org/assets/resource/file/HandsOff_Human%20Rights_Violations_Factsheet2021_0.pdf; Legal Environment Assessment Reports – Angola, Madagascar, Mozambique, Zambia, and Zimbabwe

3 UNAIDS (2022) UNAIDS Data 2022.

4 UNAIDS (2018) Transactional sex and HIV risk: from analysis to action.

5 UNAIDS 2022 Data Estimates.

sex sexual acts in private. Angola and Mozambique have decriminalized consensual same-sex relations and sex work. Angola and Zambia also have punitive laws that criminalize transgender persons[6].

An assessment undertaken by the African Sex Workers Alliance "*A Legal Framework of Sex Workers in Africa*" (2022), shows that many countries do not have specific legislation that criminalizes sex work or makes the sale of sex or buying sex illegal, however, criminalize activities associated with sex work. These activities include direct physical contact between buyer and seller; voluntary sexual transactions; or sale of sexual services for material or monetary compensation, between a consenting adult of legal age or 18yrs and older with the appropriate mental capacity to consent is criminalized[7]. Activities related to earnings from sex work, soliciting clients, brothel-keeping, production of obscene matter (pornography) and indecent behaviour also remains illegal and criminalized in most countries.

Legal Environment Assessments[8] (LEAs) conducted by countries with support from UNDP between 2018 - 2019 recommend that laws criminalizing aspects of sex work and provisions in other laws that are misused against sex workers should be reviewed, and sex workers should be involved in law review and reform processes. The LEAs also recommend capacitating sex workers on their rights; conducting community awareness-raising and sensitization campaigns to reduce stigma and discrimination against sex workers; training and sensitizing health care providers on the rights and health care needs of sex workers including strengthening appropriate and comprehensive sexual and reproductive health care services for sex workers. Additionally, the LEAs also emphasize the importance of training and sensitizing law enforcement officials on the rights of sex workers and taking measures to protect sex workers from violence.

Given the above the Southern Africa Young Key Population Initiative organized and coordinated the Regional Sex Workers Meeting held between the 10th and 12th of October 2023 in Johannesburg, South Africa, and was sponsored by the African Sex Workers Alliance (ASWA), the Southern African Sex Workers Alliance (SASWA), and the #WeBelongAfrica regional initiative implemented by the UNDP (United Nations Development Programme).

Meeting Objectives

This meeting aimed at bringing together young sex workers from nine countries[9] to develop advocacy capacities on policy and law reform processes; secondly, support South-South learning and identify regional advocacy priorities based on ASWA strategy *Advancing Sex Worker's Health and Welfare programming in East and Southern Africa*, that could be followed up at national level and facilitate planning for strengthening advocacy agenda for sex workers. This meeting also aimed at introducing participants to the regional strategies and guidance tools developed with the support of UN agencies and adopted by member states to improve access to HIV/SRHR services at the national level.

The overall objective of the meeting was to strengthen the engagement of young people in the #WBA project countries on policy and legal advocacy processes on HIV/ SRHR of young sex workers.

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[6] UNAIDS 2022 Data Estimastes.

[7] Legal Framework of Sex Workers in Africa. African Sex Workers Alliance – updated (2022)

[8] https://hivlawcommission.org/elibrary-lea/ (Angola, Zambia, Zimbabwe)

[9] Angola, Botswana, Eswatini, Kenya, Malawi, Mozambique, South Africa, Zambia, Zimbabwe,

Specifically, the meeting introduced participants: -

1. To the legal and policy landscape on SRHR of young sex workers at regional and national levels.
2. To the regional advocacy strategy for sex work, and new HIV/SRH innovations and technologies.
3. Identified strategies and priorities for national-level advocacy.

The meeting's expected outputs included:

1. The capacity of young sex workers in the regional legal and policy environment strengthened.
2. The capacity of young sex workers to engage and advocate for policy reform using regional instruments is enhanced.
3. Priority issues for young sex workers and advocacy strategies identified.

Participants and Resource Persons

A total of twenty-eight young sex workers between the ages of 18-29yrs from nine countries in the SADC region participated in the meeting from UNDP and SASWA countries- Angola, Botswana, Eswatini, Kenya, Malawi, Mozambique, South Africa, Zambia, and Zimbabwe. The participants represented young sex workers in their diversity, such as female and male sex workers, young transgender persons, cisgender, and non-binary persons. Each participant brought different skills expertise, and different experiences that enabled learning and broadened knowledge on how to influence law and policy agenda in the region.

Resource persons were drawn from ARASA, ASWA and SASWA membership, SALC, Sisonke-SWEAT and Wits RHI other regional partners, and UN agencies ILO and UNFPA. The meeting was coordinated and facilitated by Senelisiwe Ntshangase from UNDP, Leeroy Mkhokheli Gumpo-SASWA, Grace Kamau-ASWA, and Phathisani Sibanda-ARASA.

Methodology

The meeting was structured in such a way that all presenters raised the common policy gaps and legal issues that affect sex workers in the region. This approach stimulated discussions and shared learning influenced by the different experiences and expertise in the room. Plenary sessions and group discussions were also used to dig into specific issues raised.

Session 1: Official Opening

The workshop began with the UNDP, SASWA, and ASWA all introducing the organizations and their regional projects that benefit young sex workers in the SADC region. The UNDP gave a brief overview of the #WeBelongAfrica project, which aims to empower young key populations in the SADC region to be involved in all relevant legal and policy discussions. Secondly, SASWA works with sex worker-led organizations all over the region and collects information for the development of coordinated advocacy campaigns. Thirdly and lastly, ASWA is also an alliance of various sex-worker-led organizations that advocates for inclusion and non-discrimination for sex workers in the SADC region.

The meeting was officially opened by the Director of Health HIV Group Dr Mandeep Dhaliwal who underscored the importance of strengthening advocacy for the decriminalization of sex work in the region which is a hindrance to achieving the 10-10-10 targets and 2030 development agenda; advocate for full decriminalization of sex work in all aspects as it furthers violence and fosters stigma and discrimination, increases the risk of HIV and other STIs and impedes access to justice, thus undermining sex workers' human rights. She reminded participants that sex-work is a gendered phenomenon and thus should be at the center of feminist reflections at local and global levels, in particular, programmes that advocate for the inclusion of adolescent girls and young women's intervention in the development discourse and other initiatives aimed at young men in general; underscored the importance of using digital technology to increase the "voices" of young key populations. Encouraged young people to engage in reproductive health and climate change discussions at the national level as climate change remains a threat to equitable access to SRHR and HIV services.

This session was particularly helpful, in that it provided a broad understanding of what the sex workers initiatives entailed the various roles of the regional partners, and how they work at the SADC level to actively advocate for sex worker rights. Young key populations often have fewer resources than other members of the population, making them particularly susceptible to discrimination and oppression.

Session 2 Introduction to Human Rights and the Policy and Legal Landscape in the SADC Region

International and Regional Human Rights Frameworks - Protecting sex workers rights.

This session introduced participants to a set of treaties and covenants that most countries in the SADC region are signatories to or have ratified and how these human rights instruments can be used as advocacy tools for eliminating injustices related to sex work at both the national and regional levels. Participants were directed to specific treaties and sections that are relevant to sex workers' rights.

Healthcare-related Rights can be found under the International Covenant on Civil and Political Rights (ICCPR) - ***articles 3 and 26 and article 3*** of the International Covenant on Economic, Social and Cultural Rights (ICESCR). These international instruments deal with the denial of treatment, highlight equality, and emphasis on non-discrimination. Sex workers therefore have a right to access healthcare without needing to face unwarranted stigma and discrimination by healthcare providers. In addition to this, these articles prevent the disclosure of one's health status without one's consent, as this is a discriminatory action. ***Article 12*** of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) further highlights the need to *eliminate discrimination against women in the field of health care to ensure, on a basis of equality of men and women, access to healthcare services*.

Human rights instruments that prevent physical violence, as well as threats of violence. **Article 7 of the ICCPR** protects the right to freedom from torture or to cruel, inhuman, or degrading treatment or punishment, while **Article 9** of the same covenant states that *no one shall be subjected to arbitrary arrests or detention*. These articles could be used against law enforcement officials who mistreat sex workers. **Article 13 of the ICESCR** as well as **Article 10 of the CEDAW** protect the right to education, and the right not to face discrimination in the field of education.

These articles can be used to ensure that sex workers, or their children, have access to educational services freely and without discrimination. The right to shelter and housing is protected under **Article 11 of the ICESCR** which recognises the right to an adequate standard of living for everybody. This article can be used by sex workers to argue for social welfare services, particularly in times of crisis such as the onset of the COVID-19, Mpox or any pandemic.

Protection of the right to associate as sex workers groups is under Article 22 of the ICCPR which protects the right to freedom of association as well as the right to join and form trade unions. Sex workers may use this article when protesting and attempting to form unions that protect their interests as sex workers or advocating for the recognition of Sex work as a sector.

The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (or the Maputo Protocol) also offers some useful human rights instruments. Here are some of them:

- Article 2 of the Maputo Protocol protects women from all forms of discrimination. This tool can be used by sex workers to advocate for law enforcement officials not to mistreat sex workers.
- While article 14 (1) (d) calls for women to be protected against sexually transmitted infections, including HIV and AIDS, article 14 (2) (a) of the same protocol calls for member states to provide adequate, affordable, and accessible health services. This can ensure that healthcare workers assist sex workers without any stigma or discrimination.
- Article 3 of the Maputo Protocol recognizes women's inherent right to dignity, and Article 3 (4) affirms this by urging member states to protect women from all sorts of violence. This may be used to advocate against police brutality against sex workers.

Various strategies and frameworks developed and adopted by SADC Member states can be used to advocate for reforms and to interpret the various human rights instruments. These include the SADC Parliamentary Forum Minimum Standards for the Protection of the Sexual and Reproductive Health of Key Populations 2019; the SADC Regional Strategy for HIV Prevention, Treatment and Care and Sexual and Reproductive Health and Rights Among Key Populations 2019; and the SADC Strategy for SRHR in SADC Region 2019 - 2030.

The subsequent discussion centrered around how to manoeuvre around laws that directly prohibit sex work or aspects of sex work, how to make the human rights frameworks practical, and how to make countries aware of the content of the treaties and covenants to which they are signatories. It was also noted that instruments regarding sex workers who live with disabilities are often not included in similar discussions, and that is an issue that requires rectifying.

Session 3: Legal and Policy Landscape on sex work in the SADC countries – Structural barriers to accessing Justice, HIV/SRH services

This session provided an overview of the policy and legal framework in the SADC region. It was noted that out of sixteen countries in the southern African region, sex work is legal in only one country (Mozambique). In other countries in the region, sex work may not be explicitly illegal, but aspects of sex work may be - these include the buying and selling of sex, solicitation, living off the proceeds of sex work, as well as "public order" or vagrancy laws that are used to target poor people and sex workers. The criminalization of sex work prevents access to healthcare services and justice. A study conducted in ten countries in sub-Saharan Africa found that a sex worker

living in a country that criminalizes sex work is seven times more likely to be living with HIV than a sex worker living in a country that partly criminalizes sex work. The criminalization of sex work also negatively affects sex workers' ability to receive justice, as reporting a crime to law enforcement officials may lead to physical or sexual abuse by police officers or law enforcement themselves.

The correlation between HIV prevalence and the criminalization of sex work is cited in the Global AIDS Commission Report of 2012 and supplementary report of 2018 which provides a set of recommendations to address the impact of criminalizing sex work. These include reviewing and repealing criminal laws to end the direct and indirect criminalization of sex work; removing public order laws that are often used against sex workers; differentiating between sex work and sex trafficking; providing prosecutorial guidance on how to prosecute sex workers; sensitizing policymakers on sex worker rights; urging healthcare workers and legal enforcers not to discriminate against sex workers; and providing legal aid services to sex workers.

Community-led discussion on Sex Workers' experiences on access to sexual reproductive health rights: This session reminded participants of the numerous barriers that young sex workers face when attempting to access sexual and reproductive healthcare services in different countries. Some of the issues faced by sex workers in the health sectors include: - stigma and discrimination, lack of knowledge about SRHR, cultural and religious beliefs, attitudes, and personal values of healthcare providers; lack of support from communities; and shortages of medicines and supplies in public healthcare facilities.

The session concluded by highlighting that access to SRHR is central to the well-being of sex workers, and that inadequate access to SRHR exacerbates existing vulnerabilities, and asking the participants to consider promoting SRHR through digital spaces in language that is tailored to the sex worker community. The need to build a vibrant sex worker movement in the region is critical for advocacy for SRHR and creating an awareness on the needs of male sex workers; and how sex workers can personally promote SRHR when healthcare workers are unwilling to do so.

Session 4: Sex workers and Labour rights – Focus on decent work and labour rights

This session focused on how sex workers can strengthen their labour rights to eliminate violence and harassment in their occupations and learn how the movement can leverage the International Labour Organisation (ILO) guidance tools. The ILO presentation introduced participants to the four decent work pillars according to the ILO:

- rights at work
- social protection
- employment creation
- social dialogue

These four pillars point to what sex workers ought to seek to address, in terms of labour rights in their respective countries. In the current "world of work", sex workers are seen as part of the world of work however not fully recognized. Additionally, sex workers face many of the Decent Work deficits and challenges that the ILO had identified, such as:

- unproductive and poor-quality jobs

- indecent wages
- unsafe working conditions

Convention 190 and Recommendation 206 are some of the tools that can be used as labour rights instruments to influence the protection of sex workers and acquire more rights for the community. Recommendation 206 (also known as the Violence and Harassment Recommendation, 2019) works in conjunction with Convention 190 (also known as the Violence and Harassment Convention, 2019) to ensure that people in the world of work are protected from violence and harassment, regardless of their occupation or trade. The convention states that those more exposed to violence and harassment because of their occupation or trade must receive additional protection that takes the nature of their occupation into account. South Africa is the only country in the SADC region that has formally ratified Convention 190, or C190. Lesotho's ratification of the same convention will come into effect on the 15th of March 2024. However, most countries have not ratified C190. This provides an opportunity for the community to engage with decision-makers, government officials, and parliamentarians to advocate for its ratification and domestication by the Member States as this convention (C190) provides for sex worker's access to protections as per the ILO convention including strengthened relationship sex workers and organized labour. The subsequent discussion centered around unpacking the other Decent Work deficits discussed in the presentation and determining how to engage trade unions in the participants' respective countries. ASWA provided an update on current discussions with ILO and ITCU, on engaging labour rights organizations in Eastern Africa, and that this might yield stronger links between sex workers and organized labour in the future.

Session 5: Overview of HIV/SRHR issues affecting Sex workers and Innovations for SRHR and HIV prevention

Contextualizing SRHR Policy Issues

The session focused on a recent study done by Catriona Macleod and John Reynolds of Rhodes University, South Africa, which looked at the SRHR needs of female sex workers in East and Southern Africa. The term "sexual and reproductive healthcare and rights" was defined to encompass various subsets, some of which are:

i. the prevention and treatment of HIV and other STIs
ii. antenatal, childbirth, and postnatal care
iii. comprehensive sexuality education
iv. counselling and services for modern contraceptives
v. counselling and services for sexual health and wellbeing

It was noted that when discussing SRHR, there is often a disproportionate focus on the disease burden that is part of sexual health, and this detracts from the role that "SRHR" may play in facilitating the sexual health and well-being of citizens and influencing policy decisions. Ensuring sexual pleasure is part of why SRH services are so pivotal, especially for young key populations. Specifically on female sex workers in East and Southern Africa, the study noted the following: -

i. Sex workers prefer to use injectable contraceptives.
ii. Have a low rate of consistent condom usage.
iii. Have a high rate of unintended pregnancies.
iv. Have a high prevalence of human papillomavirus (HPV)

v. Have little knowledge of emergency contraceptives and the dual barrier method of contraception (that is, using two forms of contraception to prevent pregnancy, STIs, and HIV, such as injectables and a condom)
vi. Have little knowledge and access to abortion services.

Several recommendations were presented and could form part of advocacy messages in advancing SRHR for sex workers:

i. Integrating STI prevention and treatment with birth control services in a "one-stop shop" integrated approach.
ii. Using mobile phones to engage female sex workers.
iii. Addressing alcohol use, poverty, violence, and the lack of access to healthcare services
iv. Promoting collective agency for sex workers in the form of unionization, negotiations with pimps and law enforcement agencies, as well as collective bargaining
v. Sensitizing law enforcement officials and healthcare providers on the human rights of sex workers

The subsequent discussion focused on the lack of information about transgender sex workers, and how taking feminizing hormone therapy (unsupervised in the case of transgender persons) might negatively interact with other forms of STI prevention, such as PrEP. This is critical in promoting SRHR service for Transgender persons broadly.

Innovative SRHR/HIV technologies. Enhancing access to HIV prevention products for young people in sex work in Southern Africa. Keeping Young sex worker safe

The WITS Reproductive Health and HIV Institute, or Wits RHI, provided an update on the latest innovations or new HIV prevention products in the pipeline and or rolled out in different countries that should be known by the community to advocate for, or lobby for inclusion in targeted Sex workers SRHR services in the SADC region.

The session provided statistics regarding the prevalence of HIV infections among sex workers in the region, including the concerning fact that only 5% of South African sex workers in 2015 had access to comprehensive health services.

The list of interventions identified by Wits RHI specifically for sex workers includes:

a. reducing unprotected sex
b. reducing HIV transmission
c. empowering sex workers

The meeting discussed how the introduction of oral PrEP (pre-exposure prophylaxis) empowered sex workers and led to decreased HIV transmissions and improved health outcomes. Participants were introduced to two projects currently conducted by the Wits RHI to give sex workers more access and more choice the MOSAIC and CATALYST. The MOSAIC project (an acronym for Maximising Options to Advance Informed Choice for HIV Prevention) is a five-year project funded by PEPFAR through USAID to specifically introduce new HIV prevention products for women in sub-Saharan Africa to the healthcare market. PREP which is already in the market was discussed, looking at its efficacy and the pros and cons of PREP. Participants were also informed that the PrEP ring (a silicone ring for women used to prevent HIV), as well as Cabotegravir PrEP (an

injection taken after 2 months to prevent HIV), are yet to be launched. HIV prevention products currently in the pipeline, include lenacapivir PrEP (an injection taken after 6 months to prevent HIV) and a dual prevention pill, where one pill acts as both a contraceptive and as an HIV prevention product.

The presenters emphasized that every HIV prevention product has its strengths and weaknesses, however, women can move between the products over the course of their lives, and this grants them choice and agency. This is particularly important for female sex workers, who have historically not had access to comprehensive health services. The new HIV prevention products are currently being offered at the Wits RHI clinic in Hillbrow under the CATALYST study. The innovations will provide 'choice' to women and the opportunity to use the desired HIV prevention method. The study will also generate evidence on the multiple products that are tailored towards a diverse range of women in the region. This session generated a lot of discussion in terms of the lack of a PrEP ring for anal insertion specifically for use by transgender persons and men who have sex with men.

Session 6: Unpacking Decriminalisation of Sex work in the SADC region. What has worked; Best practices and lessons learned

This presentation focused on the decriminalization of sex work in the SADC region, and the strategies adopted. Sex work is not directly criminalized in most countries in the region, but the activities related to sex work are often criminalized, making it difficult for sex workers to freely engage with their work. Other laws used to criminalize sex work include public health laws that relate to "spreading venereal diseases" such as HIV and other sexually transmitted infections. Coronavirus (COVID-19) lockdown regulations also prevented most sex workers from their trade.

Jurisprudence discussed at the meeting included the Malawi case where courts affirmed sex workers' rights on several occasions. In 2009, a group of women, presumed to be sex workers, were arrested as part of a police officer sweeping exercise in Mwanza, Malawi. The women were taken to the Mwanza District Hospital where they were tested for HIV without their knowledge or consent, and in contravention of Malawi's HIV policy; In March 2015, a street vendor was picked up, arrested, and charged with the offense of being a rogue and vagabond. The court agreed with the submissions and declared the offense unconstitutional. In February 2016, 19 women were arrested and charged with the offense of living on the earnings of prostitution contrary to section 146 of the Penal Code; The Court found that section 146 of the Penal Code does not criminalize sex work and is intended to protect sex workers. It was noted that litigation adds to multiple advocacy strategies that are engaged in advocating for change and cannot be the main form of advocacy. Litigation as a strategy is lengthy and time-consuming; it has a risk of violence against the sex workers involved in a case; it has the possibility of a backlash by the national legislature, which could enact new laws and increase arrests against sex workers. A risk mitigation plan associated with litigation must be developed and the names of the litigants must be kept confidential including provision of psycho-social support. Subsequent discussion centred around knowing the national laws of the country that one works in, and readiness to respond appropriately if legal action is taken against discriminatory actions.

Case Study: South Africa's journey towards the decriminalization of sex work

The Sexual Offences Act of 1957 criminalizes the selling of sex work in South Africa, as well as soliciting, owning a brothel, and pimping. The Criminal Law Amendment Act 2007 also criminalizes the buying of sex services. Positive advancements have been noted in South Africa for instance, the National Sex Worker HIV, TB, and STI Plan was initiated by the South African National AIDS Council in conjunction with the South African government in 2016. In 2022, Minister of Justice Ronald Lamola announced that the bill set to decriminalize sex work (namely, the Criminal Law (Sexual Offences and Related Matters) Amendment Bill of 2022) would be published for public comments. The window for public comments was between 9 December 2022 and 31 January 2023, perceived to be bad timing by the sex worker community to plan and make contributions to the process as the timing coincided with the December festive holidays and closure of organizations. The bill was then halted entirely in July 2023 due to legal opinions calling for a change in the wording. The Bill is not likely to be re-submitted to Parliament before 2024 due to the national elections coming up in early 2024. The sex worker community was also advised by the Ministry of Justice to engage persons who are survivors of human trafficking, as well as religious and traditional leaders who are the main opposition groups to the decriminalization of sex work. The sex worker community has not approached the Constitutional Court yet pending the court case. Organizations such as PEPFAR, UNDP, and UNAIDS have been supportive of the decriminalization of sex work in the region and the increased activism is appreciated.

Session 7: Engaging with Human Rights Instruments: Shadow reports as a strategy for raising community voices

Discussions

This session discussed how civil society organizations can engage with treaty bodies and the Universal Periodic Review (UPR). International treaty bodies can be used as an advocacy tool when all national options are exhausted, blocked, or slow and when advocacy needs to reach the international community for further engagement. Treaty bodies are a group of about ten or twenty independent human rights experts responsible for the interpretation and implementation of each treaty. Treaty bodies perform three functions:

i. Monitor whether a country is complying with a treaty.
ii. Expand on rights in each of the treaties.
iii. Conduct country inquiries and individual complaints.

The Universal Periodic Review, or UPR, was described as a process in which all U.N countries review each other's human rights records and provide recommendations to each other (Peer review).

Sex worker activists can influence the treaty body and UPR processes in three main ways:

i. Draft shadow/alternate reports
ii. Make oral statements at public sessions.
iii. Monitor constructive dialogue with member states.

A more in-depth explanation was provided for the treaty body and UPR processes. It was noted that countries periodically submit reports to each treaty body that they are signatories to, to demonstrate how they are adhering to the treaty. However, most of the country reports always omit issues concerning LGBTI+ persons, sex workers, and people who use drugs. Sex worker advocates can either work with their national governments to contribute to the state report, or they can submit a shadow report to the treaty body, which outlines what the country report left out in the original report, identify questions for the treaty body to ask the government, and to provide recommendations. This intervention provides the treaty body with additional information that may be useful in highlighting possible human rights abuses and violations that contravene the content of the treaty. After this, the treaty body meets to prepare additional questions for the country, and the country is obligated to respond to these questions. From this process, sex worker advocates can receive data from the country, which they can then use for further advocacy. The process wherein countries respond to the questions set by the treaty body is called a formal consultative dialogue. These dialogues are usually open to the public and made available online.

A set of recommendations are provided by the treaty body to the State and sex worker advocates must always monitor the government to ensure that it implements these recommendations. Two years after the formal consultative dialogue, the country must submit a follow-up report to the treaty body stating progress made towards the implementation of the recommendations.

TransBantu in Zambia, the Sexual Rights Centre in Zimbabwe, and TRANSformar in Mozambique are some of the civil society organizations in the region that UNDP has supported to work with treaty bodies and the UPR.

Previous recommendations from treaty bodies on sex work include:

i. Calling for protection against violence against sex workers, and calling for full decriminalisation of sex work.
ii. Calling for countries to address the discrimination against sex workers in healthcare.
iii. Calling for sex workers who face violence and harassment to receive compensation and psycho-social support.

The community was informed of the support available from UNDP to facilitate engagement with treaty bodies and the UPR:

i. Capacity building for sex-worker-led organisations
ii. Support to identify 3 to 4 human rights violations.
iii. Assistance in drafting submissions
iv. Support to participate in committee deliberations and to make oral statements.
v. Support to advocate for the implementation and monitoring of recommendations.

The subsequent discussion centered around how sex worker advocates can follow up with governments, and how to equip young people to be able to undergo these processes.

Session 8: Engaging Parliamentarians for Policy and Law Reform for Sex Work

Participants were introduced to several strategies for engaging Parliamentarians in their work. Participants were advised on the importance of 'Knowing your audience' which is key to advocacy. Sex workers need to adjust their advocacy approaches, according to the profiles of each parliamentarian for example some parliamentarians may require intellectual engagement, arguments based on research, data, etc, while some parliamentarians who are human rights advocates may require less persuasion.

Participants were advised that members of parliament possess immense power to influence legal reform and to ensure that nobody is left behind. Because of that, it is important to engage parliamentarians, so they are informed about the policy and legal issues that are faced by sex workers. Reference was made to the need for continuous advocacy since Members of Parliament leave office after each administration. Identifying 'champions' in the pool of parliamentarians who believe in human rights and non-discrimination and making them allies of the sex worker community is also essential. This is because these allies may speak to their colleagues and convince them to also support the sex worker community. Sex workers need to be clear about their ASK when engaging with parliamentarians, issues must be articulated, and where arguments must be supported with qualitative or quantitative data to justify the need for policy or legal reform.

Session 9: Strengthening Leadership skills for young sex workers – Introduction to ASWA leadership programme

This session focused on strengthening leadership skills for young sex workers in the region. Reference was made to the fear of violence and stigmatisation of sex workers which forces them to be "invisible" in society and stops them from accessing sexual and reproductive healthcare services and claiming their rights. Young sex workers default to alcohol and other substances instead of systematically addressing the issues they face. Young sex workers can become leaders, people who empower, inspire, and motivate their team members, and who achieve goals while being accountable to their team.

Criteria required to be a leader in the sex work community:

i. Commitment to community development
ii. Drive and passion for the issues.
iii. Experience in the sex industry
iv. A self-confident personality
v. Honesty and credibility

Many ways that sex worker advocates can be leaders in their various organizations:

i. Motivator
ii. Organiser
iii. Managing relationships
iv. Activist and lobbyist
v. Strategist

This session aimed at introducing participants to the ASWA Leadership Programme which specifically builds the capacity of sex workers in the continent to lead strong organisations. The session also discussed leadership skills, teamwork, and problem-solving.

Official closing

The 3 days meeting was officially closed by Mesfin Getahun, programme manager at UNDP, who mentioned that the workshop was proof that there were some goals that young sex workers can achieve, and this can be done by forming partnerships with institutions such as law enforcement agencies and healthcare providers. He mentioned that advocacy is a long-term process and that the participants should not be discouraged by a lack of immediate change. He also urged the participants to be data-driven when making presentations to stakeholders and other institutions. The I.T. team as well as the interpreter's support over the 3 days was recognised and appreciated. He also thanked the organizers of the meeting and the partnership that has been formed and established between ASWA, SASWA, and the UNDP.

ASWA Coordinator Grace Kamau also reflected on the three-day workshop and encouraged participants that this is not the end, as there are plans to host webinars to continue strengthening the capacity of the community in diverse topics. Participants were also encouraged to join ASWA as affiliate members to benefit from programmes targeting the Eastern and Southern Africa region.

Annex 1. Regional and National Advocacy Priorities

Participants then agreed on a set of regional and national advocacy priorities, or issues that require urgent advocacy and policy interventions, both at the SADC and national level of each country participating in the workshop.

ANGOLA

Legalized recognition of sex workers

The Angolan country participants identified the lack of formal recognition of Sex Work in the Angolan legislation to be one of the key barriers to sex workers being able to practice their trade without any restrictions. While Angola does not enforce the prohibition of sex work, stigma and discrimination remain rife in the country for sex workers. Therefore, the Angolan delegates identified the importance of formal recognition of sex workers in law to protect sex workers from harm and discrimination. ***Action***: Sensitise the Ministry of Youth, the Ministry of Labour, the Ministry of Planning, and the Ministry of Health on the abuse and human rights violations faced by sex workers, and create awareness of the policies and programmes enacted by the ministries that emphasize the need for sex workers' safety and protection

Train law enforcement officials and healthcare providers on human rights, so that sex workers do not face stigma and discrimination.

Angola is a signatory to numerous human rights treaties, most of which can be used to protect sex workers from active stigma and discrimination by public officials. However, in practice, law enforcement officials and healthcare providers stigmatize sex workers and prevent them from receiving the protections and services that they require. Sensitizing the Ministry of Health, the Ministry of Justice, and Parliamentarians on the Human rights treaties ratified by Angola was seen as an entry point to enforce the application of the treaties and urge these ministries to sensitize law enforcement officials and healthcare providers into providing protections and services without stigma or discrimination.

Emphasis on HIV prevention and treatment methods in the Angolan healthcare system

There seems to be a reduction in comprehensive HIV prevention and treatment services in Angola. This has led to decreased HIV testing rates, which negatively impacts the various HIV/AIDS targets, as people may be living with the virus and unknowingly spreading it to other people. Additionally, the inability of sex workers to negotiate condom use, particularly women and transgender sex workers, leads to a greater risk for HIV infection. The lack of access to HIV prevention and treatment services is a major issue that needs to be addressed. The Ministry of Health and the Angolan Network of AIDS, Tuberculosis, and Malaria Service Organisations (ANASO) need to put in place an HIV prevention and treatment campaign that prioritizes sex workers.

ESWATINI

Repealing the sodomy clause in the Criminal Act and reinterpreting the loitering clause in the Crimes Act so as not to target sex workers

Certain aspects of the British common law that governed Eswatini during colonialism remain in force in the current legal institutions of the country. The two being criminalization of same sex relations through the sodomy clause in the criminal law act and the Crimes Act, which criminalizes "loitering in public for prostitution" in s49. The former clause targets all male members of the LGBTQIA+ community, including male sex. The latter clause, however, targets all sex workers. For this reason, the Eswatini country participants look to have the clauses either excised or reinterpreted from their respective acts, so that sex workers can work without the constant threat of stigma-fuelled arrests and subsequent charges that infringe on sex workers' rights and ability to do their work.

The actors identified in this priority are the Ministry of Justice, the Women and Law in Southern Africa (WLSA) organization, the national Police Commissioner, and the Human Rights Commission. The action plan is to initiate discussions with the Ministry of Justice and the Human Rights Commission about these two clauses, with the legal support of the WLSA organization.

Action: Meet with the Ministry of Justice, engaging with partners to facilitate training and workshops on the interpretation of laws that criminalize sex work. Receiving representation at a Key Populations Consortium advocacy development plan to inform other KPs about issues faced by sex workers.

Advocate for Legal Gender Recognition for Transgender Community .

The actors identified in this priority are the Ministries of Home Affairs, the Ministry of Tinkhundla Administration and Development (chiefs and traditional leaders), as well as the Deputy Prime Minister's office.

Action: engage the relevant ministry responsible for name changes and the process it entails. This would lead to testing the processes for name change specifically for Intersex persons and transgender persons. Conduct an analysis on the process for name and gender change.

Integrating the sex worker community in Eswatini within the gender-based violence agenda to eradicate gender-based violence against sex workers

Gender-based violence in Eswatini is a prevalent issue affecting most women in the country. However, this has not translated into targeted programmes for female sex workers who also form part of the population affected by this social problem. This priority seeks to remedy this. The actors identified in this priority are the Eswatini Action Group Against Abuse (SWAGAA) and the Women and Law in Southern Africa (WLSA) organizations. The National Human Rights Commission is also included in this priority.

Action: Initiate community education and mobilization on GBV specifically targeted towards sex workers and advocate the main GBV advocacy organizations to include sex workers in accessing resources for people affected by GBV, including counselling, access to support groups, and so on. Build capacity for all sex workers to meaningfully represent sex workers and their issues in agenda and platforms where decisions made affect the sex worker community directly or indirectly.

MOZAMBIQUE

Accessibility of health services to sex workers and members of the LGBTI+ community

The Mozambican delegates identified a gap in the accessibility of certain segments of the population as compared to the rest of the Mozambican population. Sex workers and members of the LGBTI+ community in Mozambique do not receive adequate healthcare services, partly due to stigma and discrimination against these groups and partly because of a lack of information on where and how to access services. When working on these issues it is imperative to draw parallels between the experiences of sex workers and the experiences of LGBTI+ persons, to leverage resources and messaging strategies for effective advocacy. **Action:** To promote various human rights treaties to which Mozambique is a signatory, and to advocate for medical schools to introduce human rights chapters in the health curricula to minimize discrimination of sex workers and young key populations. Sensitize healthcare workers on the rights of sex workers and LGBTI+ persons in Mozambique.

The passing of legislation that will deal directly with matters relating to sex worker discrimination

Although there are no laws directly criminalizing sex work in Mozambique, discrimination against sex workers is a major problem, as it prevents sex workers from doing their work in a dignified and secure manner. These forms of discrimination sadly often come from law enforcement officials and healthcare providers, two sectors that are meant to serve all members of society. This creates a sense of powerlessness and a lack of agency on the part of sex workers. Therefore, sex workers want to advocate for legislation that directly promotes and protects sex workers and young key populations against discrimination. This could take the form of compiling position papers, making comments on draft legislation, and engaging individual parliamentarians on the matter.

The coordination of Mozambican sex-worker-led organizations

The sex work industry in Mozambique is fragmented. This presents a problem when distributing key messaging for national campaigns, for example, several local sex-worker-led organizations may not subscribe to the messages developed by another CSO thereby diluting the impact of the campaign, or may have contradicting views and positions. Significant impact can be achieved if there is a strong coordinated sex workers movement. **Action:** Create coordinated campaigns that would have the necessary reach and impact, using the human and financial resources of a unified coalition of the sex worker community. It was also decided that a register for all sex worker-led organizations be created and regularly updated so that the coordination of the sex worker community is easier to facilitate and maintain.

ZAMBIA

Educate sex workers on their rights

Sex workers are unaware of the various treaties and legal frameworks at their disposal to combat injustices by law enforcement officials and other societal actors. To mitigate this, a focus on educating sex workers about their rights is essential. An informed sex worker industry can push back against acts of abuse based on their profession. Working with the Human Rights Commission, Coalition of Sex Workers organization, Influencers, and media houses a process will be put in place to document human rights violations perpetrated against sex workers, initiate social media campaigns, and submit bulletins and statement papers to the relevant ministries or human rights bodies, as well as training "champions" (sex workers who will publicly advocate for

changes in the media and with government ministries) within the sex worker community. (The Ministries of Justice, Home Affairs, and Internal Security will also be involved in this process).

Put an end to gender-based violence (GBV) on sex workers, sexual orientation, gender identity, and gender expression

The Zambian sex worker community seeks to create networks of shared advocacy with other key population groups, namely the LGBTI+ community in Zambia. While gender-based violence affects sex workers, there is a recognition that members of the LGBTI+ community are affected in the same way. Combining resources and sharing key messaging, targeted at GBV will increase visibility on the matter and lead to more attention by policymakers and key decision-makers. **Action**: conduct a baseline survey on sex workers and members of the LGBTI+ community's experiences of gender-based violence and use it to inform crisis management and response mechanisms at community level. This priority has an emphasis on communities - the other action plans proposed were buddy networks and strengthening links with other key population groups also afflicted with the same issue. Social economic empowerment training is also recommended in this response. The actors identified in this priority are sex workers, LGBTI+ activists in Zambia, the Human Rights Commission, legal practitioners, patrol officers, the Gender Department, and the Legal Aid Department.

Decriminalize certain aspects of sex work in the Constitution

While sex work is legal in Zambia, acts associated with sex work such as soliciting and facilitating sex work are deemed unlawful by the Zambian constitution. There is a shared understanding among most Zambian sex workers that these acts must be decriminalized so that sex workers can receive full protection by the law and be shielded from stigma and discrimination by law enforcement officials. The actors identified in this priority are the Human Rights Commission, sex workers, legal practitioners, sex worker-led organizations, as well as the Police Public Complaint Authority of Zambia. **Action:** To litigate against violations against sex workers' human rights, and improve the accessibility of the relevant complaint mechanisms, so that more sex workers - even those with limited educational levels and those who reside in rural areas - are also able to lodge formal complaints.

ZIMBABWE

Decriminalise sex work

Sex work, including solicitation, harbouring a brothel, and selling sex, is unlawful in Zimbabwe. This presents a challenge for sex workers, who are harassed by law enforcement officials and who face stigma and discrimination by society at large. The Zimbabwe country participants identified the full decriminalization of sex work as a crucial part of the recognition of sex work as work, and for sex workers to be legally protected from the various vulnerabilities that they may face because of their occupation. **Action:** Draft a position paper outlining the case for the full decriminalization of sex work and presenting it to Parliament. The discussion points from this position paper will come from a Young Sex Worker Indaba where young sex workers in Zimbabwe will unpack and review policies that would lead to the full decriminalization of sex work, as well as numerous capacity-strengthening meetings with "champions", or supporters of the decriminalization of sex work, to further bolster the case for this goal to be met.

The inclusion of sex worker unions in Zimbabwe

Sex workers in Zimbabwe want to reinforce the idea that sex work is an occupation, like other occupations in the world of work. Because of this, the sex work industry ought to be subject to labour laws that regulate sex workers' work practices. Another essential element of this professionalization of the sex worker industry is the formulation of sex worker unions that would protect sex workers' rights against exploitation from pimps and customers. **Action:** To engage the Zimbabwe Congress of Trade Unions about the processes involved with unionizing the sex worker industry in Zimbabwe, as well as engaging the International Labour Organisation about the labour laws available to sex workers to best formulate the professionalization of the sex worker industry. The actors identified in this priority are the Zimbabwe Congress of Trade Unions (ZCTU), the Ministry of Labour, and the International Labour Organisation (ILO).

Reduced stigmatization for male and transgender sex workers when accessing sexual and reproductive healthcare services

Sexual and reproductive healthcare and rights (SRHR) is an essential part of the Sustainable Development Goals: SDG target 3.7 states that by 2030, universal access to SRHR must be part of every country's national strategy. This underscores just how important the provision of these services is. However, male and transgender sex workers face a sort of "double discrimination" when attempting to get these services. The discrimination comes from the stigmatization associated with sex work, as well as from the stigmatization associated with either being transgender or male. The latter is particularly evident when discussing types of masculinity, and how accessing healthcare services may not be seen as subscribing to the dominant mode of masculinity. However, the Zimbabwe country participants identified a need to rectify this, and to create easier access for male and transgender sex workers to access sexual and reproductive healthcare services. **Action**: To collect data on male and transgender sex workers to inform planning for public health facilities. Thereafter, the intent is to participate in public health hearings with the data compiled on transgender and male sex workers, and then write a position paper based on the data and feedback at public hearings to the Portfolio Committee on Health for further deliberation.

Regional Priorities

Address police brutality against young sex workers

The stigma and discrimination faced by sex workers affects their ability to work - this is especially true when law enforcement officials perpetuate violence against sex workers. All over the region, there have been reports of beatings, rapes, and arbitrary arrests. This causes fear among sex workers, as they cannot trust law enforcement officials to protect them but see police officers as opponents of their trade. The regional bloc identified this as a problem that requires regional advocacy. **Action:** To advocate for the sensitization of police officers, to advocate for young key populations and their rights to be included in police training courses across the region, and to advocate for legal reforms that explicitly punish police officers for unwarranted brutality against young key populations, including sex workers.

Call for the full decriminalization of sex work in the region

Partly due to unchanging attitudes in the SADC region, there has not been a considerable increase in countries that have decriminalized sex work in the region. This is concerning because the decriminalization of sex work would affirm sex workers' right to practice the occupation they choose without prejudice or judgment from public officials. This would also protect sex workers

from undue harm, as they would report human rights abuses faced while working, and not get arrested themselves for participating in an unlawful offense in the country concerned. Therefore, there is a dire need for the decriminalization of sex work in the region, according to the SADC bloc participants. **Action:** To advocate for bills to be adopted into the various legislatures in the region calling for the full decriminalization of sex work. There would also be advocating for sex workers' rights to be explicitly enshrined in the various constitutions of each country in the region. Additionally, the plan is to approach the African Court on Human and Peoples Rights with a legal brief calling for countries in the continent to legally recognize sex work as an occupation like any other. The actors identified in this priority are sex workers and sex-worker-led organizations, as well as the African Court on Human and Peoples Rights.

Create awareness for male and transgender sex workers

The general portrayal of sex workers tends to center on female sex workers. This is for understandable reasons, as most sex workers in the region seem to be women. However, as the sex work industry seeks to formally seek recognition from national, regional, and global bodies, there is a need to research and document the lived experiences of male and transgender sex workers. This is because their experiences must also inform the advocacy and policy strategies of the sex worker community, and in keeping with the slogan, "Nobody must be left behind", it is important that male and transgender sex workers are also able to document issues that are specific to them. **Action:** To conduct population sampling to determine the number of male and transgender sex workers in the region. This is so that a policy brief outlining their experiences can be compiled, and so that social media campaigns throughout the region are adequately targeted and have effective messaging that aims to highlight the diversity of the sex worker community.

Ongoing Capacity Building for the Sex Workers Community. The UNDP, SASWA, and ASWA to organize targeted webinars and workshops to build on the priority themes identified at the meeting and provide technical support and guidance for shadow reports.

Annex 2. Agenda

We are advancing equitable Access to HIV/ SRHR services and the Protection of the Human Rights of Young Sex Workers in the SADC region.

October 10 – 12, 2023

Johannesburg Venue: Capital on The Park

AGENDA

Time	Activity	Presenter	
Arrival of participants and finalization of logistics		**October 09 Monday**	
Day one - Tuesday, October 10, 2023			
Setting the Scene **Session Moderator: UNDP**			
08:30–09:00	Registration	SASWA	SASWA/UNDP
09:00-09:50	Welcome	ASWA	Grace Kamau ASWA Coordinator
	Welcome Remarks (virtual)	AIDS- Fonds	Samuel Matsikure Team Lead Key Populations
	Opening Remarks	UNDP	Mandeep Dhaliwal HIV Health Group Director
	Introduction of Participants	SASWA	Leeroy Gumpo
09:50-10:00	Security briefing	UNDSS briefing	UNDSS
10:00-10:30	#WeBelongAfrica - YKP Regional Project – ***Discussion***	UNDP	Sneli Ntshangase Mesfin Getahun
10:30-11:00	SASWA Regional Project ASWA Regional Project – ***Discussions***	SASWA &ASWA	Leeroy Gumpo Grace Kamau

11:00 – 11:30 Health Break			
11:30–12:15	Introduction to Human Rights: International and regional human rights frameworks - protecting sex workers rights. ***Discussions***	ARASA	Phathisani Sibanda
12:15- 13:00	Legal and Policy Landscape on sex work in the SADC countries – Structural barriers to accessing Justice, HIV/SRH services. ***Discussions***	UNDP AKPEG	Kitty Grant Daughter Ogutu-
13:00 – 14:00 Lunch			
Session Moderator: ARASA			
14:00–14.30	Country Perspective – Responding to legal and policy challenges	Country Groups discussion UNDP	Countries discuss and share strategies for how they respond to challenges at the national level
14:30–15:15	Country Perspective – Responding to challenges.	Country Presentations UNDP	Country Groups
15:15 – 15:30 Health Break			
15:30 -16:15	Sex workers and Labour rights – Focus on decent work and labour rights ***Discussions***	ILO – Virtual	Simphiwe Mabhele
16:15–17.00	Overview of HIV/SRHR issues affecting Sex workers – Contextualizing SRHR policy Issues. ***Discussions***	UNFPA	Richard Delate
17:00: 17.15	End of Day 1 Reflections	ASWA	
End of day one			

Day Two October 11, 2023.
Session Moderator: ASWA

9:00 – 09:45	Unpacking Decriminalisation of Sex work in the SADC region. What has worked; Best practices and lessons learned. South Africa experience – Journey to decriminalization. ***Discussion***	SALC – Regional perspective Sisonke – SWEAT:	SALC - TBC Katlego Rasebitse
09:45–10:30	Innovative SRHR/HIV technologies. Enhancing access to HIV prevention products for young people in sex work in Southern Africa. Keeping Young sex workers safe. ***Discussion***	Wits RHI	Nicolette Naidoo Rutendo Bothma
10:30 – 11:00 Health break			
11:45–12:30	Regional Strategies and tools: Unpacking Regional Strategies for advocacy: 10min each. • AKPEG Strategy • ASWA Strategy • SADC KP Strategy • SRHR Strategy • Renewed Advocacy Agenda	ASWA AKPEG UNDP UNFPA	Daughter Oguthu Grace Kamau Mesfin Getahun TBC UNDP
12:30–13:00	Engaging Parliamentarians – How can SW effectively engage Parliamentarians for policy and law reform?	UNDP	Monica Tabengwa
13:00 – 14:00 Lunch break			
Session Moderator: UNDP			
14:00–14:30	Monitoring Human Rights Violations – Sex Workers online platform - Hands offs initiative	AIDS Fonds	AIDS Fonds / SASWA
14:30–15:15	Strategies for engaging decision-makers and policymakers. Brainstorm – Group work	Group Work & Presentation	Grace Kamau / UNDP
15:15- 15:30	**Tea Break**		
15:30–16:00	Cementing Advocacy for Young Sex Workers in Southern Africa – Discussion	ARASA	Phathisani Sibanda

16:00–17:15	Strengthening Young Sex Workers Advocacy through Case Scenarios to be acted out in a bid to enhance advocacy skills!	SASWA	Leeroy Gumpo
17:15-17:30	Reflections on Day 2		
End of day two			

Day Three, October 12, 2023			
Sex Worker Led Advocacy – Strengthening Advocacy **Session Moderator: ARASA/UNDP**			
09:00-09:30	Engaging with Human Rights instruments: Shadow reports as a strategy for raising community voices. Discussions:	UNDP- Virtual	Priti Patel Sneli Ntshangase
09:30–11:00	Strengthening Leadership skills for young sex workers.	ASWA	Grace Nyarath Sylvia Antonia Grace Kamau
11:00 -11.15 Health break			
11.15.-12:00	A brief presentation on regional Advocacy Priorities - Brainstorm Regional Advocacy priorities	Group Work - Presentation	Leeroy Gumpo Grace Kamau
12:00–13:00	Identify three top legal and policy advocacy issues and develop a plan of action.	Country groups	UNDP / SASWA
13:00- 14:00 Lunch			
14:00–15:15	National Advocacy Priorities - presentation	Country Groups	Participants
1515–15:45	Wrap-up, evaluation, and closing	ASWA SASWA UNDP	

End of meeting and Departure