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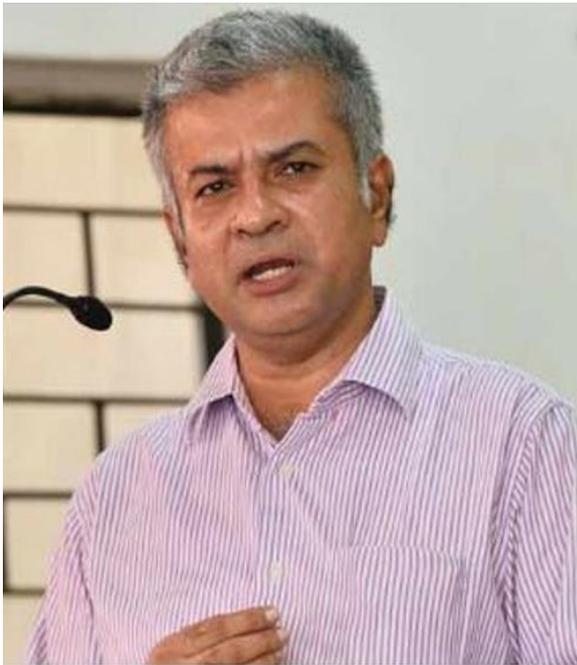
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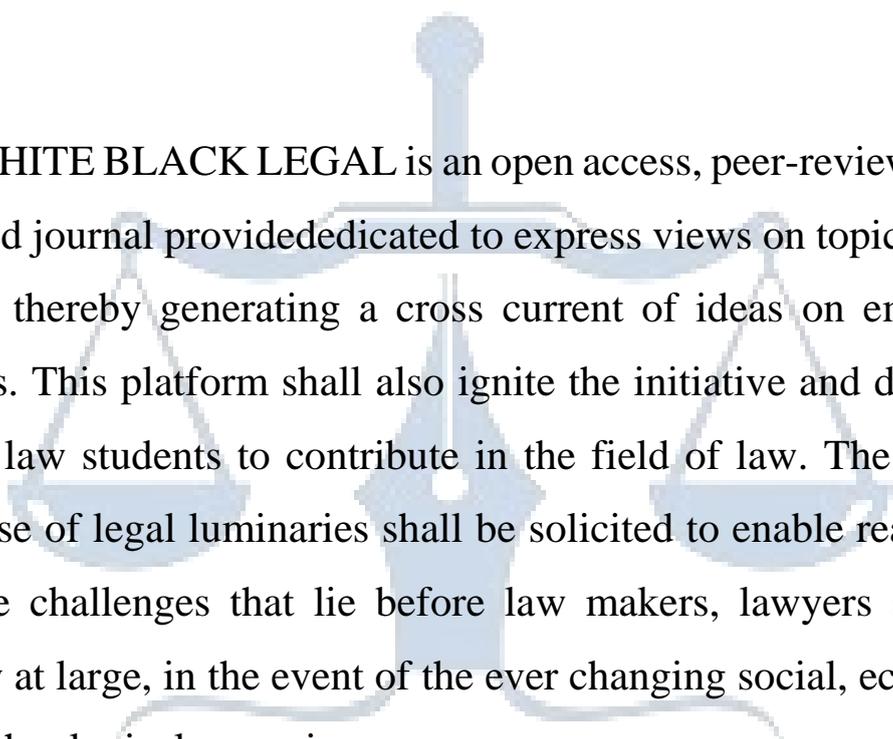


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WHITE BLACK LEGAL is an open access, peer-reviewed and refereed journal provided dedicated to express views on topical legal issues, thereby generating a cross current of ideas on emerging matters. This platform shall also ignite the initiative and desire of young law students to contribute in the field of law. The erudite response of legal luminaries shall be solicited to enable readers to explore challenges that lie before law makers, lawyers and the society at large, in the event of the ever changing social, economic and technological scenario.

With this thought, we hereby present to you

W H I T E B L A C K
L E G A L

A STUDY ON SECURING SEX WORKERS FROM SEXUALLY TRANSMITTED DISEASES WITH SPECIAL REFERENCE TO HIV INFECTION

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Abstract

A "sex worker" is someone who trades sex for money or other perks in order to make a living. The additional advantages could be material, financial, or in any other way. Sex workers are more likely to participate in risky sexual behaviors such as sex without a condom, sex with several people, and substance use, which puts them at an elevated risk of contracting HIV and other sexually transmitted illnesses. Furthermore, accessing medical, legal, and social services may be challenging or impossible for sex workers due to the stigma they endure. The objective of this document is to raise awareness among the general public and those working in the sex industry about the many strategies available for protecting sex workers against sexually transmitted illnesses like HIV. The study examines how prostitution affects the spread of HIV and AIDS, focusing in particular on the typical obstacles to HIV prevention and the availability of PrEP for sex workers. Additionally, it offers hygienic recommendations for both sex workers and companies with the goal of enabling Indian sex workers to lower their risk of contracting HIV and other STDs. This study is based on doctrinal research.

Keywords: Sex worker, HIV, Sexually transmitted diseases, Condoms, PrEP

INTRODUCTION

A sex worker is a person who provides sex work, either on a regular or occasional basis.¹ The phrase is used to describe those who operate across the board in the sex industry. Sex labor, which is viewed as the commercial exchange of sex for money or goods, is said to vary from sexual exploitation, or the forcing of a person to engage in sexual activity, in that it is choice. Sex work includes any exchange of sexual services for money or material gain, including prostitution, lap dancing, pornographic performances, phone or internet sex, and prostitution. Full-service sex workers are those who offer sexual encounters as part of their services.² The multiplicity of duties that make up sex work creates a wide range of dangers that sex workers must deal with on the job, both in terms of their intensity and type. Sexually transmitted diseases are one such important concern. In both concentrated and broad epidemics, the HIV prevalence among sex workers is often higher than that of the overall population. The bulk of these new infections affect those under the age of 25, while only around one-third affect people under the age of 20. Females between the ages of 15 and 19 are almost twice as likely to contract stds as guys their age. The burden of STDs is greatest in the poorest countries, accounting for 86% of the global burden. Whether for good or ill, the idea of HIV is associated with sex workers today. According to the Joint United Nations Programme on HIV/AIDS, the average HIV prevalence among sex workers is 36%. The reported prevalence of active syphilis among sex workers ranges from 5.8% to 30.3% on average, or 10.8%.

SEXUALLY TRANSMITTED DISEASES

Sexual contact is the primary method of transmission for sexually transmitted diseases (STDs) or sexually transmitted infections (STIs). Typically, they are distributed by anal, oral, or vaginal intercourse. However, they can occasionally be transmitted by additional sexual contact with the penis, vagina, mouth, or anus. Several STDs, including herpes and HPV, are transferred through skin-to-skin contact. Bacteria, viruses, and parasites can all cause STDs. It's possible that minor symptoms are all an STD would ever produce. Infections can therefore exist and go undetected. Additionally, STDs can still be dangerous and can spread through intercourse even if they have no symptoms.

¹ 'Understanding Sex Work in an Open Society' (Open Society Foundations, April 2019) <<https://www.opensocietyfoundations.org/explainers/understanding-sex-work-open-society>> accessed 12 September 2023

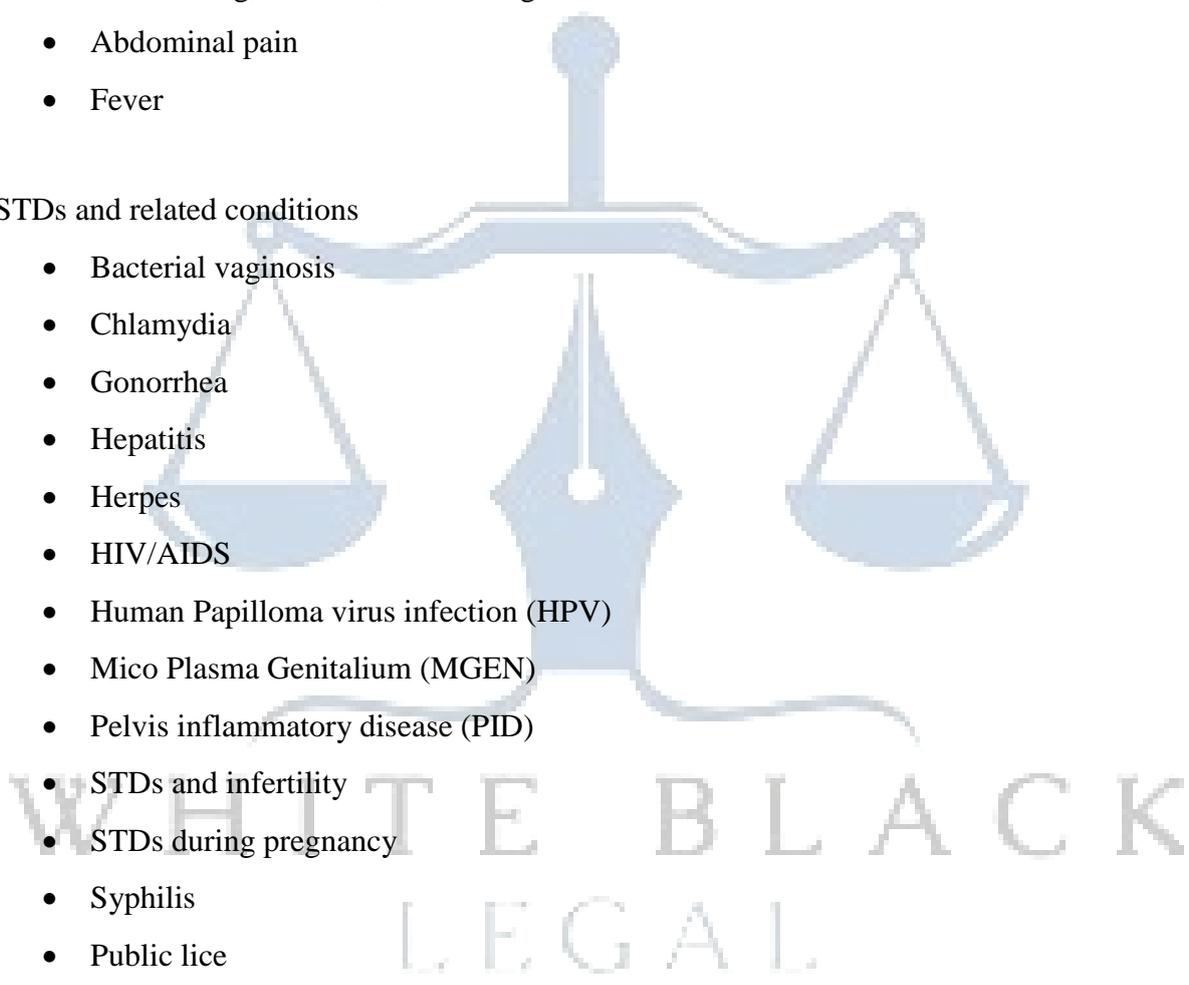
² Danielle A. Sawicki, Brienna N. Meffert, Kate Read & Adrienne J. Heinz 'Culturally competent health care for sex workers: an examination of myths that stigmatize sex work and hinder access to care' <<https://www.tandfonline.com/doi/abs/10.1080/14681994.2019.1574970>> accessed 12 September 2023

If there are symptoms, they could include

- Unusual discharge from the penis or vagina
- Sores or warts on the genital area
- Painful or frequent urination (peeing)
- Itching and redness in the genital area
- Blisters or sores in or around the mouth
- Abnormal vaginal odor
- Anal itching, soreness, or bleeding
- Abdominal pain
- Fever

STDs and related conditions

- Bacterial vaginosis
- Chlamydia
- Gonorrhea
- Hepatitis
- Herpes
- HIV/AIDS
- Human Papilloma virus infection (HPV)
- Mico Plasma Genitalium (MGEN)
- Pelvis inflammatory disease (PID)
- STDs and infertility
- STDs during pregnancy
- Syphilis
- Public lice
- Trichomoniasis
- Chancroid
- Scabies



RISK FACTORS

Sex workers are considered to be a key population for HIV and sexually transmitted infections (STI).³ Clients may be at risk for contracting HIV/STIs because to their frequent dyadic sexual relations with them. Due to their sexual encounters with both frequent and infrequent partners, clients are thought to be a crucial group for STI acquisition and may act as a "bridge" population to spread STIs to the wider population.⁴

Factors that may increase the risk of getting a sexually transmitted infection include:

- Having unprotected sex: The risk of contracting an STD increases significantly while having vaginal or anal intercourse with an infected partner who isn't using a condom (latex or polyurethane). Natural membrane condoms are not advised since some STIs cannot be prevented by using them. Using condoms improperly or seldom can potentially raise risk.
- Oral sex may be less risky: However, if a person does not use a dental dam or a condom (made of latex or polyurethane), sexually transmitted illnesses can still spread. That is a thin, square piece of silicone- or latex-made rubber.
- Having sexual contact with many partners: The more people one has sexual activity with, the greater is the risk.
- Having a history of STIs: Having one sexually transmitted infection makes it much easier for another STI to take hold.
- Being forced to engage in sexual activity: Should consult a health care professional as soon as possible to get screening, treatment and emotional support.
- Misuse of alcohol or use of recreational drugs: Misuse of substances can impair judgment, making a person more likely to engage in harmful behaviors.
- Injecting drugs: When injecting drugs, sharing a needle can lead to the spread of numerous dangerous illnesses. Examples include hepatitis B, hepatitis C, and the human immunodeficiency virus (HIV).

³ World Health Organization. Report on Global Sexually Transmitted Infection Surveillance, 2018
<[https://www.who.int/news-room/fact-sheets/detail/sexually-transmitted-infections-\(stis\)?gclid=CjwKCAjwsKqoBhBPEiwALrrqiNqL67zXRIG8xSBhoCgVp3p5F9Xii0rPdhiPWPPx1lo4FYo_Xg9FRoCDYoQAvD_BwE](https://www.who.int/news-room/fact-sheets/detail/sexually-transmitted-infections-(stis)?gclid=CjwKCAjwsKqoBhBPEiwALrrqiNqL67zXRIG8xSBhoCgVp3p5F9Xii0rPdhiPWPPx1lo4FYo_Xg9FRoCDYoQAvD_BwE)>accessed 13 September 2023

⁴ UNAIDS. On the Fast-Track to End AIDS; 2016-2021 Strategy
<https://www.unaids.org/sites/default/files/media_asset/20151027_UNAIDS_PCB37_15_18_EN_rev1.pdf>
accessed 13 September 2023

- Being young: When compared to individuals who are older, people aged 15 to 24 report having more STIs.
- Spread from mothers to infants: Some sexually transmitted illnesses can be transferred from the mother to the child while she is pregnant or giving birth. Gonorrhea, Chlamydia, HIV, and syphilis are a few examples. Infants with STIs risk major health issues or even death. All expectant women should undergo STI testing and treatment as necessary.⁵

HIV PREVALENCE AND VULNERABILITY

In Maharashtra, "stigma, financial insecurity, and lack of social support" affect almost 82% of female sex workers, compared to 35% in Karnataka, according to a 2018 study. In contrast to estimates of the prevalence of HIV among sex workers, this vulnerability is related to the housing, healthcare, and security of sex workers. Sex workers are more likely to have HIV in Maharashtra, Karnataka, Tamil Nadu, Telangana, and Andhra Pradesh than in other states. Karnataka has a 6% HIV prevalence rate, Tamil Nadu has 1%, and Maharashtra has 7%. In these states, 31% of sex workers still experience financial insecurity, which leaves them susceptible to illness. The majority of sex workers in Maharashtra are uninsured and rely only on sex work for their subsistence. Two-fifths of sex workers in Tamil Nadu and a fifth in Karnataka experience comparable problems. Because of this, sex workers are exposed to customers who demand unprotected intercourse.⁶

Violence And Discrimination Boost Disease

According to a 2016 August IndiaSpend article, sex workers were more likely to get diseases when they were subjected to violence, abuse, and prejudice. There is no program in place by NACO (National AIDS Control Organization) to remove the stigma towards sex workers. The NACO representative previously quoted stated, "The stigma that sex workers face is typically covered under the program for people living with HIV/AIDS." In addition to being more exposed due to their clothing and body language, men who have sex with men and transgender people are important demographics to keep HIV from spreading. Instead of viewing sex workers as self-sufficient people, several state governments have branded them as "oppressed".

⁵ Mayo Clinic Staff ' Sexually transmitted diseases (STDs)' <<https://www.mayoclinic.org/diseases-conditions/sexually-transmitted-diseases-stds/symptoms-causes/syc-20351240>>accessed 13 September 2023

⁶ Bidhubhusan Mahapatra, Ruchira Bhattacharya, Yamini Atmavilas, Niranjana Saggurti 'Measuring vulnerability among female sex workers in India using a multidimensional framework' (September 25, 2018) <<https://doi.org/10.1371/journal.pone.0204055>>accessed 14 September 2023

Rajesh Umadevei, 30, who works for the National Network of Sex Workers, a group that advocates for the rights of sex workers, stated that the government of Karnataka frequently refers to them as dananitha mahila or oppressed women. Social security services are unavailable due to the stigma associated with sex workers. Amit Kumar, a coordinator at the All India Network of Sex Workers, claimed that landlords who fail to provide bills or adequate address verification for obtaining Aadhaar IDs discriminate against sex workers.⁷

PRE-EXPOSURE PROPHYLAXIS (PrEP)

Pre-exposure prophylaxis, sometimes known as PrEP, is a drug used to fend off HIV infection. When used as directed, PrEP is very successful at preventing HIV.

- It reduces the risk of getting HIV from sex by about 99%.
- It reduces the risk of getting HIV from injection drug use by at least 74%.
- It is less effective when not taken as prescribed.

Condom use is still crucial for the prevention of other STDs even though PrEP solely protects against HIV. In the case that PrEP is not taken as directed, condom use is crucial to aid in HIV prevention.

HOW SEX WORKERS CAN GET PREP

PrEP is up to 99% effective at protecting a person from HIV transmission when taken as prescribed. In order for sex workers to obtain PrEP, they must first be tested to ensure they are HIV negative. In most cases, this test is offered in a health clinic or doctor's office, but there are mail-in self-testing kits available from some health providers. There are two types of PrEP medications currently approved by the FDA for HIV prevention: Truvada and Descovy.⁸

Truvada is legal for all sexes and is offered to both adults and teenagers. Descovy has been given the go-ahead for use in both transgender and cisgender people. The danger of HIV transmission through receptive vaginal intercourse is now being tested for. Mild side effects that Truvada or Descovy users may experience include:

⁷ Manisha Chachra, 'HIV Rates Are Down. There's Little Else Going For India's Sex Workers' (8 Aug, 2019) <<https://www.indiaspend.com/hiv-rates-are-down-theres-little-else-going-for-indias-sex-workers/>>accessed 16 September 2022

⁸ PrEP Daily Team, 'HIV Prevention for Sex Workers: What You Need to Know' (November 12, 2020) <<https://prepdaily.org/hiv-prevention-for-sex-workers-what-you-need-to-know/>>accessed 14 September 2023

- Nausea or vomiting
- Headaches
- Loss of appetite or weight changes
- Rashes

Some PrEP users may experience more severe adverse effects, especially if they already have kidney or liver issues. In general, patients who are susceptible to these side effects while using PrEP will need more frequent testing.

Many sex workers and other people are discouraged from using PrEP because of its high cost. Many people worry that the medication will be prohibitively pricey. Many sex workers also believe they would have to pay for PrEP out of pocket because they do not have health insurance. When purchased in the US without insurance or alternative payment plans, a thirty-day supply of PrEP can cost more than \$1,750. However, there are several methods for patients to get financial support to offset the expense of PrEP. The typical co-pay for HIV treatment and PrEP is between \$13 to \$68 for some Medicaid and Medicare programs. Various PrEP Assistance Programs are accessible in different states. For patients who meet the requirements based on income ceilings, these often cover a portion of prescription assistance and clinical lab costs. For PrEP consumers without insurance, there are two main payment assistance schemes accessible. The first is the up to \$7,200 yearly coverage Gilead Advancing Access co-pay program. Additionally, the Patient Advocate Foundation will pay up to \$7,500 in co-pays for PrEP each year. The price of clinical appointments and lab tests is not covered by either payment plan. Through the Ready, Set, PrEP foundation, the US Department of Health and Human Services also offers free PrEP medication to people who qualify.⁹

India is committed to the goal of “End AIDS as a public health threat by 2030” and has included PrEP as part of the National Strategic Plan for HIV/AIDS and STI 2017 – 2024 to pave the way for a “AIDS Free India”.¹⁰ Additionally, the Drug Controller of India approved the co-formulated medication for marketing in May 2016. Although rules are being developed, PrEP

⁹ PrEP Daily Team, ‘HIV Prevention for Sex Workers: What You Need to Know’ (November 12, 2020) <<https://prepdaily.org/hiv-prevention-for-sex-workers-what-you-need-to-know/>>accessed 14 September 2023

¹⁰ National AIDS Control Organization (NACO) MoHaFW, Government of India. National Strategic Plan for HIV/AIDS and STI 2017 – 2024: “Paving Way for an AIDS Free India”. 2017 <<https://naco.gov.in/sites/default/files/Paving%20the%20Way%20for%20an%20AIDS%2015122017.pdf>>accessed 16 September 2023

is not yet offered for free as part of the national program. Studies conducted in a small number of Indian regions show that the country has a low awareness level and a high readiness to use PrEP, but these studies focused on MSM and TG, and their sample sizes were insufficient. Information on PrEP awareness and readiness to use from other regions of India is currently scant.¹¹

Opinions of various experts

- An LGBTQIA+ activist named Dicky Baruah stated, "There are no government laws regarding PrEP and it is primarily offered by private physicians. One month's worth of prescriptions can cost anywhere from Rs. 3000 and Rs. 4000, which is pricey, especially for the low-income, high-risk groups. According to the International AIDS Society (IAS), PrEP can reduce the risk of infection by 90% when used as directed. Additionally, the National AIDS Research Institute is doing a program with sex workers; if it is successful, PrEP might be made inexpensively available to them, Dicky continued. According to Dicky, the solution is found in the social mindset. People would not have been afraid to come forward, be tested, and receive treatment, he claimed, if HIV was not taboo and did not carry a stigma.¹²
- PrEP is not used in India for sex workers or other high-risk groups, according to Dr. Jayraju D, Deputy Director (Sexually Transmitted Infections) at the Karnataka State AIDS Prevention Society (KSAPS). According to him, if someone in India is suspected of having HIV or is anticipated to do so, they can go to an ART center where they would receive post-exposure prophylaxis (PEP) and ART therapy.
- If someone needs PrEP, we refer them to another location, according to Dr. Uma Devi G.S., Medical Officer of the ART clinic at St. John's Medical College Hospital. She claimed that the usage of this substance was not widespread throughout the nation. According to Uma, administering PrEP comes with a number of challenges because it necessitates the patient's mental evaluation and therapy. Without knowing the negative effects, people may obtain a prescription and continue taking it for the rest of their lives. The Centers for Disease Control and Prevention (CDC) claim that PrEP is safe, however

¹¹ Uthappa CK, Allam RR, Pant R, Pal S, Dinaker M, Oruganti G, et al. Pre-exposure prophylaxis: awareness, acceptability and risk compensation behaviour among men who have sex with men and the transgender population. *HIV Med.* 2018;19(4):243–51. 10.1111/hiv.12572

¹² Vaibhav Sadhamta 'No PrEP for HIV susceptible people in India' (October 7, 2021) <

some patients do experience stomach pain, nausea, diarrhea, and other side effects. Over time, these adverse effects typically disappear.

- According to Dr. Ashoojit Kaur of Patient Centered Medical Home (PCMH), Restore Health, "Sex is not promoted in Indian society; rather, it is stigmatized. However, sex is a necessary because it is a physiological need. There shouldn't be any judgments made about the various types of sexual activity that people engage in today. We support creating a welcoming environment free from bias for all communities. Although PrEP is not offered in government facilities, we do administer PrEP and PEP and provide safe sex advice.
- PrEP is an antiviral medicine that we give in the event that a person is vulnerable to HIV exposure, according to Dr. Vinayak Prakash. It is safe to take, but you should definitely see a doctor and have them monitor you because it also has some adverse effects. He continued, "Most of the high-risk groups are obviously far from its availability, and they are also unaware of it. Tenofovir and emtricitabine are two medications found in a pill known as PrEP. Any physician, according to him, who has a letterpad and registration can write a prescription for the drug. Taking PrEP before being exposed to HIV ensures that a person has enough of the medication in their system to stop HIV if it ever enters their body.
- PrEP is a drug given before sexual exposure or when a person is preparing to have sex but is unsure if their partner is positive, Dr. Asoojit Kaur stated. It is appropriate for people who engage in several partners. Couples in discord who have one partner who is positive while the other is negative can also use PrEP. This medication is typically used by couples trying to conceive if the wife is HIV negative. If an HIV positive person is U=U (Undetectable=Untransmittable), PrEP is not required. It implies that HIV-positive individuals who manage to keep their viral load undetectable are unable to sexually transfer the infection to others.
- According to data from the United Nations Programme on HIV and AIDS (UNAIDS), 69,000 persons in India passed away from AIDS in 2017, and there are 21 lakh people living with the disease. "If a drug like this is available, the government must be asked why it is not being used in India at a wider scale, like the COVID vaccine," said Raju Mathew of Accept, an NGO that works with AIDS/HIV patients.¹³

¹³ Vaibhav Sadhamta 'No PrEP for HIV susceptible people in India' (October 7, 2021) <
<http://thesoftcopy.in/2021/10/07/no-prep-for-aids-patients-in->

HYGIENE GUIDELINES

Safe sex and personal hygiene help to reduce the risk of sexually transmitted infections (STIs) and reduce contact with other pathogens.¹⁴

- **Hand hygiene:** The hands are one of the most typical ways that diseases are transmitted. By properly and timely washing hands, the risk of infection is decreased. Hands should be washed with soap and water.
- **A clean body:** Pathogens found in semen, pre-ejaculatory fluid, vaginal fluid, blood, and mucosal membranes can cause STIs. In addition, pathogens can endure for a while outside the body. This indicates that bodily fluids present on hands or skin can cause STIs to develop. Additionally, bodily fluids on other surfaces, such as a mattress or towel, might cause infection. After vaginal or anal sex, it is advisable to take a daily shower and cleanse your lower body with water. Do not rinse your vagina with soap or any other products. Sperm will be in the vagina or anus if the condom tears or comes off during sex or when having unsafe sex. Rinsing can actually help the sperm travel further into the body. Pregnancy or STI risk is raised by this.
- **Condoms and lubricants:** Polyurethane or condoms made of latex are recommended. Condoms made of latex or polyurethane can be used for oral, anal, or vaginal intercourse. After gender realignment surgery, the skin of a neovagina may become uncomfortable or inflamed. Use polyurethane condoms with an oil- or grease-based lubricant if you have a neovagina. Rinse the neovagina after intercourse if you still like to use a water- or silicone-based lubricant. Condoms should be kept at room temperature, in their original packaging, in a dry, dark location. Never put them on a windowsill or in the refrigerator. Avoid keeping condoms close to sharp things.
- **STI research:** Regular STI testing is advocated for anyone in the sexual industry. receive four annual tests. If STIs are not treated, they may cause health issues. Another possibility is that a STI symptoms may not manifest right away but rather develop over time. Most STIs are curable. Some STIs, however, take two to three weeks to manifest. Therefore, it is probable that one will need to undergo tests for hepatitis B, syphilis, HIV, and, if they operate in the MSM sex industry, hepatitis C as well. When

india/#:~:text=Pre%2Dexposure%20prophylaxis%20(PrEP),more%20vulnerable%20to%20the%20disease.>accessed 15 September 2013

¹⁴ National Institute for Public Health and the Environment

Ministry of Health, Welfare and Sport 'Hygiene guidelines for sex businesses and sex workers' <

<https://www.rivm.nl/en/hygiene-guidelines-sex-businesses-sex-workers>>accessed 18 September 2023

experiencing any symptoms (such as itchiness, soreness, an odd discharge, or skin lesions), or if the condom tore or came off during sex, one should get tested. The sex worker is recommended to cease working and get checked for STIs if they are concerned that the client may have an infection. An STI may be indicated by lesions, blisters, or warts on the client's genitalia. It is suggested against having sex with a sex worker or customer who has a mouth or genital piercing that has not fully healed. The likelihood that a sex worker or client will contract or spread an infection is increased. Pus, blood, or scabs around the piercing can all be signs of new piercings, as can red or puffy skin around the piercing.

- Vaccination against STIs: Both hepatitis A and hepatitis B are preventable by vaccination. These shots won't shield you against other STIs like chlamydia or HIV. Therefore, using a condom is still crucial.
- Working when sex worker is menstruating: During a sex worker's monthly period, menstrual blood might spread STIs. Therefore, it is best to avoid working when having your period. Use a sponge designed exclusively for use during menstruation if you must work nonetheless. The use of a condom is still necessary because these sponges cannot shield the user against STIs.
- Shaving clients: Some customers request to be shaved. Small skin abrasions may result from this. Any bleeding from these abrasions can spread STIs. These abrasions might occasionally be so minute that they are invisible. Even yet, bleeding is still a possibility. It is advisable to request that customers who need a shave bring their own razor or utilize a disposable razor, using a fresh blade for each customer. One is more likely to contract a STI if they have a wound or abrasion and other people's bodily fluids come into touch with the wound. However, if the other person has a wound or abrasion, there is also a chance that one could become infected if blood from the other person gets into the mouth, vagina, or anus. As a result, it is essential to intervene right once if a sex worker or client sustains a wound or abrasion.
- Fisting: The anus or vagina could tear during fist fighting and start to bleed. The possibility of contracting a STI exists.
- Golden shower and scat: Urine may occasionally be ingested, like with a golden shower, for instance. Typically, urine is sterile. This indicates that there are no infections present. However, when a person has a STI, blood can leak out with the pee, and anyone who drinks the urine can contract the STI. It is unsafe to consume excrement

during scat sex since it contains several bacteria and viruses. Additionally, bacteria can spread via (minor) wounds or abrasions.

- Activities that can damage or pierce the skin: Some sexual acts entail puncturing or harming the skin, placing a catheter, or administering a fluid. The safety concerns or laws that might apply during such activities are unrelated to these hygiene recommendations. It is recommended to make sure that the materials used are sterile and that the procedure utilized is hygienic if the sex worker and/or the client engage in activities that include piercing or injuring the skin.
- Using microfiber cloths: Microfiber cloths absorb dirt and microorganisms more effectively than ordinary cloths when used properly. Microfiber cloths can be used both dry and wet. It works a little better to use moist microfiber cloths.
- Rules of conduct: STI risk is decreased by using safe sexual practices. The first step toward safe sex practices is sex education. However, knowledge on its own is insufficient. Sex workers need to feel empowered to perform their jobs securely and uninhibited in their demand for safe sex. They ought to have no qualms about turning down clients, declining to partake in particular activities, or requesting a STI test.¹⁵

Free Condoms Are Not the Solution

Condoms are given away without charge to organizations that work with high-risk communities as part of a NACO program. According to Rao of the India-HIV Alliance, "peer to peer sex-education and awareness about sexual health has increased among sex workers." According to the NACO spokesperson, many sex workers are now aware of safe sex and are getting tested every six months. The transgender sex worker Ramkali, however, claimed that the hazards still exist since customers are still willing to pay more for unprotected sex. The data only reveal one perspective, thus there is an urgent need for focused interventions that concentrate on new hotspots and identify the root causes of new HIV infections, according to Rao. Because they have fewer clients, older sex workers do not demand condoms as much as their younger counterparts, according to her. In 15 states, NACO launched its condom promotion program in 2008. According to experts, such programs emphasize condom marketing more so than safe sex education. A researcher from Mumbai who requested anonymity due to the sensitive nature of the topic said, "During my research, I observed that

¹⁵ National Institute for Public Health and the Environment
Ministry of Health, Welfare and Sport 'Hygiene guidelines for sex businesses and sex workers' <
<https://www.rivm.nl/en/hygiene-guidelines-sex-businesses-sex-workers>>accessed 18 September 2023

NGOs and community-based organizations had targets to meet." "The emphasis was on selling and corporate marketing, rather than making them aware of their sexual health, in an effort to encourage condom use among sex workers." Meena Seshu, the founder of the advocacy group Sangram, asserted that educating sex workers about sexual health is more crucial than selling condoms. Condoms were deemed "life-saving equipment for sex workers" by the speaker.¹⁶

COMMUNITY ACTION

NACO has delegated control over addressing discrimination and violence against sex workers to their communities, which have already begun educating medical professionals and launching programs for sexual and reproductive health. Community workers have connected sex workers to police and government resources and assisted them in talking about their issues. For instance, the National Legal Services Authority offers chosen sex workers paralegal training. Sex workers are assisted in setting up social-security service camps by legal trainers, according to Kumar of the All India Network of Sex Workers. These include workshops to educate healthcare professionals on STDs and give access to ration cards, transit passes, Aadhaar cards, and routine STD testing. Sex workers are currently attempting to sensitize medical professionals, but they are having trouble moving the needle. "Doctors frequently ask us how many clients we take," said Kusum, the president of the collective All India Network of Sex Workers, who only goes by her first name. "They don't show us any sensitivity," Kusum explained that there has been some progress in the sexual and reproductive health strategy by citing the fact that many female sex workers carry a condom and pregnancy test kit. Her coworkers provide advice to employees regarding safe abortion times, reproductive health, and sexually transmitted illnesses.¹⁷

CONCLUSION

By learning about preventative methods and using PrEP, sex workers can significantly reduce their risk of HIV transmission. The greatest method to aid sex workers and others at a high risk of HIV transmission to remain safe and healthy is to create a network of support. It is crucial for sex workers to establish connections with programs that give them access to HIV prevention

¹⁶ Manisha Chachra, 'HIV Rates Are Down. There's Little Else Going For India's Sex Workers' (8 Aug, 2019) < <https://www.indiaspend.com/hiv-rates-are-down-theres-little-else-going-for-indias-sex-workers/>>accessed 16 September 2022

¹⁷ Manisha Chachra, 'HIV Rates Are Down. There's Little Else Going For India's Sex Workers' (8 Aug, 2019) < <https://www.indiaspend.com/hiv-rates-are-down-theres-little-else-going-for-indias-sex-workers/>>accessed 16 September 2022

tools like condoms, free testing, and financial aid for PrEP. An environment where the sex workers will have the confidence to refuse clients who insist for unprotected sex, has to be created. The common public must be collectively responsible about having protected and non risky sexual behaviours and follow the hygiene guidelines in order to create HIV/AIDS free society.

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