**P4.132** REDUCING HARASSMENT OF FEMALE SEX WORKERS (FSWs) IN LOW INCOME SETTING: TRIPARTITE APPROACH IN BANGLADESH  
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**Background** Female Sex Workers (FSWs) intervention is one of the most focused programmes in Bangladesh. FSWs are socially very much stigmatised and their rights are seriously violated. Police and other law enforcing agencies often raid their settings and put into goal. But the concerned beneficiaries are reluctant to support them. With supports from HIV activists, some FSWs organised themselves and formed a self help group (SHG). Group members feel more empowered than other general FSWs with increased self esteem. They have started working for protecting their own rights. Being service provider, Save the Children assisted them in installing a tripartite approach through ensuring effective linkage among SHG, lawyers agency and local police which helps FSWs getting access to legal support by their own effort.

**Methods** In this approach, SHG of FSWs, lawyers agency and local police centre are working together when a sex worker is imprisoned. These three parties have a memorandum of understanding for some activities which will ensure mutual benefit. Selected SHG members will contact with local police centre as well as lawyers focal person when a sex worker is captured. The lawyer agency engages lawyers for getting bail of the sex worker with nominal fee. And the motivated local police person avoid in raiding sex workers setting unnecessarily.

**Results** This tripartite approach has started giving excellent result. It started working in favour of sex workers’ community. The self esteem and confidences of sex workers have significantly increased and formed a self help group (SHG). Group members feel more empowered than other general FSWs with increased self esteem.

**Conclusions** This tripartite approach has started giving excellent result. It started working in favour of sex workers’ community. The self esteem and confidences of sex workers have significantly increased and formed a self help group (SHG). Group members feel more empowered than other general FSWs with increased self esteem.

**P4.133** PERCEIVED INFECTION SOURCE AMONG MEN WHO HAVE SEX WITH MEN (MSM) AND TRANSGENDER WOMEN (TW) RECENTLY DIAGNOSED WITH HIV, SYphilis, OR GONORRHOEA/CHLAMYDIA IN LIMA, PERU  
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**Background** Epidemiologic data demonstrates unequal distribution of HIV and STIs among MSM in Peru, with higher risk subpopulations disproportionately affected. Perceptions about partners (source of infection) could contribute to this epidemic by several mechanisms and serve as basis for future interventions.

**Methods** 323 MSM and TW from Lima, Peru diagnosed with HIV (45.5%), Syphilis (53.9%), and/or Gonorrhea/Chlamydia (15.5%) within the last month were surveyed to assess partner sexual identity, and perception of most recent sexual partner as source of infection. Prevalence ratios (PR) were calculated using heterosexually-identified partners as the reference category in bivariate and multivariate analysis using partner perceived source of infection as the main outcome.

**Results** Respondents aged from 18–60 years old (Mean: 30.8, SD: 9.3) and self-identified as Heterosexual (6.6%), Bisexual (17.1%), Homosexual (64.8%), and Transgender (12.1%). Most recent sexual partners identified as Heterosexual (10.3%), Bisexual (41.5%), Homosexual (45.7%), and Transgender (2.5%). Perception of most recent sexual partner as likely/highly likely to be the source of STI transmission was reported by 52.7% (N = 120/323) of respondents. Heterosexually-identified partners were least frequently perceived as the source of STI (24.1% perceived as likely/highly likely source). Transgender partners were most frequently perceived as the source of STI (57.1% likely/highly likely source; PR = 2.4; 95% CI: 1.0–5.9; p = 0.05) followed by Homosexual (45.7% likely/highly likely source; PR = 1.9; 95% CI: 1.0–3.7; p = 0.06) and Bisexual (31.6% likely/highly likely source; PR = 1.3; 95% CI: 0.7–2.6; p = 0.06) partners, demonstrating a borderline statistical significance.

**Conclusions** Partner sexual identity is associated with perception of infection transmission among MSM in Peru. Overall, trends in perception mirror the actual gradient of HIV burden across sexual identities. Future research should focus on the exact potential causes for this at the individual-level (actual knowledge of the epidemic, discrimination, actual past experiences, etc.) and contexts (norms, beliefs, etc.).