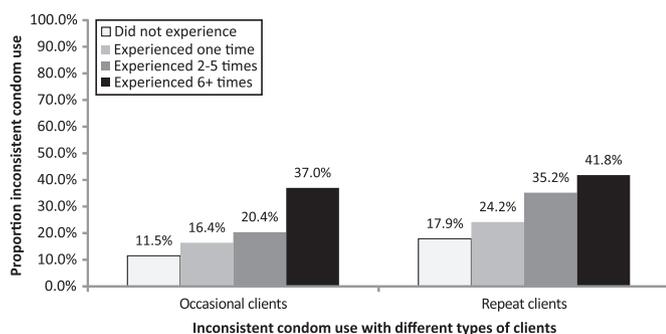


(IPViol) may be important structural determinants of vulnerability to HIV and sexually transmitted infections (STIs). This study characterised the type and frequency of CLViol and IPViol experienced by FSWs in southern India and examined the relationship between client violence and inconsistent condom use (ICU) with clients.

**Methods** Data were analysed from cross-sectional surveys of FSWs in three districts in Karnataka state (2007). ICU was defined as condom use frequency reported as 'never/sometimes/often' vs 'always', by repeat and occasional clients. CLViol and IPViol measures included having experienced physical violence in the past 6 months (ie, hurt, hit, kicked, punched, choked, burned) or sexual violence in the past year (ie, beaten or otherwise physically forced to have sexual intercourse).

**Results** Of our sample of 1245 FSWs, ICU was 13.0% with occasional and 20.2% with repeat clients. Overall, 13.1% of women reported physical violence from any perpetrator (CLViol: 5.5%; IPViol: 4.6%) and 9.7% reported sexual violence (CLViol: 5.2%; IPViol: 4.4%). In multivariable logistic regression analysis, the odds of ICU with occasional clients were significantly higher for women who had experienced physical CLViol (adjusted OR (AOR): 2.4, 95% CI: 1.2% to 4.8%) or sexual CLViol (AOR: 2.7, 95% CI: 1.3% to 5.5%). Similar results were found with repeat clients: AOR: 2.5, 95% CI: 1.4% to 4.6% and AOR 2.3, 95% CI: 1.3% to 4.2%, for physical and sexual violence respectively. A dose-response relationship between the number of times experiencing CLViol and increased ICU with both types of clients was also observed ( $p < 0.001$ ) (Abstract O2-S6.02 figure 1). IPViol was not significantly associated with ICU with clients. Experiencing CLViol was not associated with experiencing IPViol ( $p = 0.321$ ).

**Discussion** A strong independent relationship between experiencing client violence and inconsistent condom use with clients among FSWs in southern India was observed, highlighting FSWs' vulnerability to HIV/STI infection. Occupational violence against FSWs should be addressed within HIV/STI prevention programming. Structural-legal reforms to current sex work laws and safer-environment interventions should be developed to reduce violence and HIV/STI vulnerability among FSWs.



Abstract O2-S6.02 Figure 1 Proportion of female sex workers who used condoms inconsistently with occasional or repeat clients according to the number of times they experienced physical violence by clients in the last 6 months (did not experience, experienced one time, experienced 2-5 times, experienced 6+ times).

**O2-S6.03 HETEROGENEITY OF HIV RISK: FEMALE SEX WORKER CLIENTS AND THEIR NON-COMMERCIAL SEXUAL PARTNERS IN SOUTH INDIA**

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**Introduction** Clients of female sex workers (FSWs) are an important bridging population for the further transmission of HIV and other

sexually transmitted infections (STIs). However, the extent of risk to non-commercial partners (NCP) of clients has rarely been quantified. This study sought to characterise the risk behaviours of clients with both non-commercial and commercial partners.

**Methods** Data were collected from a cross-sectional integrated behavioural and biological survey of FSW clients from five districts in Karnataka state, southern India. Clients were classified into three groups: married (and thus with an NCP); unmarried with at least one NCP; and unmarried without an NCP. Bivariate and multi-variable logistic regression models were constructed to examine the association between group membership and condom use patterns with regular and casual FSWs, and where applicable, non-commercial partners. Associations between the prevalences of HIV, HSV-2, syphilis, gonorrhoeal and chlamydial infections and group membership were examined in multivariable models. Normalised weights were used to account for a complex sampling design.

**Results** The total sample size was 2328. Most respondents (61%) were married, 9% were unmarried with an NCP, and 30% were unmarried without an NCP. Married clients were, on average 9 years older (34 vs 24.8 years), and had been visiting FSWs for an average of 12 years, vs 4 years in the other two marital categories. Compared to respondents without an NCP, married clients were at higher odds of reporting never using condoms with both casual (AOR: 1.8; 95% CI: 1.3% to 2.4%,  $p < 0.0001$ ) and regular (AOR: 1.8; 95% CI 1.2% to 2.7%,  $p = 0.009$ ) FSWs. Among the two groups reporting an NCP, 91% of married respondents reported never using condoms with their NCP, compared to 62% of unmarried clients (AOR: 5.2; 95% CI 3.3% to 8.1%,  $p < 0.0001$ ). HIV prevalence was 6%, 5% and 8% among those that were married, those unmarried without an NCP, and those unmarried with an NCP, respectively ( $p = 0.384$ ). For the same groups, HSV-2 prevalence was 37%, 16% and 19% ( $p < 0.0001$ ). In adjusted analyses, married respondents remained at highest odds of being infected with HSV-2 (AOR: 1.5; 95% CI 1.1% to 2.1%,  $p = 0.006$ ).

**Conclusion** Married respondents were least likely to use condoms with both commercial and non-commercial sexual partners, while also having the highest prevalence of HSV-2. These findings illustrate the high risk posed to both commercial and non-commercial partners of married clients of FSWs.

**O2-S6.04 AN EXPLORATORY SURVEY OF MALE SEX WORKERS AND HIV RISK IN AN URBAN AREA OF SOUTHWEST CHINA**

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**Background** Little knowledge is available on risk behaviours of HIV and basic demographic characteristics in male sex workers (MSW) in the population of men who have sex with men (MSM) in China. The objective of this study is to explore the risk to HIV/STI of MSW in southwest China through a convenience sample of an HIV surveillance survey of MSM.

**Method** Those who self-reported had been paid for sex or "engaging in money exchange for sex" were identified as MSW or "Money Boys". Data of the past five cycles (2004–2008) of an HIV surveillance survey were included in this study. Descriptive statistics were employed to describe demographics, sex practices, and HIV prevalence in these male sex workers.

**Results** A total of 117 men self-identified as MSW in five consecutive cross-sectional surveys (2004 n=54, 2005 n=39, 2006 n=45, 2007 n=34, and 2008 n=45). The median age of participants ranged from 25 to 27 years. In the 6 months prior to the survey, the median number of male sex partners ranged from 4 to 11; the median of