

Exploring Factors Associated with Vaginal Douching Practices among Female Sex Workers (FSW): Implications for HIV Prevention

Apoorva Sista, MPH ©, Department of Global Health

Advisor: Dr. Deanna Kerrigan M.P.H. Ph.D., Department of Prevention and Community Health

BACKGROUND & SIGNIFICANCE

- FSWs globally have a high HIV prevalence (**10.4%**) compared to the general female population.²⁸
- Despite high-risk behavior, PrEP use is low among FSWs. Current PrEP face limitations (accessibility, cost, adherence, cooperation).²⁵
- While discouraged, vaginal douching is common among FSWs (**29-92% globally**).²⁵
- Douching is the practice of intravaginal cleansing with liquids.¹⁸
- Douching disrupts the natural balance of bacteria in the vagina, potentially increasing susceptibility to infections including HIV.⁶
- DREAM Project: Modifying the existing hypo-osmolar tenofovir (TFV) rectal douche for vaginal and rectal use in FSWs. Convert potentially harmful washing practices into preventative PrEP wash.
 - Product preferences and current douching practices
 - Factors and context associated with current practices
- Analysis of factors influencing douching practices, its implications for HIV, and translation into microbicide development

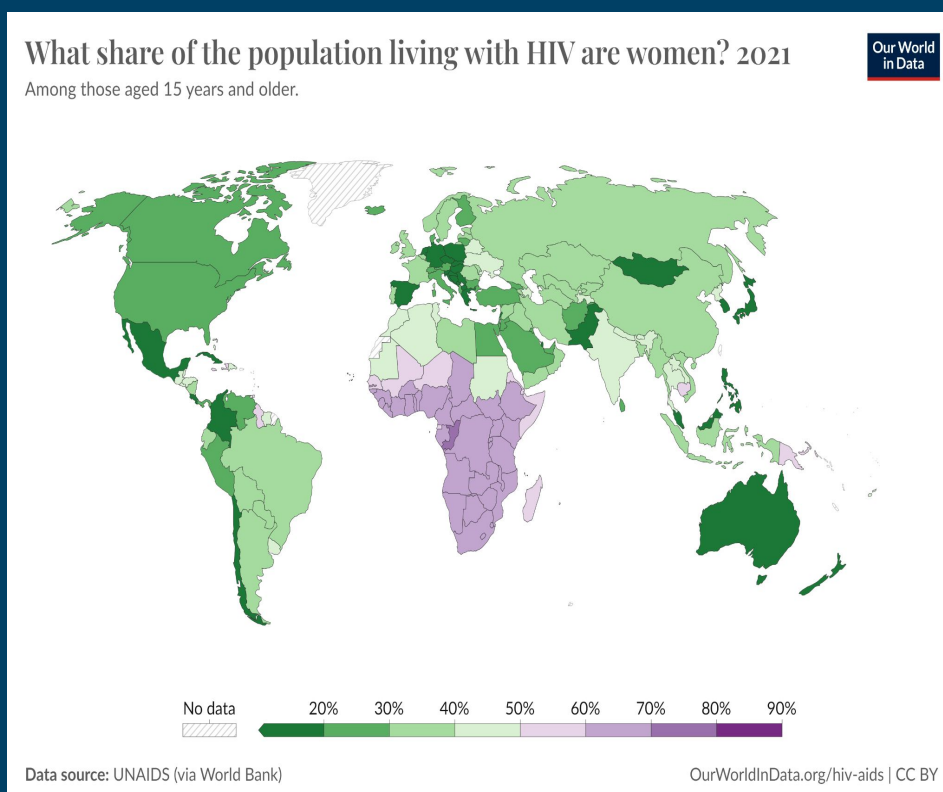


Fig 1. Documentation of women living with HIV globally as of 2021.



Fig 2. Estimates of FSWs, MSM, inject drug users, trans women in LMICs 2010–2014.

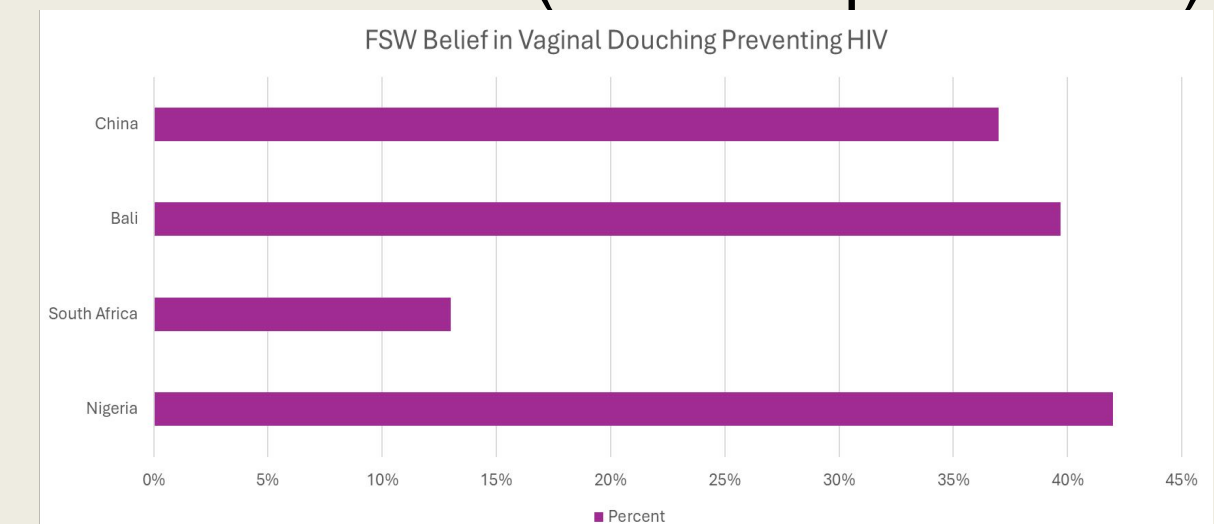
METHODS

- Scoping review conducted of 3 databases (Scopus, PubMed, Web of Science) to map existing literature and identify gaps
- 925 identified, 25 reviewed, 11 extracted (limited information)
- Study characteristic chart documented type of analysis, location, population demographics, and year of publication
- Study summary chart documented (Appendix)
- Findings were thematically categorized into social, cultural, and behavioral factors, additional contextual factors were also noted

RESULTS

- Social factors
 - Client expectations (preference, pressure)
 - Peer influence (shared experiences)
 - Stigma (discrimination, judgement)
- Cultural Factors
 - Traditional Beliefs (hygiene, femininity, health)
 - Influenced healthcare providers (norms, bias)
- Behavioral Factors
 - Douching practices (washing, wiping, insertion)
 - Douching frequency (before/after sex, daily, etc.)
 - Douching products (water, antiseptics, etc.)
 - Douching motivations (control, benefits)
 - Limited awareness of risks (infection prevention)

Table 1. FSW perceptions that douching prevents HIV (4, 5, 7, 12)



DISCUSSION

- No causation of douching and HIV but strong evidence of increasing susceptibility to HIV
- High belief rates that douching prevents HIV
- FSWs are influenced strongly by environments
- More research needed for stronger associations
- Douching is a continuous practice - microbicide development with tailored SDOH interventions
- More understanding, acknowledgment, and awareness is needed overall
 - Research and education
 - Cultural competency training
 - Acknowledge the challenges
 - Center the voices of FSWs
 - Recognize limitations of systems
 - Community outreach campaigns
 - Sustainable solutions

REFERENCES

