

## THE NEXUS BETWEEN SUBSTANCE ABUSE AND COMMERCIAL SEX WORK IN MUSINA BORDER TOWN, LIMPOPO PROVINCE, SOUTH AFRICA

Svinurai, A & Makhubele, JC

Department of Social Work

Private Bag x 1106

Sovenga

Email: Jabulani.Makhubele@ul.ac.za

### Abstract

*Substance abuse and sex work share an intrinsic relationship, with the debate, its cause and effect difficult to ascertain. Substance abuse behaviours is a common phenomenon among sex workers the world over, with researches unravelling high prevalence of substance abuse in this population. In developed countries, there is general consensus amongst researchers that substance abuse especially on hard substances result in sex work. A substance abuser engages in sex work as an avenue to sustain his/her substance abusing behaviour. In Africa, however, the relationship of the two is not clear, and this paper sought to appraise the nexus between substance abuse and sex work in the busiest border town in Southern Africa, Musina Border Post Town. The research was qualitative in approach, and explorative in design with ten participants interviewed. Mostly, sex workers start abusing substances on and after entry into sex work. Substances are used to boost confidence to approach clients, to cope with intra and inter personal issues in sex trade and sex workers feel compelled when offered substances by clients and potential clients. Sex work in Africa is mainly for survival, with the conditions of service trapping sex workers to substance abuse. The shared environments of sex trade and substance abuse make sex workers vulnerable to substance abuse. It is important that the environment upon which sex workers operate is made conducive in order to limit the trapping factors of substance abuse in sex work.*

**Keywords:** Substance Abuse, Commercial Sex Work, Border post

### Introduction

There is growing consensus among scholars that the relationship between substance abuse and sex work is intrinsic and multifarious. The environment and conditions upon which sex workers operate have been cited as the chief motivation to take substances in order to cope with the demand of the sex work (Ditmore, 2013; Chikoko, 2013; Young, Boyd & Hubbel, 2000). On the other hand, some researchers especially in Western Europe are of the view that substance abuse is the reason why most people engage in sex work in order to sustain their substance addiction behaviours (Cusick, Martin & May, 2003; British Home Office., 2006, Spittal *et al.*, 2003, Gilchrist *et al.*, 2006). Leggett (2002) in Mabuza-Makoko (2005) notes that the link between sex work and substance abuse in South Africa is more of effects of sex work as a reason for substance abuse than a causation of substance abuse.

### The prevalence patterns of substance abuse among sex workers

It is tremendously challenging to guesstimate the precise number of sex workers who abuse substances, but earlier studies on female sex workers and substance abuse has revealed a high prevalence of substances abuse among this population (El-Bassel *et al.*, 2001; Cusick, 2003, Gilchrist *et al.*, 2005, Ditmore, 2013). Home Office (2006) notes that 95% of women trading in street sex work in the United Kingdom are heroin or crack abusers engaging in 'survival' sex work to sponsor their substance dependency behaviours (Spittal *et al.*, 2003). Gilchrist *et al* (2005) that 79% of the sex workers were poly substances users, 96% had a 12 months' heroin dependence, 49%

had a 12 months' illicit tranquilizer dependence, and 72% injected substances. This testify that substance abuse amongst sex workers is alarming and urgent recuse policies to deal with the problem should be enacted.

Furthermore, Cusick *et al* (2003) in the United Kingdom (U.K) revealed that all of the 125 sampled sex workers had experienced a substance abuse problem. The substances mainly abused were crack, cocaine, heroin and non-prescribed methadone. Cusick *et al* (2003) further notes that early onset of substance abuse in the U.K was related to the early debut of sex work, with the study revealing that the average age of first sex work for sex workers with substance problems were five months lower than those with no substance problem.

Wechsberg *et al.* (2009) and Gould and Fick (2008) studies in Cape Town and Pretoria respectively have revealed that sex workers are more likely to abuse substances than people with similar backgrounds, but found that very few uses injecting substances. Substance injecting sex workers are few in the country, replicating a picayune drug injecting population in the whole country (Parry *et al.*, 2009).

UCSF, Anova Health Institute and WRHI (2015) survey on hazardous drinkers female sex workers (FSW) revealed that there is an overwhelming majority of FSW in Johannesburg of 81.5% (N=764), a simple majority of FSW in Cape Town with 51.4% (N=650), (58.4%) while fewer FSW in Durban at 43% (N= 766) who were classified as hazardous alcohol drinkers. The SAHMS – FSW report further notes that almost half of the FSW in Cape Town (47.9%) have used at least one leisure drug in the prior 12 months. Drug consumed differs across the three urban areas, with the most common used by FSW in Cape Town is methamphetamine (18.7%) followed by cannabis (18.4%). In Johannesburg 6.5% uses cannabis, while ecstasy is most commonly used in Durban with 7.9% (UCSF, Anova Health Institute & WRHI, 2015).

### **The cause and effect debate on substance abuse and sex work**

The Western Europe situation of substance abuse has been largely the motivation to engage in sex work, with substance problems being a cause for transactional sex work (Ditmore, 2013). Cusick *et al* (2003) study on sex workers in the U.K found out that the most common background of most sex workers in the country is that most sex workers abuses substance and that they started abusing substances (56% of 125 substance abusing sex workers) before engaging in sex work. Sex work was then a way of sustaining their substance abusing habits.

Substance choice among substance abusing sex workers in Western Europe support that substance abuse is a cause for sex work than an effect. According to the British Home Office (2006), as many as 95% of women involved in street sex work in the UK are heroin or crack abusers engaging in 'survival' sex to fund their substance abusing habits (Spittal *et al.*, 2003). Studies by Cusick *et al.*, (2003), Gilchrist (2006) also learnt that the commonly abused substances are cocaine, heroin, and sedatives amongst other 'hard' substances. Moreover, these sex workers had a history of living with a substance abuser, have been to prison and have been homeless before becoming a sex worker. These conditions shows that these sex workers were exposed to substances earlier than to sex work traumas (Cusick *et al.*, 2003).

The 'hard' and highly addictive substances abused in developed countries shows may help to explain why abusers then engage in sex work after substance abuse. After being hooked on hard

substances, abusers might then engaged in sex work as they will now dependent on those substances. Moreover, 'hard' substances are generally expensive, thus in order to sustain the substance abusing behavior one has to have a source of income, and sex work presents such an easily available income avenue.

Substance abusing sex workers in Africa and America have been largely resembling the need to deal with the traumatic experiences of sex work than the desire to sustain addiction habits (Leggett, 2002). Sex work in Africa is a culturally stigmatized profession, with sex service providers viewed as people without morals. It is the need for that need to deal with negative societal perceptions that leads some sex workers to substance use and abuse. Additionally, the conditions upon sex work which is practiced is tough and demand, thus being intoxication has been used as a way to copy with the trade conditions (Young *et al.*, 2000).

Substances mostly abused in Africa are usually those that are cheap and readily available. UCSF *et al.*, (2015) notes that the most used substances among sex workers is alcohol, cannabis, ecstasy, tik. Ditmore (2013) also notes that alcohol is the commonly abused substance in sex work. Alcohol, like other mostly abused substances in Africa, is less addictive, affordable and readily available compared to 'hard' substances used by sex workers in Western countries. One can then argue that engaging in sex work to sustain substance abuse in Africa is less common as the mostly substances are less addictive, cheap and readily available and can be found through other avenues other than sex work.

On the other hand, recent researches has revealed that substance abuse behavior is causing sex work in most parts of the world, not Western Europe only. Asante, Meyer-Weitz and Petersen (2014) notes that, female street adolescents in Ghana have higher chances of engaging in transactional sex work so as to enhance their substance abuse behaviors. In South Eastern United States cities, some older homeless people who abuses substances like heroin, cocaine among others would exchange sex for substances as revealed by Boeri and Tyndall (2012). Nguyen (2008) study in Vietnam observed that some female street based sex workers would sale sex to sustain substance addiction.

### **Research approach and design**

The study was a qualitative and explorative research study. Hancock *et al.*, (2007) argue that qualitative research is concerned with developing enlightenments of social phenomena with an aim to comprehend the social world in which people live and why things are the way they are. The exploratory design is premised on the need to get a comprehensive appreciation of a phenomenon (Bless & Higson-Smith, 2000). This technique enabled the researchers to explore the nexus between substance abuse and sex work.

### **Research setting**

The study was conducted in Musina, a border town in Limpopo Province, South Africa. The town was founded after the establishment of mines within the area. It is located 18 kilometers from the Beitbridge, Zimbabwe Border Town (Elford, 2009). This setting was central to the study as the area attracts sex workers from the border between South Africa, Zimbabwe and other Southern African countries and due to its mining activities and proximity to the SADC busiest border point. The town is multicultural, as it contains immigrants from Zimbabwe, Malawi, Mozambique, Somalia, Democratic Republic of Congo, Ethiopia, etc (International Organization for Migration (IOM), 2014). This setting became ideal as it constitute different nationalities, thus the nexus between substance abuse and sex work in Africa could be explored from an 'African' point of view. The

target population in this study constituted substance abusing sex workers in Musina Border Post Town.

### **Sampling design**

Convenience and snow balling sampling techniques were used to locate participants. Convenience sampling contains participants who are readily available and consent to participate in a research (Frey, Carl, Botan & Kreps 2000). Latham (2007) note that convenience is just that convenient. The researchers managed to contact a NGO working with sex workers in Musina. They were then invited to an outreach program with sex workers where he then got participants who were readily available and willing to participate in the study. Two key informants from government and NGO working with sex workers were also recruited using the convenient sampling method. Snowball sampling, which, according to MacNealy (1999) is utilized “in those rare cases when the population of interest cannot be identified other than by someone who knows that a certain person has the necessary experience or characteristics to be included” was also employed. In this case, participants identified through the convenience method were then used to locate other participants who were not taking part in the outreach program.

The data was also collected through interviews. Sekaran (2003) postulate that interviews are an interchange of experiences and views between two or more people on a subject of mutual interest. Data was analyzed through thematic content analysis. Thematic analysis is used to scrutinize classifications and patterns that relate to research findings by illustrating the data in great detail via subject interpretation. (Boyatzis 1998). Guest (2012) notes that thematic analysis is the mostly used way of analysis in qualitative research, and it underscores pinpointing, examining, and recording patterns or themes within data. Chikoko (2014) and Ruparanganda (2008) also used thematic content analysis in their qualitative studies of commercial sex work and substance abuse among adolescent street children.

## **Findings and discussion**

### **Demographic characteristics of participants**

Data was collected from ten (10) participants. These participants included five (5) Zimbabweans, two (2) South Africans, a Malawian, Zambian and Mozambican. All participants were females. The diversity in nationalities of participants is a reflection of a ballooning migrant population in Musina, as argued by Chinyakate (2017).

### **Theme 1. The nexus between substance abuse and sex work**

A quick review of the sex work and substance abuse debut showed that most sex workers started abusing substance at the same time with sex work (5), with three (3) reporting that they started abusing substances after sex work and two (2) before their first sex work debut.

Table 1: **Illustration of sex work debut and substance abuse**

Started Using Substances	Number of participants
Before	2
At the same time	5
After	3

The above table shows that there is a strong relationship between substance abuse and sex work, with most participants reporting that they started taking substances at the same time (5) with sex

work and after sex work (3). This gives an early and clear indication that participants in Africa engage in sex work not because they want to sustain their substance abusing behaviors, as substance abuse behaviors seems to be starting on entry into sex work or after entry. Findings from a research conducted by Cusick et al (2003) in United Kingdom revealed that 56% of participants started abusing substances before sex work, with 23% at the same time with sex work and 21% after sex work. In this particular situation, one can argue that it is most likely that sex workers in Western countries engage in sex work to sustain their substance abuse behaviors as reported by the given statistics.

Having established the relationship of substance abuse and sex work in terms of time which one started first, the research then tried to explore the reasons for engaging for sex work.

### **Sub Theme: Reasons for Sex Work**

There are a plethora submissions made as reasons for engaging in sex work. The research managed to establish from participant's viewpoints that economic reasons, experiencing abuse and abusing substances are the reasons why participants ventured into sex work.

### **Sub Theme: Economic Reasons**

The reasons provided for engaging in sex work were by large economic (survival sex work). Participants observed that sex work provided a source of livelihood. With high unemployment rates in Southern Africa, many people find little alternatives for employment and resort to informal jobs like sex work. The high numbers of Zimbabwean sex workers indicates such a situation with Zimbabwe's unemployment rate of around 90%, South Africa has thus been providing a sanctuary for economic refugees. This was aptly described by Participant 1 who noted...

*There are no jobs in Zimbabwe. The economic situation back home forces us to come here and because jobs in South Africa are also hard to get, I end up selling my body like this.*

Migrant sex workers noted that their home countries are struggling economically which made them seek refuge in South Africa. They further explained that with no proper documentation, their chances of getting formally employed were next to none. Key Informant 1 (NGO) described the situation as follows...

*Most of these girls you see on the streets are foreigners with no permits or asylums. Its hard for them to get jobs here in South Africa so sex work becomes the only option available.*

Key Informant 1 further explained that girls come to South Africa with a preconceived idea that it is all green and jobs are easy to find only to receive a rude awakening once they set foot in Musina. To girls, many would have never tasted substances only to be transformed by circumstances they face once they commence selling sex.

Be that as it is, the researchers made an interesting observation on South African participants who happened to be the only two (2) participants who had started abusing substances before sex work. Upon enquiring if they joined sex work to sustain substance abuse behaviour, they all noted that the sex work is an avenue for looking after their children and it is the only employment they could find (economic reasons). Participant 6 (South African) had this to say:

*Sex work enables me to take care of my children. The child grant that I receive is not enough for their upkeep and I have to look for other ways of getting money...I started taking substances when I was still in High School.*

The above assertion is an indication that substance abuse among adolescence in South Africa is high, with Deveau (2008) articulating that the national average rate of substance abuse among young people is estimated to be 36.3%. A review of patterns and trends in substance use and abuse between 1960 to 2010 by Da Rocha Silva (2012:74) concluded that “[F]air to substantial proportions of young South Africans (±10-24 years) generally admit that they (1) have used some drug or other at some time in their life, and that they (2) have done so fairly intensely, i.e. in terms of frequency and the amount of intake”. To these participants, substance abuse is independent from sex work, as they regard sex work as a profession, with the need to engage in sex work divorce from their substance abusing behaviours.

Even though these participants did not see their substance abuse behaviours as the reason for joining sex work, one cannot shake off the feeling that the sex work provides them easy access to substances as their working environment are in most cases substances hotspots.

### **Sub Theme: the trapping factors of substance abuse and sex work**

The research further explored the trapping and vulnerability factors that compelled sex workers to substances abuse. Once one has joined sex work, there are a plethora of trapping factors than then drives one to sex work. These reasons as revealed by participants includes the need for substances to boost confidence and deal with intrapersonal conflicts, pressure from clients and peers, the working and living environments.

### **Sub Theme: Use of substances to boost confidence and deal with Intrapersonal conflicts**

Prejudices of sex work has existed since time immemorial, with the bigotries still rampant especially in conservative African communities (Mabuza-Makoko, 2005). It is common for sex workers to feel vilified, ridiculed by the high morals expecting societies, with their self-confidence disparaged. Henceforth, sex workers in-turn resort to substance abuse in order to boost their confidence. This need to console the intrapersonal feelings was observed by all the participants as a common goal in substance intake. Key Informant 1 explained to the researchers that the difference now is on use and abuse, but what she has observed over the years working with sex workers is that the majority takes substances especially alcohol to enable them to trade in sex.

From the entry point into the research setting, the researchers were greeted by the evidently high prevalence of substance use among sex workers. What then becomes a distinguishing point is whether one abuses or simply uses.

When the researchers explained the purpose of the study to a group of sex workers who had been gathered by Key Informant 1, the reaction from the population was a discussion to what substances are, with almost everyone murmuring that they only take alcohol and do not regard it as substances. The researchers had to explain that even alcohol according to his definition also constitute substances. On behalf of the roughly fifteen or so members one FSW then shouted...

*You know my brother some of us don't really abuse alcohol. We only take say three at most so that we are able to work. I don't think we will be of great use to what you are doing.*

After a robust discussion of what substance abuse is according to the definition of the study, some who just uses but do not qualify to be abusers left. The immediate observation that was made was that there is a constant overlap of substance using and abusing, with almost everyone using substances. These observations were buttressed by Participant 1 who summarised it by saying:

*You just can't sell your body when you are sober. You will be too ashamed to even walk around in this community that judges you when they know that you are a sex worker. We all take something before we get to the streets.*

The above statement was made whilst the participant was in deep thought, showing that she does not condone being a sex worker, and so do the majority of sex workers, and that if it is not for substances they abuses, or for some just uses, they would not be able to sell sex.

The connection between substances and sex work thus becomes evident as substances are being used for confidence boosting in sex work and the need to deal with intrapersonal conflicts of sex work. Mabuza-Mokoko (2005) study on risk behaviours among sex workers in Attridgeville and Marabastad notes that sex workers uses alcohol as a copying mechanism of the negative intrapersonal conflicts they face associated with such their sex work profession. Gossop *et al.*, (1994) argues that sex workers in London were found to be using substances like alcohol and cocaine during sex work in order to feel more detached from their work and to deal with its psychological stresses.

Young *et al.*, (2000) further argues that the subservient, humiliating nature of sex work means that sex workers would tend to feel less confident and in control during work, and in order to regain feelings of confidence, self-worthy and control after being intimate with a stranger(s), they in turn abuses substances (Plant, Plant, Peck & Setters, 1998). Moreover, de Carrvalho, Neiva-Silva, Koller, Piccini, Ramos, Evans and Page-Shafer (2006) noted that street youth in Porto, Alegre, Brazil were using substances for various reasons including as a coping mechanism as they seek to boost their confidence so as to approach male clients and negotiate for transactional sex.

### **Theme: Pressure from Clients and Peers**

Sex work as a service profession involves interacting with people of different orientations, substance abusers and non-substance abusers. By mere association, sex workers are exposed to substances, as the relationship between sex workers and their clients more often than not extends to simple provision of sexual gratification, but also involves sharing of substances. Participant 2 describes her interactions with clients as follows...

*Our clients always offer us substances. That's how it is in sex work, I get to be offered beer, weed, bronco and sometimes cocaine.*

Vulnerability to substances in sex work is quite high. Literature has also shown that clients who seek services of sex workers are usually substance users themselves, and the fact that sex workers are offered substances by their clients is not surprising (Morozini, 2013). Having been offered or invited to take substances, participants revealed that they generally feel duty-bound to take those substances

if they are to be hired by those clients. Taking substances with clients according to participants seems to be part of the reasons why one can get hired, as this is viewed as the accepted behaviour. Participant 3 noted that if one turn down a beer offer, one will then most likely loose that client.

*I have seen it happening, when I started sex work I didn't take any substances even beer. I realised that I was loosing clients because they thought that I was too uptight. I started getting more clients when I started drinking.*

The interviews also showed that sex workers in Musina are frequently hired to accompany long distance haulage trucks drivers to destinations like Zambia, Malawi, Tanzania, Democratic Republic of Congo etc. During such long road trips, participants noted that they are then pressured to join drivers in taking substances. One participant narrated:

*My first time with hard substances was when I was hired to go to Kinshasa. My client would persistently offer me weed and tik.*

Literature concurs with these findings, with Ditmore (2013) arguing that sometimes substances are central part of the interaction between sex worker and client, with some clients inviting sex workers they have hired to share their substances and provide 'party services'.

Participants further testified that the pressure to abuse substances also comes from peers. Substance abusing has in most cases become a normal way of life in sex work. By so doing, pressure to abuse these substances will be exerted to new comers who had just joined the trade. Such pressure comes from senior sex workers who are now substances dependant, as explained by Key Informant 1. Key Informant 1 noted that the pressure to take substances usually comes from informal gangs that these sex workers form, with the primary objective to protect each other from other gangs. She noted:

*These girls when they have just joined sex work, they usually join a gang, a small crew of fellow senior sex workers of about three, four or so other sex workers. These then will provide protection to the new comer and an area to work in. The new comer then usually will end up adopting the lifestyle of her new friends, and in most cases it involves substance abusing.*

The need to 'fit-in' in trades such as sex worker is an important aspect of the profession. This leads to a cycle of sex work and substance abuse, as new comers are also recruited and join the lifestyle of substances and sex.

### **Sub Theme: The Working Environments**

The environments upon which sex workers works necessitates and promotes substance abusing behaviors. This is primarily so because environments where sex work happens tends to continuously overlaps with environments where substances are found or taken. Such a continuous interaction of environments then exposes sex workers to substance vulnerability, thus in most cases than not, sex workers ends up abusing those substances due to expose effects. The study learnt that sex workers operates from streets hotspots, trucks parks, shebeens and taverns. These environments also harbor substance dealers or are alcohol selling establishments. Illustrating the effects of environments upon where sex workers operates, Participant 3 claimed that:



*You see my brother my best working spots is at the truck parks. Those places are also frequented by people who sell weed, 'matombo' and bronco. So it becomes easy for me to smoke or take bronco because those guys are ready to give you those stuffs.*

The above testimony show the interaction of the working environments of sex work and substance abuse. This places sex workers at an elevated risk of substance abuse as substances will be readily available. When the researchers toured the trucks parks, he saw empty bottles of bronclee, stubs of cannabis and tobacco cigarettes. At one of the parks, a certain gentleman approached the research vehicle and asked what type of substances they wanted to buy. The participant who was being a tour guide had to explain that the team was only doing a research, upon which the gentleman emphasized not to bring the police to the truck parks as this would jeopardize their business.

Participants also noted that they operated from alcohol selling establishments. In such places, alcohol consumption and cigarettes smoking is the main business and everyone who visits those establishments is expected to consume liquor. The researchers made visits to some of those establishments and he realized first-hand the awkwardness that engulf one not to be consuming alcohol in such taverns or shebeens. Participant 10 aptly summarized the feelings to be sober minded whilst surrounded by revelers by saying:

*It's very discomfoting to be surrounded by people drinking beer and you will be sober. Everyone will be looking at you and wondering what exactly is wrong with you. It's like going to a church and not take part in what is happening... You have to have your own beer to fit in.*

The above submission goes to show that operating in well-established joints for sex workers brings an expected feeling that they should take substances to fit in with the crowd. To those who also ply their trade from shabeens, the feeling and need to take substances is even more pronounced. This was revealed by Participant 3 who explained...

*In shebeens you are all expected to be drinking beer. The shebeen operators allow us to work from their places provided that we will be drinking beer as well.*

Environments upon which sex workers operates juxtaposes with environments where substances are sold. This makes substance abuse in commercial sex work an inevitable part of the job. To this end, literature by scholars like Ditmore (2013) notes that the substance abuse and sex work is a delicate dichotomy of intricate interactions of sex workers, their clients, and the environment upon which they operate.

Participants who worked in streets during the night explained that they feel that the working environment is not safe and substances only enables them to deal with the harsh realities they face. The researchers observed that participants works in unsafe street corners, under freezing temperatures during winter and barely clothed so as to entice clients. Participant 3 described the streets as follows...

*You see Musina is a very tough place to work in. All criminals are found here, and sometimes we have to work in street corners. Sex workers are targeted and kidnapped in the streets. We go to streets in pairs as friends but when one gets hired, you will be forced*

*to remain in the streets alone. If you are sober, my brother, I am telling you will not go and work in the streets.*

Key Informant 1 concurred to the fact that sex workers are targeted by robbers whilst working on streets. She noted that the cases of sex workers being kidnapped, raped and robbed and sometimes worse still killed in the border town has been observed. Participants lamented that despite the fact that the streets are not safe, the need for an income compels them to work in the streets despite the dangers and they would only be armed with influence of substances which provides a false sense of security.

Working on the streets has been reported to be tough as they are forced to do so in winter where temperatures will be freezing. Participants noted that the streets are better paying particularly during winter because the taverns would be less frequented. To the participants, the need to earn a living then induces them work despite the temperatures. In order to copy with the weather, some participants explained they would have to take bronclee and spirits alcohol to avoid getting flues and cold especially as they would be half covered. Participant 3 had this to say...

*You know my brother the streets are a tough place to work in. These substances you are asking about are very helpful. I work in the streets in winter with freezing temperatures, and I cannot put on jerseys and all because men will not see that I am selling sex and they will not be attracted. Sometimes it will be 2:00 am, and I will be there in the streets. Bronco and spirits helps us to copy in the streets there.*

### **Sub Theme: The living environment**

The living environment, which also doubles as the working environment is another trapping factor for substance abuse among sex workers in Musina. Some sex workers in Musina stays in brothels, popular places where men visit for transactional sex. The researchers visited one such place in Area 6, and the sight tells a story of substance abuse as he was greeted by empty bottles of bronclee, stubs of cigarettes, cannabis, alcohol empty bottles, condom sachets and a dozen men and women wondering all over, with some visibly intoxicated.

Participant 2 offered to take the researchers for a tour of the compound. The participant explained that everything could be found on that compound, as it was harboring from sex workers, substance dealers, and criminals amongst other groups of people. The environment at the brothel painted a picture that escaping the temptations of substance abuse was an insurmountable challenge than getting hooked to them. Whilst still at it, Participant 2 rhetorically asked...

*My brother, if you were living at this place, do you think you would not get tempted to try these substances?*

The eco-system theory provides a better appreciation of how the environment influences behavior on organisms. The theory proclaims that the environment contains systems with subsystems which also have smaller subsystem units making the environment (Bronfenbrenner, 1994). These interconnected subsystems self regulates and influence each other's demeanors (Potgieter, 1998). The eco-system theorists view point on such practices like substance abuse is that it is a by-product of a negotiated and mutual interaction between the person and his/her environment. Thus, substance abusing to a sex worker is a result of circumstances upon which the user is exposed to, whether they

inhibit or disinhibit such behaviors. In this case, the working and living environments of sex workers exposes them to substances, thus substance abusing patterns becomes prevalent.

**Sub Theme: Abuse of Substance to facilitate Group Sex and different Sex Styles**

The study revealed that sex workers in Musina abuses substances in order to facilitate engaging in group sex sessions and different sex preferences. Participants explained that sometimes they meet clients with different sexual needs, paying handsomely. In order to engage in such interactions, participants noted that they then take substances like cannabis, bronclee, tik or alcohol and get intoxicated. This then helps with subduing the intrapersonal conflict and easy the uncomfortable feelings, emotions and physical pain that comes with such sexual preferences. Participants observed that even though they are sex workers, some sexual preferences they are made to undertake are traumatizing and tantamount to human abuse. Despite that, the need for money and the availability of substances that facilitate such sessions would enable endure. Participant 3 had the following to say...

*Group sex pays more in spite of the dangers. Sometimes I meet clients who would tell you that they want three-some's. I know the dangers but when amounts like R1500 for a group sex session, what must I do? It will be too good to resist. In such cases, I then take bronco, weed, tik and beer and then agreed to it.*

The assertion is an indication that substances are being abused to facilitate engaging in group sex and odd sexual preferences. Participants noted that without substances, they would not be willing to do so.

Literature concurs with these observations with Chikoko (2014) postulating that sex workers in Harare Central Business District abuses substances as a copying mechanism to engaging in group sex practices. Young *et al* (2000) notes that power dynamics during sex sessions also pushes sex workers to substance abuse. Morrison *et al.*, (1995) and Inciardi (1993) argues that in transactional sex, the power mostly rests with the client who pays a sex worker to withstand acts that tantamount to various forms of sexual abuse. Young *et al.*, (2000:791) then argues that such desperate, degrading and at times violent sexual encounters makes more likely that sex workers would then turn to more substances in so as to deal with such horrifying sexual experiences.

**Sub Theme: Consider stopping substance abuse if one leaves sex work**

Having established the dependent of substance abusing behaviors and sex work, the research further tried to ascertain if participants would also consider stopping substance abuse in the event that they have left sex work. By large, there was consensus that participants are going to stop abusing substances. The majority of participants noted that they are abusing substances mainly because of the need to copy with sex work, thus if there is no longer that need, they see no reason to continue abusing substance. Participant 7 explained by saying:

*If I am to find another job now or get married, yes I would stop this sex work and substance abuse. I am only taking them because of my situation otherwise I don't really want to take them.*

Substances are being used to deal with the traumatic experiences of participants are experiencing in sex work.

However, other participants noted that even if they are to stop selling sex, they will continue taking substances. To these participants, substance abuse is independent from sex work despite the fact that it does easy sex work. Their motivation to take substances is primarily not because of sex work, but mainly because they find pleasure in abusing substance. Participant 7 had the following to say ...

*I will not stop substance abuse now. In fact I feel that sex work sometimes limits the quantity of substance I take because of the little income I get.*

The submissions shows that the participant is somehow hooked on substances and does not envisage life without them. Such reasoning can be related to Key Informant 2 who bemoaned that substance abuse is generally high in Musina even to non sex work populations.

### **Conclusions**

The nexus of substance abuse and sex work can be concluded that substances are a precursor of sex work, as reported by the study findings. The reasons for engaging in commercial sex work to many in Africa can be noted to be for economic reason, with sex workers using this avenue as a source of income to look after themselves and their families. Most of the participants in this research started using substances on entry into commercial sex work or after joining the trade. Even though some sex workers may have history of substance abuse prior engaging in sex work, the reasons for joining sex work is usually not to sustain substance abuse behaviors.

There are trapping factors in sex work that leaves sex workers vulnerable to substance abuse once they start transacting in sex. Substances are abused for their short term benefits which enables one to commercialise sex. These benefits includes boosting confidence and dealing with intrapersonal conflicting emotions, facilitating group sex and different sex styles. Moreover, vulnerability factors like pressure from clients and colleagues, the working and living environments are contributing to the high prevalence of substance abuse in sex work.

### **The short term benefits of abusing substances in selling sex**

Sex work exposes workers to intrapersonal conflicting emotions and feelings, as the trade is not only illegal in South Africa, it is regarded as immoral by the conservative African societies. Working in such an environment is tough, as the sex workers will be in constant look-out for police, and are constantly judged by the stereotyping society that views sex workers as people of 'loose' morals. This destabilizes the intrapersonal being, denting feelings of self-worthy. Moreover, sex workers also tend to feel less confident and valueless after being intimate with strangers and in order boost their confidence and regain feelings of dignity, substances are abused. Chikoko (2013) and Young et al., (2000) concurs and notes the subservient, demeaning nature of sex work means that many sex workers tend to feel less buoyant and in control after being sexually involved with a stranger or strangers thus would want to regain that self-assurance and dignity through substances.

Furthermore, substances are abused in order to facilitate group sex and 'odd' sexual experiences. Sex workers are sometimes hired to provide group sex sessions, usually one female sex worker providing sex to a more than one man. Some 'odd' sexual styles are also endured by sex workers and to facilitate such styles, substances are abused. These sessions are usually better paying and as noted by Overs (2002), sex workers understandably and justifiably often choose high income no matter the traumatising the sexual encounters might be. There are certain sexual acts that tantamount to various forms of abuse that sex workers are expected to endure (Jones, Irwin, Inciardi, Bowser, Schilling, Word, Evans, Faruque, McCoy, & Edlin, 1998, Morrison, McGee & Rueben, 1991).

Young *et al.*, (2000) laments that such fraught, mortifying and at times ferocious circumstances makes it more likely that sex workers would develop physical and psychological anguish. In such instances, in order to endure such sessions, sex workers then takes substances to facilitate such sessions.

### **The vulnerability factors**

Pressure from clients/potential clients and peers alike is another factor for substance abuse among sex workers. Masese *et al.*, (2012) argues that it is relatively uncommon that people start using substances on their own. Substance abuse is an expected behavior in sex work, with sex workers oftenly invited to take substances by their clients. Substance abuse is in most cases part of the seduction process, and sex workers are bound to feel obliged to take substances when offered by their clients as turning down the offer can also be interpreted as turning down business. Parry *et al.*, (2008) notes that some clients hire sex workers specifically because they intend to take substances with someone, and sometimes sex workers are hired to attend to parties where substance taking will be compulsory. It is also common for peers to pressurize each other into taking substances, and in order to fit into other sex workers' gangs, one expected to also abuse substances. Ditmore (2013) notes that refusal to take substances when invited by potential clients may potentially result in losing business.

The working and living environments is another vulnerability factor that often leads to substance abuse among sex works as revealed by the study. Sex work environments frequently overlaps with substance abusing selling places, thus exposing sex workers to substance abuse. Sex workers in Musina operates in alcohol selling taverns, shebeens and substances selling hotspots and Ditmore (2013) posits that the duress to use and abuse alcohol is the most predominant of all pressures to use psychoactive substances as the alcohol and sex work environments overlaps. The pressure to take substances is rampant as the substances will be readily available, and some substances dealers also expects sex workers to buy substances as the dealers also seeks sex workers services. The living environments for some sex workers in Musina are more of brothels as substances are also sold. Wechsberg *et al.*, (2008) notes that operating in brothel further exposes sex workers to substance abuse as brothels are usually regulated by pimps who also doubles as substance dealers, and they expect sex workers to buy substances from them.

### **References**

- Alhojailan, M.I. (2012). Thematic analysis: A critical review of its process and evaluation. *West East Journal of Social Sciences*, 1 (1), 39-45.
- International Organization for Migration (IOM), (2014). *Regional strategy for Southern Africa 2014-2016*. International Organization for Migration, Geneva, Switzerland.
- Asante, K.O., Meyer-Weitz, A & Peterson, I., (2015). Correlates of psychological functioning of homeless youth in Accra, Ghana: a cross-sectional study. *International Journal of Mental Health Systems* 9 (1). Retrieved on September 4, 2017 on <https://ijmhs.biomedcentral.com/articles/10.1186/1752-4458-9-1>
- Bless, C. & Higson-Smith, C. (2000). *Fundamentals of social science research methods: An African perspective*. Cape Town, South Africa: Juta
- Boeri, M.W. & Tyndall, B.D (2012). A contextual comparison of risk behaviors among older adult drug users and harm reduction in suburban versus inner-city social environments. *Journal of Applied Social Science* 6 (1), 72-91.
- Boyatzis, R.E. (1998). *Transforming qualitative information: thematic analysis and code development*. California, Sage Publications.

- Central Drug Authority. (2010). *Annual report of the central drug authority 2009/10*. Pretoria: Department of Social Development.
- Chinyakata, R.N, Raselekoane N. & Gwatimba L. (2018). A Study of the Effects of Zimbabwean Youth Migration on Musina Area, South Africa. *The Social Sciences* 13 (2): 357-362
- Chikoko, W. (2014). Commercial 'sex work' and substance abuse among adolescent street children of Harare Central Business District. *Journal of Social Development in Africa*, 29 (2), 57-80.
- CoRMSA., (2009). *Report to the government of the republic of South Africa on the humanitarian crisis in Musina, South Africa*. Consortium for Refugees and Migrants in South Africa (CoRMSA), Johannesburg, South Africa.
- Creswell. J. W. (2009). Mapping the field of mixed methods research. *Journal of Mixed Methods Research*, 3, 95-108.
- Cusick L. (2006). Widening the harm reduction agenda: from drug use to sex work. *International Journal of Drug Policy*, 17, 3-11.
- Cusick, L., Martin, A. & May, T. (2003). *Vulnerability and involvement in drug use and sex work*, In D. a. S. D. The research (ed): Home Office Research Study 268.
- DeBeck, K., K, S., E, W., K, L., Montaner, J. & T, K. (2007). Income generating activities of people who inject drugs. *Drug and Alcohol Dependence* 91, 50-56.
- Ditmore, M.H. (2013). *When sex work and drug use overlap: Considerations for advocacy and practice*. London: Harm Reduction International.
- El-Bassel N *et al.*, (2011). Intimate partner violence and HIV among drug-involved women: contexts linking these two epidemics-challenges and implications for prevention and treatment. *Substance Use & Misuse* 46(2-3), 295-306.
- Elford (2009). *Migrants' Needs and Vulnerabilities in the Limpopo Province, Republic of South Africa* A Report by the International Organization for Migration Regional Office for Southern Africa Pretoria, South Africa
- Frey, L.R.F, Carl H.B, & Gary L.K. (2000) *Investigating Communication: An Introduction to Research Methods* (2nd ed). Boston: Allyn and Bacon.
- Guest, G., Namey, E. E., & Mitchell, M. L. (2012). *Collecting qualitative data: A field manual for applied research*. Sage.
- Gilchrist, G., Cameron, J. & Scoular, J. (2005) Crack and cocaine use among female prostitutes in Glasgow: Risky business. *Drugs: Education, Prevention and Policy* 12(5), 381-391.
- Gould, C. & Fick, N. (2008). *Selling sex in Cape Town: Sex work and human trafficking in a South African city*. Pretoria/Tshwane: Institute for Security Studies.
- Hancock B., Windridge K., & Ockleford, E. (2007). *An Introduction to Qualitative Research*. The NIHR RDS EM / YH
- Jones, D., Irwin, K., Inciardi, J., Bowser, B., Schilling, R., Word, C., Evans, P., Faruque, S., McCoy, V. and Edlin, B. (1998). 'The high-risk sexual practices of crack-smoking sex workers recruited from the streets of three American cities. *Sexually Transmitted Diseases* 25(4), 187-193.
- Kgosana, R. (2017, May 27). Report on Sexual Offences: Adult Prostitution. *Saturday Citizen*, p. 5
- Limpopo Government Communications. (2013). Youth month campaign key messages. Retrieved June 22 2017 from [www.gcis.gov.za/sites/www.gcis.gov.za/files/My\\_District\\_Issue\\_67.pdf](http://www.gcis.gov.za/sites/www.gcis.gov.za/files/My_District_Issue_67.pdf)
- Mabuzza-Mokoko, E.M.A. (2005). *Towards developing a policy framework on risk behaviour among sex workers an intervention research study*. (Unpublished PhD Dissertation). Polokwane, University of the Limpopo
- MacNealy, M.S. (1999) *Strategies for Empirical Research in Writing*. New York: Longman.

- Masese, A, Joseph, N.W & Ngesu, L. (2012). The extent and panacea for drug abuse and indiscipline in Kenyan schools. *Asian Journal of Medical Sciences*, 4(1): 29-36.
- Morozini, S. (2011, December 3). The real link between drug use and sex work. *Talking Drugs*, Retrieved September 18, 2017 on <https://www.talkingdrugs.org/drug-use-and-sex-work-what-is-the-real-link-between-them>
- Ndetei, D.M, Pizzo, M., Kuria, M.W., Khasakhala, L., Maru, M.H & Mutios, V (2008) Substance Abuse and Psychiatri Co-morbidities: A case study of patients at Mathari Psychiatric Hospital, Nairobi Kenya. *African Journal of Drug and Alcohol Studies*, 7 (2).
- Nguyen, T.L. (2008). Drugs, sex and AIDS: Sexual relationships among injecting drug users and their sexual partners in Vietnam Culture, Health & Sexuality: *An International Journal for Research, Intervention & Care*, 10(S1), 123- 137.
- Overs, C. (2002). Sex Workers - Part of the Solution: An analysis of HIV prevention programming to prevent HIV transmission during commercial sex in developing countries. Retrieved on September 18, 2017. [http://www.who.int/hiv/topics/vct/sw\\_toolkit/115solution.pdf](http://www.who.int/hiv/topics/vct/sw_toolkit/115solution.pdf)
- Parry, C. D. H., and Pithey, A. L. (2006). Risk behavior and HIV among drug using populations in South Africa. *African Journal of Drug & Alcohol Studies*, 5(2), 139-156.
- UCSF, Anova Health Institute & WRHI. (2015). South African Health Monitoring Study (SAHMS), Final Report: *The Integrated Biological and Behavioral Survey among Female Sex Workers, South Africa 2013-2014*. San Francisco: UCSF.
- Ruparanganda, W. (2008). *The sexual behavior patterns of street youth of Harare, Zimbabwe, in the era of the HIV and AIDS pandemic*, Unpublished D.PHIL. Theses. Harare: University of Zimbabwe.
- Spittal, P., Small, W., Laliberte, N., Johnson, C., Wood, E., & Schechter, M. T. (2003). How otherwise well-meaning exchange agents can contribute to limited sterile syringe availability in Vancouver, Canada. *International Journal of Drug Policy*, 15(1), 36–45.
- Sekaran, U. (2003). *Research Methods for Business: A Skill-Building Approach*. 4th Edition, John Wiley & Sons, New York.
- Vandepitte, J., Lyerla, R., Dallabetta, G., Crabbé, F., Alary, M & Buvé, A. (2006). *Estimates of the number of female sex workers in different regions of the world, sexually transmitted infections* 82 (Suppl 3):iii18-25.
- Wechsberg, W., et al., (2009). Substance abuse, treatment needs and access among female sex Workers and non sex workers in Pretoria, South Africa. *Substance Abuse Treatment, Prevention and Policy*, 4(11).
- Wiechelt, S.A & Shdaimah, C.S. (2011). Trauma and substance abuse among women in prostitution: Implications for a specialized diversion program. *Journal of Forensic Social Work*, 1 (2), 159-184.
- Wechsberg, W.C. Parry, C. and Jewkes, R (2008) *Drugs, sex, and gender based violence: The intersection of the HIV/AIDS epidemic with vulnerable women in South Africa Forging a Multilevel collaborative response*. RTI International.
- Young, A.M., Boyd, C., & Hubbel, A. (2000). Prostitution, Drug Use, and Coping with Psychological Distress. *Journal of Drug Issues*30(4), 789-800.