Author's response to reviews

Title: The Intersection between Sex and Drugs: A Cross-Sectional Study among the Spouses of Injection Drug Users in Chennai, India

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Author's response to reviews: see over
Dear Dr. Heimer,

Thank you for your continued consideration of our manuscript. We have responded to the additional comments of both reviewers and have made the corresponding changes in a revised manuscript (changes indicated by yellow highlighting).

**Reviewer #1**

1. The titles of Figure 1 and Figure 2 are missing.

   The figure legends are in the body of the manuscript right after the references.

**Reviewer #2**

2. I do think there is room for additional improvement related to addressing the issue of HIV testing and condom use among women who know their husband’s are HIV+. The authors addressed this previous comment by adding one sentence to the discussion stating this finding, but with no elaboration about explanations or, more importantly, implications. In the Conclusion, the authors mention providing economic opportunities for these women and consideration of PrEP of microbicide trials for this population. While these may both be important laudable goals, they are somewhat distal to the issues at hand. Improving motivation and/or access to HIV testing and consideration of couple condom interventions may be more proximate and equally necessary efforts.

We have revised the manuscript in several sections to address this concern.

First, in the RESULTS section, we have included some data from our questionnaire that was not previously included in the manuscript. Our questionnaire included a series of true/false knowledge questions, of which two in particular related to the issue of low condom use and HIV testing. Specifically, the two questions of interest were: 1) Using a condom can lower a person’s chance of getting HIV; and 2) A spouse/sexual partner of an IDU can get HIV from their husband/sexual partner who is an IDU even if the spouse/sexual partner is not injecting. We characterized the overall responses to these questions and the difference by whether or not a woman thought her husband was HIV positive. Though higher levels of knowledge were exhibited by women who believed their husbands to be HIV positive, a large proportion of women did not know that HIV could be prevented by condom use and that women were at risk for acquiring HIV from their husbands even if their husbands were not injecting.

In the DISCUSSION, we have now included an additional paragraph to further speculate on the reasons for these findings and the implications. We discuss as potential explanations incomplete knowledge, fear, the idea that using condoms is perceived to threaten the intimacy of primary sexual relationships and the general
power imbalance in sexual relationships in this region with respect to gender. We cite previous literature to support this conjecture. Finally, we discuss potential ways to address this finding. We suggest that interventions targeted at IDUs should focus beyond injection-related risk. While this has been the case in other countries, in India, most of the interventions targeted towards IDUS focus on drug-related risk. We also discuss the need to include sexual partners in interventions targeted at IDUs. The WHO, UNODC and UNAIDS offer a comprehensive package for the prevention, treatment and care of HIV among IDUs. This includes 9 key services for both IDUS and their sexual partners. We cite this document and suggest that our data lend further support to these types of programs.

Finally, we have altered the conclusion statement which discussed novel female-controlled prevention strategies to include a statement about what can be done in the immediate future including promoting VCT, couples counseling and education.

We hope that we have adequately addressed these further concerns. Thank you once again for your consideration. We look forward to hearing from you.

Sincerely,

Shruti H. Mehta, PhD MPH