

Media alert: Second nationwide Ritshidze survey of over nine thousand LGBTQIA+ people, sex workers & people using drugs reveals ongoing crisis in health system

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10am onwards

Sign up for live stream: <https://bit.ly/RitshidzeKeyPops2023>

On 6 February Ritshidze will launch the second edition of a report looking at the state of healthcare services provided to key populations. For key populations — including people who use drugs, sex workers, and LGBTQIA+ community members — going to the clinic can at times be unbearable. Being mocked, treated with open hostility, or even denied services leaves deep scars. The unfriendliness, judgement, and abuse means some people do not feel safe or comfortable enough to go to the clinic at all.

The report will be presented to the National Department of Health, PEPFAR and agencies (USAID and CDC), and the Global Fund at a community meeting in Mamelodi. The report is based on data collected through a second large-scale data collection effort. **Together with a team of more than 146 key population data collectors, we spoke to over nine thousand individuals who identify as one or more key population groups across 21 districts in South Africa.** What we found revealed little change in the crisis that sees key populations continue to be ridiculed, abused, and even chased away from clinics.

Key issues found include:

- + **Many key populations no longer go to the clinic:** 12% of key populations we interviewed were not receiving services anywhere — and unfriendly services was the main reason given for not going to the clinic (reported by 45% of GBMSM, 50% of people who use drugs, 53% of sex workers, and 49% of trans* people).
- + **For those who do seek healthcare services, most use a clinic:** Most key populations we spoke to who are accessing healthcare use a public health facility instead of a drop-in centre or mobile clinic (67% of GBMSM, 81% of people who use drugs, 57% of sex workers, and 59% of trans* people).
- + **Yet key populations face unfriendly & discriminatory services at clinics:** Both clinical and non-clinical staff like security guards continue to be unfriendly and discriminate against key populations be it at the clinic gate, in waiting areas, or even during medical consultations. Just 37% of respondents reported that facility staff are always friendly and professional towards GBMSM, just 24% towards people who use drugs, just 46% towards sex workers, and just 41% towards trans* people.

- + **Lack of privacy & safety**: Disgraceful privacy violations continue to occur that destroy people's right to privacy and make clinics feel unsafe and uncomfortable to be in. Only 14% of GBMSM, 10% of people who use drugs, 19% of sex workers, and 14% of trans* people actually felt "very safe" using the facility.
- + **Many people have been denied healthcare in the last year**: Shockingly, significant numbers of key populations reported being **refused access to services** because of being someone who uses drugs, is a sex worker, or is a part of the LGBTQIA+ community (5% of GBMSM, 19% of people who use drugs, 12% of sex workers, and 9% of trans* people).
- + **Critical HIV, STI, family planning and sexual violence services out of reach**: Lubricants were only freely available in 27% of facilities monitored and only 28% of eligible GBMSM, 15% of people who use drugs, 28% of sex workers, and 27% of trans* people had been offered PrEP. 38% of people who use drugs were told they couldn't get contraceptives because they use drugs and 30% of trans* people told they couldn't have contraceptives because they are trans*.
- + **Limited key population specific services**: Widespread access to harm reduction services (like methadone and unused needles) or gender affirming care (including hormones) remain out of reach. Only 6% of people who use drugs were offered information about where they could get new needles and only 11% were given information on where to get methadone. Only 57% of trans* people were given information about where to access hormones.
- + **Drop-in centres are better, but too far away**: While drop-in centres can be friendlier and have better access to services (although there is room for improvement), many key populations have never even heard of them (79% of GBMSM, 75% of people who use drugs, 74% of sex workers, and 71% of trans* people were not aware of a drop-in centre) — and certainly cannot afford the taxi fare or overnight accommodation needed to get to them. The truth is that most key populations are trying to access healthcare at a public health facility.

These, among other issues, will be presented on Monday together with the personal experiences of people who use drugs, sex workers, and LGBTQIA+ community members. **The embargoed report is available upon request.**

Ritshidze is a programme of the PLHIV Sector made up of the National Association of People Living with HIV (NAPWA), Positive Action Campaign, Positive Women's Network, the South African Network of Religious Leaders Living with HIV (SANERELA+), and the Treatment Action Campaign (TAC).

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