

# Asian female sex worker demographics, migration and sexual health in Sydney



Health  
South Eastern Sydney  
Local Health District



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## Background

- Migrant sex workers previously had higher STI rates and lower rates of condom use in comparison to their Anglo counterparts<sup>1</sup>
- Previous studies from SSHC in 1993<sup>1</sup> and 2003<sup>2</sup> found changes in condom use, higher educational and English proficiency levels, and decreased contract work over time

## Aim

- To describe the demographics and safe sexual practices in the Chinese- and Thai-speaking sex workers attending SSHC in 2014-2015
- To compare condom use for vaginal sex between language groups, and between clinic and community settings

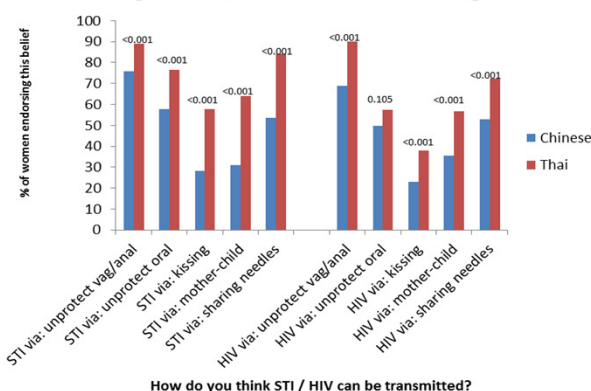
## Methodology

- Cross-sectional survey, conducted between June 2014 - July 2015
- 4-section, 60-item, self-completed, anonymous questionnaire
- Translated into Chinese and Thai, and offered to female Thai and Chinese sex workers attending SSHC and within parlours on outreach

Table 1: Factors associated with reported 100% condom use among Asian female sex workers in Sydney

|  | Univariate        |        | Multivariate     |        |
|--|-------------------|--------|------------------|--------|
|  | OR (95% CI)       | p      | OR (95% CI)      | p      |
| Chinese                                  | 1                 |        |                  |        |
| Thai                                     | 2.42 (1.57-3.70)  | <0.001 | 2.48 (1.33-4.62) | 0.004  |
| Married/partner                          | 1.40 (0.87-2.23)  | 0.156  |                  |        |
| Has children                             | 1.22 (0.80-1.84)  | 0.356  |                  |        |
| ≥12 years education                      | 1.10 (0.72-1.67)  | 0.651  |                  |        |
| Previous sex work                        | 1.17 (0.69-1.97)  | 0.551  |                  |        |
| Written English poor                     | 0.76 (0.50-1.16)  | 0.210  |                  |        |
| Previous sexual check up                 | 1.29 (0.85-1.97)  | 0.233  |                  |        |
| Pre-planned sex work                     | 2.40 (1.27-4.53)  | 0.007  |                  |        |
| Keeps own passport                       | 3.56 (2.02-6.27)  | <0.001 |                  |        |
| Current place of work - parlour          | 2.16 (1.21-3.85)  | 0.009  | 1.89 (0.96-3.74) | 0.067  |
| Avg >10 hours/week work                  | 0.57 (0.35-0.93)  | 0.024  | 0.57 (0.32-1.04) | 0.065  |
| >10 clients/week average                 | 0.68 (0.44-1.06)  | 0.086  |                  |        |
| Sex work contract ever                   | 0.39 (0.02-6.32)  | 0.509  |                  |        |
| Parlour condoms - free                   | 2.14 (1.32-3.45)  | 0.002  |                  |        |
| Parlour condoms - pay                    | 2.51 (1.37-4.58)  | 0.003  |                  |        |
| Talked with outreach worker              | 1.35 (0.89-2.06)  | 0.162  |                  |        |
| STI: unprotected vag/anal                | 8.32 (4.76-14.53) | <0.001 | 2.1 (0.97-4.52)  | 0.058  |
| STI: unprotected oral sex                | 3.38 (2.17-5.24)  | <0.001 |                  |        |
| STI: kissing                             | 2.98 (1.89-4.71)  | <0.001 | 1.26 (0.66-2.38) | 0.485  |
| STI: mother-to-child                     | 3.52 (2.24-5.53)  | <0.001 | 1.47 (0.78-2.77) | 0.237  |
| STI: toilet                              | 2.15 (1.20-3.87)  | 0.010  |                  |        |
| STI: share accommodation                 | 1.58 (0.79-3.19)  | 0.198  |                  |        |
| STI: sharing needles                     | 4.86 (3.09-7.65)  | <0.001 | 1.61 (0.74-3.42) | 0.225  |
| HIV: unprotected vag/anal                | 8.51 (5.14-14.09) | <0.001 |                  |        |
| HIV: unprotected oral sex                | 3.1 (2.04-4.70)   | <0.001 |                  |        |
| HIV: kissing                             | 1.78 (1.12-2.82)  | 0.014  |                  |        |
| HIV: mother-to-child                     | 3.67 (2.36-5.71)  | <0.001 |                  |        |
| HIV: toilet                              | 1.62 (0.85-3.10)  | 0.143  |                  |        |
| HIV: share accommodation                 | 2.1 (0.85-5.19)   | 0.106  |                  |        |
| HIV: sharing needles                     | 5.01 (3.27-7.68)  | <0.001 |                  |        |
| Condoms as contraception                 | 4.06 (2.61-6.32)  | <0.001 | 3.19 (1.83-5.57) | <0.001 |
| Check clients for signs of STI           | 5.02 (3.17-7.94)  | <0.001 | 4.25 (2.40-7.51) | <0.001 |
| Refuse sex if thought client had STI/HIV | 5.91 (3.74-9.34)  | <0.001 |                  |        |
| Douching                                 | 2.20 (1.39-3.48)  | <0.001 |                  |        |
| Unprotected sex for more money           | 0.95 (0.47-1.92)  | 0.882  | 0.77 (0.33-1.76) | 0.536  |
| Partner Australian                       | 0.46 (0.22-0.99)  | 0.047  | 0.45 (0.19-1.07) | 0.072  |
| Partner Asian                            | 0.26 (0.13-0.50)  | <0.001 | 0.40 (0.18-0.86) | 0.019  |
| Alcohol last 3 months                    | 3.12 (1.94-5.00)  | <0.001 |                  |        |
| Party drugs/sleeping pills last 3 months | 1.42 (0.63-3.20)  | 0.402  |                  |        |
| Injected drugs last 3 months             | 1 (1.98-3.02)     | <0.001 |                  |        |

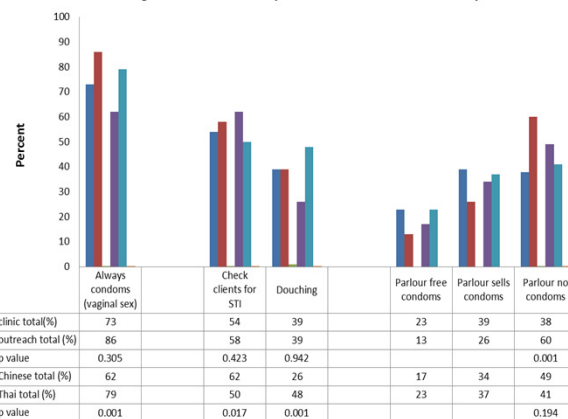
Figure 1: STI and HIV transmission knowledge



## Results

- 469 participants were recruited: 220 (47%) Chinese and 249 (53%) Thai
- Overall median age was 31 years
- Many participants did not attend high school. Compared to Thai, Chinese participants were more likely to report poor skills in speaking, reading and writing English (p<0.001) and were less likely to have engaged in previous sex work (p<0.001).
- 86% of Chinese and 88% of Thai participants reported keeping their own passport
- Misconceptions remain around some STI and HIV transmission routes (Figure 1)
- There were differences in sexual health practices and condom availability for clinic compared with outreach participants, and for Chinese compared with Thai participants (Figure 2)

Figure 2: Sexual health practices and condom availability



## Discussion

There were significant differences in the characteristics and behaviours of Thai and Chinese sex workers surveyed.

Culturally appropriate health promotion programs should include education on douching, STI and HIV transmission routes, checking clients for STIs and the importance of always using condoms.

Advocacy via peer groups and local councils should be attempted to increase parlour provision of condoms.

References: 1. O'Connor C, Berry G, Rohrsheim R, Donovan B. Sexual health and use of condoms among local and international sex workers in Sydney. *Genitourinary Medicine*. 1996; 72(1): 47-51; 2. Pell C, Dabhadatta J, Harcourt C, Tribe K and O'Connor C. Demographic, migration status, and work-related changes in Asian female sex workers surveyed in Sydney, 1993 and 2003. *ANZJPH*. 2006; 30(2): 157-162