Reviewer's report

Title: Risks, benefits and survival strategies-views from female sex workers in Savannakhet, Laos

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Reviewer: Tooru Nemoto

Reviewer's report:

Overall, the manuscript needs editing and clarifying the specific aims. The authors could reorganize the manuscript by focusing on the major findings and specific implications for future studies and HIV prevention efforts. Due to a lack of research findings in HIV issues among FSWs in Laos, the manuscript has a potential for helping future intervention studies targeting high risk groups of FSWs in Laos and other Asian countries.

Abstract

Study results seem to be too general. The theoretical background of the study is based on the Health Belief Model, but the authors just listed items of risks and benefits, did not describe how FSWs perceived or calculated benefits minus cost/barriers. Also, perceived susceptibility and severity of HIV/STIS were not well discussed based on the model. The conclusions do not seem to be strong; providing mixed messages. These conclusions are not specific to FSWs in Laos; applicable to almost all FSWs. It needs to present some unique cultural and social contexts of FSWs in Laos in relation to HIV/STIs.

p. 6 1st paragraph: “Information about the number and type of entertainment places was obtained from the drop-in center.” Did not the research team conduct mapping for sex work venues?

p. 7, 1st para. “The participants talked freely and seemed to accept a male interviewer/moderator.” Later in the manuscript, the authors discussed some potential biases due to a male interviewer. It is much easier to compare the transcripts from those run by a male staff versus those from a female staff in terms of participants’ openness. If there is no difference observed, there is no need to discuss this issue in detail.

p. 7, 2nd para: “The women were purposively selected in order to achieve a sample with maximum variation regarding age, marital status, …. What does it mean? For example, did the study include the youngest and oldest FSWs from a certain venue?

“The data collection was stopped when information from FGDs and KIs became repetitive “ Do you mean the qualitative information get saturation?

p. 8, 1st line: “validate the analysis” Is it “validate translation”?

line 4: Please clarify “obtain a general impression of the data”

line 10: Did the author calculate inter-rater reliability?
p. 8. The authors may not need to describe the informed consent process; just state the approval from IRB.

p.9, 3rd para. “Many perceived that oral sex was dirty “ It is new to this reviewer. Many FSWs do not perform oral sex because urine comes from penis and try to keep their mouth clean. They may engage in oral sex with boyfriends or partners, but not with customers.

p. 13, 1st para. It needs clarification; “doing what clients asked for but in a mechanical manner.” What is the mechanical manner?

3rd para: “to visit convenient place where a security guard …..” What is the convenient place”?

p.15 3rd para. “Sex workers also did not visit their families when sick in order to avoid stigma.” This is an important finding the same as others in relation to stigma. The authors may need to further look at the data in terms of sigma; how to avoid or deal with stigma in relation to self-assertion or positive thinking in engaging in sex work (e.g., sacrificing to family, providing financial support to family etc). There is no discussion about stigma and sacrifice in relation to religion or religious belief. Buddhist Thai FSWs tend to have fatalistic idea that their current sufferings as FSWs were from their past lives or a consequence of a past bad deed and that their merit increase such as sending money to family or give money to temples or monks would help them to have better lives in the future, not current lives.

The authors may need to think about stigma and other cultural issues which may not fit in the Health Belief Model.

p.16 1st para. “Participation in village activities when …” The participation in social activities may reduce negative perceptions, but also increase rumors and “bad” reputation if social network members perceive sex work negatively.

p. 17, 3rd para. “Women frequently reported not sharing information and ideas “ What is about HIV testing or AIDS?

p. 18, 1st para: “I wait and quietly visit a health clinic alone.” This has an implication for future HIV prevention efforts for FSWs. The intervention programs must target work environment and sex workers and managers to increase knowledge and awareness of HIV/STI testing and treatment.

p. 18. 4th para. Perceived benefits and strategies to increase benefits

This is the most important part of the manuscript and findings could be reorganized based on a clear theoretical background and future implications. For example, not every FSW engages in riskier sex when they are offered extra money or negotiate higher payment for engaging in riskier sex. So, researcher needs to find out protective behaviors and their rationales in addition to risk behaviors.

p.19 2nd para. Sending money to family is very common among FSWs in Asian countries. The authors may need to further analyze the data in relation to the background theories.
Few studies described sexual pleasure among FSWs and male and transgender sex workers. The findings are mixed and not clearly providing information for future HIV prevention.

Discussion needs to be restructured; first present major findings and discuss results in relation to previous findings. It is not clear how tables and figures help in discussion.

**Level of interest:** An article of limited interest

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.