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RESEARCH ARTICLE

The Knowledge and Behaviour of Female Sex Workers towardsthe Risk of HIV/AIDS: A Review.

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Key words:-

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Abstract

Background: Various strategies and policies have been implemented in order to prevent the transmission of HIV infections. However, the prevention programs are associated with a number of issues and challenges in each country as well. Most of new HIV infections occur through sexual contacts and most of them are commercial sex workers who are a challenging and hard-to-reach population. Therefore, ideas in HIV/AIDS prevention programs, particularly for sex worker groups, should be well-arranged continuously.

Methods: Electronic journals and reports were accessed by using Cochrane, BioMed, DOAJ, Proquest, PubMed, Bioline, Taylor & Francis, Google, and Google Scholar. The search strategy was limited to English and published year from the last ten years with the keywords of HIV/AIDS, cognitive-attitude-practice, sex workers, and prevention. The literature review generated 28 articles, with 19 studies meeting the inclusion criteria.

Results: Generally, financial need is the reason for initiating and maintaining sex work. Most of sex workers knew and were aware of HIV/AIDS, but their needs did not allow any fear and health consciousness, also they did not see any other options outside sex work. Unfortunately, many sex workers reported the inconsistency of condom use.

Conclusion: Social, psychological, and environmental-structural factors, such as supports from the establishment owner (employers), manager trainings, peer influences, accessibility of condoms, promotion of condom use, knowledge about condom use, and supports from community health care providers are very necessary to be increased.

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Background:-

Based on the report from The Joint United Nations Program on HIV and AIDS (UNAIDS), the total number of new HIV cases is gradually declining by more than 50% in 26 countries between 2001 and 2012, and between 25% and 49% in an additional 17 countries (UNAIDS, 2013), with the annual AIDS-related deaths have decreased in 2016 by 43%. These numbers have shown an important progress of the HIV/AIDS prevention as the HIV/AIDS pandemic has become the most challenging health and social problems worldwide since first time discovered in 1983(The U.S. Department of Health & Human Services, 2006). Various strategies and policies have been implemented in order to

prevent the transmission of HIV infections. Comprehensive and continuous approaches are needed as HIV/AIDS contributed to 1.6 million of death in the world in 2012(UNAIDS, 2013) and 2.1 million new HIV infections reported by UNAIDS in 2015.

Over 75% of new HIV infections occur through sexual contacts (WHO, 2013) and most of them are commercial sex workers who are a challenging and hard-to-reach population(OHTN, 2012). Sex workers and their clients are at the highest risk for HIV/AIDS(Giri, Hiremath, & Kasbe, 2012) as they have high risk sex or sex with high risk partners, illicit drug use, unstable living and working environments, young age, tattooing or body piercing, and a history of sexual abuse which are the most potential HIV transmission(OHTN, 2012). Each country has been implementing various methods to increase the sex workers knowledge and motivation in HIV/AIDS preventions. However, based on the fact that the prevalence of HIV/AIDS among sex workersestimates higher than the general population (Chipamaunga, Muula, & Mataya, 2010), more effective programs should be identified and implemented. Decisions about further programs should be based on best available information (Pattanaphesaj & Teerawattananon, 2010). Therefore, this paper will try to analyze and discuss knowledge, behavior, perception, attitude, and practice or female sex workers towards HIV/AIDS in several countries, in order to find out some new ideas about HIV/AIDS prevention programs particularly for sex worker groups.

Methods:-

Electronic journals and reports were accessed by using Cochrane, BioMed, DOAJ, Proquest, PubMed, Bioline, Taylor & Francis, Google, and Google Scholar. The search strategy was limited to English and published year from the last ten years with the keywords of HIV/AIDS, cognitive-attitude-practice, sex workers, and prevention. The literature review generated 28 articles, with 19 studies meeting the inclusion criteria. The aim of this process is to gather information about knowledge, behavior, perception, attitude, and practice or female sex workers towards HIV/AIDS in several countries, particularly in Asia. Purposefully, new programs which are more effective and efficient to prevent HIV transmission among sex workers could be developed based on the literature review and research that will be done in the nearest future.

Findings and Discussions:-

1. Become a sex worker:-

The most effective method to prevent HIV transmission among sex workers is by stop the sex work. However, a research reported that sex work could give them more money and pleasure, also because they did not regard life outside sex work as a viable option (Chipamaunga et al., 2010). Generally, studies found that financial need is the reason for initiating and maintaining sex work, because in some countries most of sex workers were from poor socio-economic status and broken family (Giri et al., 2012). Other factors such as lack of education, poverty, domestic violence, marital breakup, family responsibility, lack of support by family members, harassment, and abuse in society and in workplace are the main reasons for women coming to this profession as well(Charles et al., 2013).

2. Knowledge of HIV/AIDS:-

In many discussions about knowledge, attitude, and practice model, knowledge has been known as a prerequisite for the intentional performance of health-related behavior(Chipamaunga et al., 2010). Individual perception of susceptibility to HIV/AIDS and benefits of condom use are important factors in determining condom use and cognitive information through health education is an effective promotion (Ye et al., 2012). Most of sex workers knew and were aware of HIV/AIDS and the common source of information about HIV/AIDS was from television (Giri et al., 2012) and doctors (Lau, Tsui, Siah, & Zhang, 2010). However, studies found that knowledge is not always directly associated with behavior change (Pattanaphesaj & Teerawattananon, 2010).

A study in Durban shows that 100% female sex workers knew of HIV/AIDS and aware that HIV/AIDS is a major health concern in South Africa, but their work did not allow a situation of fear, too much health consciousness, and HIV awareness has only little impact on choice of either client or personal partners (Varga, 2010). Denial is the most common response of sex workers towards HIV transmission. They believed that they could not easily get HIV in the future because they use condoms with "most" clients (Varga, 2010). Other sex workers used fatality (prioritize life concern and justify lack of any active effort to protect themselves from HIV infection), economic rationalization, partner categorization through selective condom use (love or

unknown clients), purposeful ignorance of HIV status, and abnegation of responsibility (too weak to control clients who are disagree using condoms) as their coping mechanism towards HIV transmission risk (Varga, 2010).

3. Sexual Risk Behavior:-

From several researches, condoms use, street outreach programs, programs for the prevention of mother-to-child HIV transmission, circumcision, and needle and syringe programs were the only interventions with strong evidence of reducing HIV infection (Pattanaphesaj & Teerawattananon, 2010). Voluntary HIV counselling and testing, peer education, and male and female condom use have been proved to be effective and cost-effective for female sex workers (Pattanaphesaj & Teerawattananon, 2010). From those interventions, condoms are believed as the most effective prevention for HIV transmission because consistent condom use results in 80% reduction in the spread of the disease (Giri et al., 2012).

Because there is no cure or vaccine, HIV prevention depends on the ability to modify risky behaviors, consistent, and appropriate condom use (Morisky, Stein, Chiao, Ksobiech, & Malow, 2006). Unfortunately, many sex workers reported the inconsistency of condom use. Various factors such as situational factors (including female condom availability) the type of client, desire for sexual pleasure, and financial considerations could affect the decision whether condoms were used or not (Chipamaunga et al., 2010). In China, the primary reason for not using condoms during sexual contact was the clients' refusal to use condoms (Lau et al., 2010). Moreover, one study found that 61% of Haitian women felt that the decision on condom use was exclusively the male's right (Couture, Soto, Akom, Joseph, & Zunzunegui, 2010). Most of them are generally poor and with dependent family members and there have little power to negotiate use of condom. Other interesting fact is that about 10% of the total respondents in a study in China thought that condoms could be used repeatedly and no expiration date (Lau et al., 2010).

Varga(2010) found that 67.3% of sex worker respondents in a study in Durban would forego condoms for extra payment, while the average of condom utilization among female sex workers in Thailand was only 51% (Buckingham, Moraros, Bird, Meister, & Webb, 2007). In Thailand, factors contributed to the use of condoms are ethnicity of patron (western have willingness to utilize condoms than foreign Asian or native Thai patrons) and bargaining capacity with potential patrons (Buckingham et al., 2007). Similar report from Ye et al. (2012) stated that sex workers capability to negotiate safe commercial sex takes a part to persuade clients into using condoms consistently during sexual intercourse. Interestingly, although sex workers are able to be convinced to use condoms with clients, it was more difficult for sex workers in Shanghai to initiate condom usage with non-paying partners (Cai et al., 2010). It based on their boyfriend/husband/partner's perception that their partners were not having unprotected sex with anyone else.

4. Prevention Programs:-

Due to the inconsistency condom use by sex workers, it is very important to identify factors that could motivate and influence the sex workers' decision on condom use. Approximately 13% of respondents in a study in China reported that it was difficult to get condoms when needed particularly for younger, 59,3% said that pharmacy shops were the most convenient place to buy a condom and 7,9% stated that they did not know how to use a condom (Lau et al., 2010). Condom availability may not be a major factor affecting condom use, as a research in China with 504 respondents investigated that social, psychological, and environmental-structural factors are very important in determining consistency condom use among female sex workers and their clients (Ye et al., 2012). Therefore, supports from the establishment owner (employers), accessibility of condoms, supports from community health care providers are very necessary(Morisky et al., 2006; Ye et al., 2012). Besides that, the peer influences, promotion of condom use and knowledge about condom use must be an important component of future prevention programs(Lau et al., 2010; Morisky et al., 2006).

In the Philippines, one of the most useful program in order to prevent HIV prevention is the manager training intervention. The training series consist of regular meeting, monitoring, providing educational materials on HIV/AIDS, and making condom available (Morisky et al., 2006). Besides that, the training also encourages the manager to provide positive reinforcement of their employees' healthy sexual practices.

Conclusion and Recommendations:-

For some groups of population, become a sex worker is "the only option". Social-economic status and family background are the most reason for this decision. Therefore, they did not see other way for live although based on the studies from some countries, almost all female sex workers knew and were aware the risk of HIV transmission.

Unfortunately, sex workers decisions to use HIV prevention methods are often difficult when it depends on their customer as well. Various programs to increase the motivation of female sex workers to prevent HIV transmission, including the problem of the inconsistency of condoms use should be developed. Interventions should also include social, psychological, and environmental-structural factors, such as supports from the establishment owner (employers), manager trainings, peer influences, accessibility of condoms, promotion of condom use, knowledge about condom use, and supports from community health care providers.

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