

PRESS RELEASE - SOUTH AFRICA: Ongoing xenophobic action puts at risk the lives of several non-South African patients.

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Doctors Without Borders (MSF) is deeply concerned by the persistent and systematic physical blocking of non-South Africans from accessing healthcare, including pregnant women, people living with HIV, chronic patients and children - particularly in Gauteng and KwaZulu-Natal. We call for immediate action by the National Department of Health (NDoH) and relevant Provincial Departments of Health to guarantee the right of access to healthcare for all, as enshrined in the country's Constitution and the National Health Act.

For several weeks now, anti-migrant groups, have camped outside dozens of clinics and hospitals in Gauteng, preventing non-South Africans from entering public health facilities to seek medical care, irrespective of their legal documentation status.

MSF launched an assessment to understand the severity of these blockages and the needs of those impacted, following reports of denial of access to care at locations across South Africa. The team visited 15 hospitals and clinics in Gauteng, where they consistently witnessed patients being turned away from more than half of these healthcare facilities by groups of between 2 and 10 people, wearing civilian clothing. The groups are either stationed at the gate or inside facilities and are demanding identification from every person who tries to enter, turning away those they deem non-South African. From MSF's assessment, the issue is more widespread at primary healthcare clinics (PHCs) than hospitals.

"The results of our assessment are highly distressing and unacceptable. Our team even witnessed two clinics where security staff and healthcare workers worked in collusion with these anti-migrant groups. We urge the Department of Health to immediately address healthcare facilities who are enabling or encouraging any kind of denial of healthcare," says Claire Waterhouse, MSF Southern Africa's Director of Operational Support Unit.

The MSF team also visited and called nearly 50 patients who indicated that they were denied access to healthcare in 24 health care facilities in and around Johannesburg, Durban and Tshwane. The patients, consisting of mostly late term pregnant women, and people with diabetes, hypertension and HIV, have expressed fear, panic and confusion. Most informed us that they already struggle financially and are unable to buy medication or afford private medical care. Some patients told MSF staff that they tried to retrieve their medical files from the clinics to enable them to seek medical care elsewhere without success, leaving them unsure of next steps. Others have no prescriptions to use to refill their medication, so are unable to buy their needed medication from pharmacies.

Due to these blockages, many pregnant women with high-risk conditions including those with hypertension, diabetes and HIV, have remained unmonitored and untreated. Many HIV patients have gone for over two weeks without their medication, while others were left with just a few days' supply at the time MSF staff spoke to them. Defaulting HIV treatment can have serious complications for people, as well as add to the burden on the health system by becoming sicker and requiring more intensive treatment.

"It is critical that both the National Department of Health and Provincial Departments address this problem with urgency. Clinics must be made safe for all who need them through proactive measures, including safe, effective and timely police protection where needed. We also call for the appropriate health departments to work with communities to address the state of healthcare facilities and to find lasting solutions to these challenges instead of apportioning blame on non-South Africans," adds Waterhouse.

MSF urges the National Department of Health to immediately and unequivocally reaffirm the right of all who live in South Africa to access basic healthcare, without discrimination, and to conduct health education in communities to ensure that non-South Africans feel safe to return to facilities and that South Africans understand why this is non-negotiable.

*Thando, a 33-year-old woman, was turned away on the 14th of July from a queue inside a hospital in Gauteng Province by an anti-migrant group for being undocumented. She is a 16-week high-risk pregnant patient who is also hypertensive.

"I already knew of the situation at the hospital when I went because another girl had already told me that foreigners were being turned away. But I still decided to try. So, I got to the hospital early in the morning at 07:00. There were about 7 to 8 people in the queue already".

She says a gentleman randomly appeared holding a South African Identity card.

"He waved it, walking around and showing us. He said that if any of us didn't have something like what he was holding, or if a passport didn't have a permit, we should start getting out. The nurses were there, and they started laughing, supporting him. They said we don't pay tax, and they are tired of us. They said we can go; it will be less work for them. Only four people were left inside when the rest of us had to leave," adds Thando.

Thando struggles financially to provide for her family of seven people including her three children whom she lives with in a rented room in Yeoville, Johannesburg. She sells food and gets little support from her boyfriend who is an e-hailing driver. Feeling the strain of having to support many people with the little she has, she desperately wishes she could terminate her pregnancy but is worried that it may be too late and dangerous.

For *Rose who has been in South Africa since 2019 and is 38-weeks pregnant, the experience of being blocked from accessing healthcare services is traumatic.

"If you're pregnant and you're chased away, you get stressed, wondering about what will happen to the baby. I wonder what will happen if I have complications. I can't predict how I will be feeling tomorrow and what will be happening with me. I hear some people are now losing babies".

*Tecla, a 44-year-old domestic worker who is living with HIV and taking ARVs, along with other chronic medication, has been in South Africa since 2008. She has not been blocked yet, but her landlord has been turned away and she sees people being chased away daily as she lives across one of the clinics.

"I have medication that lasts me until 15th of August, but I am afraid to go to the clinic for my next refill, so I have tried to check if I can get medication from a pharmacy. I cannot afford [it] as the doctor wanted R500 consultation fee, additional fees for tests to determine my CD4 count and initiate me on treatment. I have considered going back home, but I have no money," Tecla told MSF staff.

Rose, Tecla and Thando are not alone. Thousands of non-South Africans, many of whom are extremely vulnerable are struggling to access urgently needed and basic healthcare. South Africans who have lost or forgotten their ID documents, or those they assumed 'did not look or sound South African' enough are also losing access. This is not the first time anti-migrant groups have blocked non-South Africans from accessing healthcare services. In 2022, Operation Dudula supporters protested outside Kalafong Provincial Tertiary Hospital in Tshwane, threatening and blocking access until the xenophobic protests emphasising that the right to access basic health services, was a basic human right enshrined in the South African Constitution, regardless of nationality nor documentation status.

MSF has provided free medical care to vulnerable populations such as migrants, asylum seekers and refugees in South Africa since 2007 and has continuously responded to sporadic impacts of xenophobic violence on healthcare access for vulnerable people over the years. Recently, MSF supported displaced migrants with food and non-food items such as water containers, blankets, aqua tabs, baby diapers, baby formula, porridge, sanitary towels, and other hygiene essentials following violence primarily targeting of non-South Africans in Addo, Eastern Cape.

*Please note, we have changed names of all the patients.

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