

**Integrated Biological and  
Behavioral Surveillance (IBBS)  
Survey among Female Sex  
Workers in 22 Terai Highway  
Districts of Nepal  
Round V - 2012**



**Ministry of Health and Population  
National Centre for AIDS and STD Control (NCASC)  
Teku, Kathmandu**

# Integrated Biological and Behavioral Surveillance (IBBS) Survey among Female Sex Workers in 22 Terai Highway Districts of Nepal

Round V - 2012

Field work conducted by:



Success Search Option (P) Ltd. Kathmandu, Nepal

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I firmly believe that the trends identified by these surveys will be internalized and utilized by all policy makers, programme planners and implementers alike to plan the national HIV response and tailor the response to the HIV epidemic being faced by the country.

  
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## LIST OF ABBREVIATIONS

AIDS	Acquired Immuno-Deficiency Syndrome
AMDA	Association of Medical Doctors of Asia, Nepal
CAC	Comprehensive Abortion Care
CBO	Community Based Organization
CDO	Chief District Officer
CT	Chlamydia trachomatis
DACC	District AIDS Coordination Committee
DFID	Department for International Development
DIC	Drop-in-Centre
EQA	External Quality Assurance
FSW	Female Sex Worker
GC	Neisseria Gonorrhoeae
GWP	General Welfare Pratisthan
HIV	Human Immuno-Deficiency Virus
IBBS	Integrated Biological and Behaviour Surveillance
ICH	Institute of Community Health
ID	Identification Number
IDU	Injecting Drug User
IEC	Information, Education and Communication
INF	International Nepal Fellowship
IUD	Intra Uterine Device
MARPs	Most At Risk Populations
MoHP	Ministry of Health and Population
NAPN	National Association of People Living with HIV/AIDS in Nepal
NCASC	National Centre for AIDS and STD Control
NFCC	National Fertility Care Center
NGO	Non – Governmental Organization
NHRC	Nepal Health Research Council
NPHL	National Public Health Laboratory

NRCS	Nepal Red Cross Society
NRL	National Reference Laboratory
NSARC	Nepal STD and AIDS Research Center
OE	Outreach Educator
PE	Peer Educators
RPR	Rapid Plasma Regain
SACTS	STD/AIDS Counseling and Training Services
SD	Standard Diagnostic
SGS	Second Generation Surveillance
SI	Strategic Information
SLC	School Leaving Certificate
PSI	Population Service International
SPSS	Statistical Package for the Social Sciences
SSO	Success Search Option
SSP	Saath-Saath Project
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infections
TPPA	Treponema palladium particle agglutination assay
UNAIDS	United Nations Joint Programme on HIV/AIDS
VCT	Voluntary Counseling and Testing of HIV
WATCH	Women Acting Together for Change
WHO	World Health Organization

## EXECUTIVE SUMMARY

This is the fifth round of Integrated Biological and Behavioral Surveillance Survey (IBBS) conducted among Female Sex Workers (FSWs) of 22 Terai Highway Districts. This was a cross-sectional survey in which a total of 610 Female Sex Workers (FSWs) were recruited ; out of the total respondents, 400 were recruited from 16 districts domain and remaining 210 were recruited from 6 districts domain.

The fieldwork for the survey was carried out from September 2012 to November 2012. The survey was undertaken primarily to track the trends of HIV infection and syphilis in FSWs and to assess the sexual behavior among FSWs in 22 Terai Highway Districts.

Information on the demographic characteristics, condom use, sexual behavior, knowledge of HIV and AIDS, reported cases of Sexually Transmitted Infections (STI), STI treatment behaviors and exposure to STI and HIV awareness programs, exposure to HIV and AIDS messages, alcohol and drug habits, family planning, stigma and discrimination, perception on risk of HIV among FSWs and social support and level of depression were collected through a structured questionnaire while the prevalence of HIV and syphilis were tested via blood samples.

Syphilis was tested using the Rapid Plasma Regain (RPR) test card. HIV was detected by using Determine HIV 1/2 test as a first test to detect antibodies against HIV, Uni-Gold test as a second test, and SD Bioline HIV 1/2 test as a tie breaker test as per the VCT guideline of National Centre for AIDS and STD Control (NCASC).

### Key Findings

In this round of survey, the prevalence of HIV among 1 FSWs is 1%. Similarly, 0.7% FSWs had laboratory test suggestive of syphilis history and 0.3% FSWs had active syphilis. The median age of the respondents was 27 years within a range from 16 to 57 years while 26.4% of respondents were from the age of 35 and above.

About 38% of FSW from 6 districts had no formal education while 29% of FSW from 16 districts had no formal education. More than half (59%) of the FSWs were married, 19.8% were divorced or separated with median age during the time of divorce or separation being 25 while 16.7% were never married. FSWs from Chettri/Thakuri community and Terai community had highest representation in the survey i.e. 17.5% participation from each of the community. Second highest proportion of respondent was from Chaudhary and Tharu community (13.6%).

The median age of first marriage of respondents was 16 years. Two third (65.6%) of married respondents were currently living with their husbands or male friends whereas 34.4% were living alone. About 56% of respondents had dependents. Around 54% had two to three dependents. About 71% of FSWs in 6 districts and 62.5% in 16 districts had ever given birth. The mean number of live birth was 2.5. Nearly one third respondents (30.5%) in 6 districts had four and more live births while only 31% had one or two live births in 16 districts

Nearly one third (29%) of survey respondents in 16 districts and one fifth (20%) in 6 districts had miscarriage About 84% of FSWs in 6 districts had terminated pregnancies at least once while 62.3% in 16 districts underwent termination. Nearly two-third of FSWs (61.9% from 6 districts and 58.3% from 16 districts) had never heard of female condoms.

All the respondents had heard about condom in both survey regions. Only 50% of FSWs from 6 districts had known about sterilization. Whereas pills is more popular in 16 districts as majority

(88.9%) of FSWs knew about pills in 16 districts. Similarly, 31% respondent from 6 districts and 32.4% from 16 districts were currently using injectable contraceptive during the time of the survey.

The median age at first sexual intercourse was 16 years. More than two-third (i.e. 68%) of the respondents in 6 districts and above half (i.e. 55.2%) in 16 districts were found to have their first sexual intercourse at age of 15-19 years. The mean number of months for which the FSWs were involved in sex trade was 36.8 months. It was reported that around 54% of FSWs performed sex trade from hotels and lodges while only 23.3% took place at home setting. The number of clients served by FSWs ranged from one to eleven clients per day with an average of 1.6 clients. Two third of the FSWs (65.2%) served one client per day. The proportion of FSWs who entertained one client was 85.2% in 6 districts while it was only 54.5% in 16 districts. The average number of working days of FSWs per week was four. The clients of FSWs belonged to different professions mainly transport workers, businessman, service holders and laborers. The respondents had an average of 4.3 paying sex partners.

It was found that 28.8% FSWs in 16 districts were forced to have sex while only 4.8% FSWs in 6 districts were forced to have sex. It was noted that oral sex was widely practiced (64.4%) in 16 districts while masturbation was common (88.4%) in 6 districts. The average monthly income of FSWs was found to be NRs 4500 ranging from NRs 100-35000. About 38.5% of FSWs in 6 districts and 37.5% in 16 districts had other jobs and were working as wage labor. The average weekly income of sex workers from other jobs was NRs 1917 ranging from NRs 100-40,000.

Overall, 59% of respondents had consistently used condoms with their clients in the preceding year with 63.3% in 16 districts and 51% in 6 districts. More than half (55.2%) FSWs in 6 districts and (61.8%) in 16 districts had clients visiting them regularly and among them more than half (55.2% of FSWs in 6 district and 55.5% in 16 districts) reported to have used condom consistently with the regular client in the year prior to the survey.

About 25% of FSWs in 6 districts and 36.8% in 16 districts were engaged in sexual act with partners (husbands and male friends) other than client in the year prior to the survey while more than 70% (75% in 6 districts and 72.1% in 16 districts) of FSWs had used condoms during their last sexual contact with their partners.

It was found that 67.1% of FSWs in 6 districts and 65.5% FSWs in 16 districts had not carrying condoms with them. Among those who carried condoms, 60.9% of FSWs in 6 districts and 54.4% in 16 districts carried one condom. Pharmacy was the popular place to get the condoms followed by health post while one third mentioned of getting the condoms from NGOs and health volunteers.

More than half (56.2% of FSWs in 6 district and 59% in 16 districts) revealed that they received condoms free of cost while 31.4% in 6 districts and 23.5% in 16 districts purchased the condoms. Almost half of FSWs (55.2% in 6 districts and 47.8% in 16 districts) reported that they had never consumed alcohol. Similarly, 3.2% of total FSWs were found to have tried any kind of illicit drugs. The survey reports revealed that 40 respondents (6.6%)-6.2% in 6 districts and 6.8% in 16 districts- were found to have ever injected drugs.

All the respondents in 6 districts had heard about HIV and AIDS while 11% of FSWs in 16 districts had not heard about HIV and AIDS. The most common source of information on HIV and AIDS was from the relatives (80.5% in 6 districts and 78.9% in 16 districts) followed by radio, television, health worker, NGO staff and pamphlets. Overall, more than one third (33.9%) of the respondents could identify all three A, B and C (HIV prevention knowledge) as HIV preventive measure. Likewise, 44.5% of FSWs in 16 districts knew all three preventive measures while only 16.71% knew it in 6 districts.

Meanwhile, comprehensive knowledge of HIV was 20%. More than 90% of the respondents (91% in 6 district and 97.2% in 16 districts) knew that HIV could be transmitted through blood transfusion, use of needle/syringe, HIV positive mother to her unborn child.

Around three quarter of FSWs (74.3%) in 6 district and 60.3% in 16 district knew about HIV testing and counseling (HTC) whereas 64.8% in 6 districts and 54% in 16 districts had ever tested for HIV. Most of them had taken their HIV test voluntarily. Of those who did not received their HIV result, the important reasons was fear while 57.1% did not consider it necessary.

More than two third (70%) of the respondents concluded that popular HIV and AIDS message had made them understand about condom and its usefulness in preventing HIV and AIDS while 30% stated that such message made them aware about condom for family planning while 7% mentioned that condom helped prevent STI transmission. More than 60% of respondents mentioned that STI meant white discharge or “dhatu” flow (white type of body fluid discharge). Furthermore, 72.8% in 6 districts and 58.3% in 16 districts had experienced vaginal discharge. The common place to seek STI treatment was private clinic.

Some common STIs symptoms experienced by FSWs at the time of survey were lower abdominal pain (27.2%), painful sex (24.9%), vaginal discharge (21%), vaginal itching (17.9%) and dysuria (15.2%). Less than half (47%) of respondents had interacted with peer educators in the preceding year. About 54% of respondent in 6 districts and 43.8% in 16 districts had discussed with peer educators. More than half of respondents (53.3%) in 6 district and less than half (43.8%) in 16 district had visited Drop In Centers (DIC) in 12 months prior to the survey with majority visiting for 2-3 times. During the last 12 months 51% of respondent in 6 district and 41.8% in 16 districts had visited STI clinic. It was found 52.9% of respondents from 6 districts and 42.3% in 16 districts visited the HTC center in last 12 months where majority mentioned taking out of blood sample at the HTC. Similarly, more than three quarters received pre-test counseling. While only 0.9% in 6 districts and 4.1% in 16 districts had received post-test counseling. The survey showed that above one quarter (27.7%) had participated in HIV awareness raising program in last 12 months prior to survey in all 22 districts. Meanwhile, 39% of respondent from 6 districts were likely to participate in awareness program compared to 21.8% of 16 districts.

FSWs in 6 districts were found positive towards taking care of HIV positive relatives about 71% for male relatives and 72% for female relatives than those in 16 districts (male relatives 55.3% and female relatives 58% respectively).

Around 67% of the respondents were living in their own house in 6 districts while 43.5% stayed in their own house in 16 districts whereas 27% in 6 districts and 40% in 16 districts lived in rented house. Regarding suicidal tendency, 73.6% of respondents in 6 districts and 54.7% in 16 districts reported that they had some suicidal ideation. However, 74% in 6 district and 62.6% in 16 districts denied about suicidal plan. Meanwhile, 25% of respondents in 6 district and 30.2% in 16 districts had attempted suicide in life time.

On average, social support satisfaction level was found to be 4.7 in 6 districts and 4.9 in 16 districts respectively while the mean number of the people supporting during critical situation was 1.3 for both 6 and 16 district region. More than a quarter of FSW reported having attempted suicide. Similarly around 7 out of every 10 FSWs were distressed/depressed.



# CHAPTER 1

## INTRODUCTION

### 1.1 Background

HIV in Nepal is characterized as concentrated epidemic. More than 80% HIV infections in Nepal are transmitted through heterosexual transmission (NCASC, 2011). People who inject drugs, men having sex with other men/transgender people and female sex workers (FSWs) are the key high risk population groups spreading the epidemic. Male labor migrants (particularly India, where labor migrants often visit female sex workers) and clients of female sex workers in Nepal are acting as bridging population groups that transfer infections from high risk groups to low risk general population. As the epidemic is maturing (about 23 years after the first HIV case reported in 1988), more and more infections are being recorded among the low risk general population. However, the epidemic has never maintained through heterosexual transmission in the general population in Nepal, rather than driven by the infections among high risk populations and their sexual partners.

Nepal's new National HIV AND AIDS strategy 2011-2016 has adopted strengthening of the Second Generation Surveillance (SGS) system as one of key principle of strengthening surveillance of HIV and STI in Nepal. One of the major components of SGS, and also strategic directions of the national strategy, is to conduct Integrated Biological and Behavioral Surveillance (IBBS) among key populations at higher risk to HIV in selected high risk areas in regular interval based on the national plan on HIV and STI surveillance. IBBS surveys have been successfully conducted in various rounds in Nepal for the last about a decade among key populations at higher risk of HIV including Female Sex Workers (FSWs).

**Table 1.1: IBBS Surveys Conducted among FSWs in Nepal, 1999-2011**

Survey Areas	Rounds	Survey Years
Kathmandu Valley	4	2004, 2006, 2008, 2011
Pokhara Valley	4	2004, 2006, 2008, 2011
16 Terai Highway districts	4	1999, 2003, 2006, 2009
6 Terai Highway Districts	3	2004, 2006, 2009

In the year 2012, based on the national plan on HIV and STI surveillance and financial support available from the pool fund partners ( the Government, the World Bank, DFID, AusAID and KfW), IBBS surveys among the Female Sex Workers (FSWs) in 22 (16+6) Terai Highway Districts was planned and conducted.

Effective prevention and intervention need to be scaled up among the key population and their direct sexual partner. In Nepal poverty, political instability and gender inequality combined with low level of education make the task challenging along with stigma and discrimination that surround HIV and AIDS. The county's epidemic continue to grow if immediate and effective action is not taken. Some of the major risk factors include:

- People who inject drug
- Trafficking of Female sex worker
- Changing values among young people
- High rate of migration and mobility to India

As of July 2012 National Center for AIDS and STD control (NCASC) had estimated about 50,288 people living with HIV in Nepal of whom 3,804 were children (NCASC 2012). The HIV epidemic in Nepal is largely driven by sex work. The number of FSWs in Nepal is estimated at 32,137 (NCASC 2010). Sex workers are considered one of the major groups that work as source of STIs and HIV infection to the general population mainly as a result of unprotected sex with their clients and other sex partners who work as a "bridge population group".

A major challenge to HIV control is the trafficking of Nepalese girls and women into commercial sex work to India. There are between 25,000-34,000 FSWs in Nepal with an estimated HIV prevalence of 13-1.6%. (NCASC) HIV infection rate among street based sex worker in the Kathmandu valley are between 15-17%. Cultural, social and economic constraints bar them from negotiating condom use with their clients or obtaining legal protection and medical service. Almost 60% of their clients mainly transport workers, member of police or military and migrant workers do not use condom. Nationally, client of FSW have an estimated prevalence of 2% (NCASC). By mid-2012, 20583 case of HIV infection were officially reported, however given the limitation of Nepal Public health surveillance system the actual number of infection is thought to be higher.

Under the national plan on HIV and STI surveillance, NCASC has been conducting IBBS on a regular basis since 2002 among key population at higher risk of HIV in selected geographic areas of Nepal. The result of IBBS conducted so far clearly indicate that HIV in Nepal is in concentrated stage and is driven by People Who Inject Drugs (PWIDs), commercial sex and migration. The first round of FSWs in Terai highway was conducted in 1999 followed by consecutive rounds in 2003, 2006 and 2008. The results from the previous rounds have shown significant but stable changes in HIV prevalence among FSWs in Terai Highway Districts (1.5% in 2006, and 2.3% in 2009). However, syphilis infection among FSWs has decreased significantly over the years from 4.7% in 2006 to 3.5% in 2009 in 22 Terai Highway Districts (IBBS FSW 22 Highway Dist. 2006 and 2009)

### **Integrated Biological and Behavioral Surveillance (IBBS) Survey**

Behavioral surveillance is the systematic and ongoing collection of data about diseases or risk behaviors related to health conditions, with the purpose of correlating trends in behavior with changes in disease over time. In biological surveillance, biological samples are collected and tested for HIV and other related illnesses (S Navadeh). IBBS survey is a repeated cross-sectional surveys conducted to monitor the trend in HIV and STI prevalence and to assess behavioral information from the target groups. In Nepal, the NCASC has aimed to track trends

in HIV prevalence and STI-related awareness, and risk behaviors among key population at higher risk of HIV including injecting drug users, migrant workers, female sex workers, men who have sex with men, and wives of migrant laborers. A standardized format of the questionnaire is used for each group which is repeated with relevant modification in the following rounds of survey to explore behavioral changes over time.

## **1.2 Objectives of the Survey**

### **1.2.1 Objectives**

1. To track the trends in the prevalence of syphilis and HIV infection among FSWs in the 22 Terai Highway Districts (namely Jhapa, Morang, Sunsari, Saptari, Siraha, Dhanusha, Mahottari, Sarlahi, Dhading, Makwanpur, Rautahat, Bara, Parsa, Chitwan, Nawalparasi, Rupandehi, Kapilvastu, Dang, Banke, Bardiya, Kailali and Kanchanpur)
2. To assess the sexual behaviors and other related factors to HIV among FSWs in the 22 Terai Highway Districts.
3. To estimate the knowledge of HIV/STIs, psychosocial factors, access, to prevention programs as well as assess the sexual and injecting behaviors among FSWs in the 22 Terai Highway Districts.

# CHAPTER 2

## SURVEY METHODOLOGY

### 2.1 Survey Population

The survey was descriptive cross-sectional in design. This cross-sectional survey was conducted among FSWs in (16+6) Terai Highway Districts, who are considered to be hotspots for high-risk sub-populations. The eligibility criterion for inclusion in the survey for the FSWs was: "Women aged 16 years and above reporting having been paid in cash or kind for sex with a male within the last 6 months."

### 2.2 Survey Sites (Clusters)

All together 70 clusters were selected from 22 highway districts, 30 clusters were selected from the "6-district domain" and 40 clusters from the "16-district domain" to ensure proper representation of the survey population. A cluster is a site where FSWs solicit or practice sex. For this survey the clusters were defined as the locations with at least 30 female sex workers and the locations with less than 30 FSWs were merged with the neighboring locations to form a cluster.

### 2.3 Sampling

#### 2.3.1 Sample Design

A two stage cluster sampling (stage 1: selection of clusters based on probability proportionate to size; and stage 2: random selection of survey participants) technique was adopted to recruit the survey participants in the survey planned. The sampling technique planned above among the key population groups at higher risk was to ensure the comparison of the methods and so the results of the IBBS surveys among the various rounds of IBBS Surveys.

Two set of data was collected: (1) Laboratory information regarding the sero-status of HIV and selected STIs, and (2) Behavior information. A mapping of the survey area was done prior to the survey by a team of qualified and trained research staff by visiting the survey sites, and in consultation with local key informants - NGOs running HIV programs targeting FSWs and their clients, local authorities directly or indirectly involved with HIV programs and the local police - developed a list of locations where sex workers gather and solicit clients. Moreover, estimate of the tentative size of the FSWs in those locations was made. Later, this information was used for defining the clusters and drawing a two-stage cluster sampling.

The number of clusters (sites where FSWs solicit or practice sex) was included in the sampling frame along with the measure of size for each of the clusters. For the 16-district domain" and "6-district domain" two separate sampling frames were prepared. A two-stage cluster sampling was followed in the sampling design, i.e., Stage 1 - Selection of clusters and Stage 2 - Selection of respondents.

All together 30 clusters were selected from the „6-district domain" and 40 clusters from the "16-district domain to ensure proper representation of the survey population".

For the selection of the clusters, Primary Sampling Units (PSUs) were arranged in geographical order with the corresponding measure of size of Survey Population (MoS). Starting at the top of the list, the cumulative measure of size was calculated, and these figures were entered in a column next to the measure of size for each unit.

Sampling interval (SI) was calculated by dividing the total cumulative measure of size further domain (M) by the number of units to be selected (a), that is,  $SI=M/a$ . Random start number (RS) was selected between 1 and sampling interval (SI). The required number of clusters in the first stage of the sampling was selected using the probability proportional to size (PPS) method.

A systematic random sampling technique was applied to select the required number of respondents in the clusters. A list of respondents prepared using their personal characteristic codes as their ID (for example, FSW in this location place/shop and with such and such a physical look, etc.). All the eligible respondents selected randomly were approached for consent and were recruited.

### **2.3.2 Sample Size**

The sample size of the IBBS Survey are planned to detect the changes (5-15%) in prevalence of HIV and key risk behaviors among the survey population. The total sample size for Terai Highway Districts (16+6) was 610 (i.e. 400 in 16-district domain + 210 in 6-district domain). An equal number (i.e. 7 from 6 - district domain and 10 from 16 – district domain) of FSWs from each selected first stage cluster of both 16-district domain and 6-district domain were interviewed for the strategy of self-weighted design. In a case of minimum of 610 FSWs (estimated samples size) when successfully interviewed no replacements was made for the refused cases.

### **2.4 Identification and Recruitment of FSWs in the Survey**

Coordination with the organizations working with the survey population and other key stakeholders was done. Coordination meeting were organized with the organizations working with the survey population. Participants were requested to provide inputs on the completeness of the locations identified by that visit. The meeting was attended by representatives from various organizations working with the survey population, District (Public) Health Office District AIDS Coordination Committee, Peer Educators (PEs) and Outreach Educators (OEs), Drop in Centers (DIC) operators, and HIV Testing and Counseling (HTC) center operators affiliated with different organizations to focus on getting acquainted with different organizations' working areas and with the names of staff members who interacted with the target groups.

The survey team also established an interview site with a mobile clinic and laboratory facilities in a strategic location in the vicinity of selected clusters. The mobile clinic and the interview site were operated at the same spot throughout the survey period allowing FSWs to be recruited for participation. After the identification of the clusters, the researchers approached the survey population using various techniques like,

- building good rapport with their employers,
- visiting the sites, obtaining the help of brokers and key informants,
- observing the activities of women in major gathering areas for FSWs, posing as clients, chatting with other staff of the establishments,
- approaching known sex workers.

The identity of the survey participants was confirmed through screening questions. If the interviewers found their answers convincing enough to establish their identity as sex workers then only they were listed as prospective respondents. The final selection of the respondents was made randomly, and the respondents were requested to take part the survey and briefing of the survey was made. Once the selected sex worker agreed to participate in the survey, the field staffs took them to the clinic and interview site for an interview and collection of a blood sample. An

oral informed consent form was taken in a private setting and witnessed by another staff member to ensure that the survey participants understood the information in the consent form and provided verbal consent.

They were also informed about the services that would be provided to them and was provided:

- An ID card with a unique ID number was issued to each respondent to ensure anonymity the number of which was used in the questionnaire, on medical records, and on the blood specimens of the particular respondent.
- Pre-test counseling on HIV and STIs
- Physical examination for any evidence of STI symptoms
- Treatment and counseled accordingly and free medicine for symptomatic treatment in accordance with the National STI Case Management Guidelines 2009.
- HIV and syphilis testing.
- Vaginal Swab sample collection for Gonorrhoea and Chlamydia testing.
- Additionally, medicines like vitamins, and iron, IEC materials, condoms, and transportation cost were also provided.

## **2.5 Control of Duplication**

Principally, there was little chance of duplication in the sample since the respondents were selected randomly from the clusters selected in the first stage. However, to avoid repeated interviews, if any, with the same respondent, several questions like queries relating to her experience of undergoing any blood test, part of the body from where the blood was taken, her experience of undergoing the HIV test or test for other diseases, meeting with the peer educators for the blood test, and possession of an ID card with a survey number was asked to the participant to see if it is the first time she is participating in the survey.

## **2.6 Survey Instruments and Administration of Tools**

A quantitative research with structured questionnaire was adopted for this survey that includes questions basically on:

- socio-demographic characteristics and sexual behaviors - sexual history,
- use of condoms, risk perception, awareness of HIV and AIDS/STIs,
- prevalence of STI symptoms, participation in HIV awareness programs, and
- Alcohol/drug using habits and psychosocial factors.

Apart from the structured questionnaire, questions relating to STI symptoms and a blood samples collection for HIV and syphilis testing were done.

## **2.7 Data Collection Period**

The data collection was held from September 14 till November 19, 2012.

## **2.8 Survey Team Composition**

The survey team was comprised of a team leader/technical expert, project coordinator, research officers, Data analyst, Survey field Coordinator, counselor, clinician Lab technician, Admin/Finance Staff other staffs. The field team was consisted of a field supervisor, female interviewers, a staff nurse, a lab technician, a counselor, a runner and community mobilizers.

## **2.9 Recruitment and Training of Research Team**

SSO research professionals, in association with the executives were responsible for the recruitment of supervisors and interviewers. Candidates having prior experience in the similar work were given preference. A total of three supervisors, 15 interviewers, three staff nurses, three lab technicians and three runners were hired for the survey. And finally altogether three field teams was formed, each comprised of one supervisor, five interviewers, one staff nurse/STI technician, one lab technician and one runner.

Training was organized for the entire field researchers/staffs that focused on introduction to the survey, administration of the questionnaire including characteristics of the target groups, methods of approaching the survey population, rapport-building techniques and sharing of previous experiences (problems and solutions).

Field teams were briefed on the sampling design used in the survey and was trained in randomly selecting the FSWs from the selected first stage clusters and ways to replace them should they refuse to participate in the survey. The training was focused on providing the research team a clear concept about informed consent, how and whose consent to take, what is a witness and her / his role in the consent-taking process, pre-test counseling and basic knowledge of HIV AND AIDS and STIs.

## **2.10 Survey Field Procedures**

The survey centers were established in areas chosen for their convenience in recruiting the survey population and bringing them to the clinic. The clinics were established in the 18 different locations primarily following the previous trend and adding new clinics in geographically scattered areas. After completing the interviews in one place same set was moved to another place close to remaining respondents from the selected cluster. At each established site there were at least five rooms, allowing for a separate room for each activity; office, questionnaire administration, STI examination and vaginal swab collection, Counseling, etc.). Each clinic was also outfitted with a lab facility for HIV and Syphilis blood test.

## **2.11 Ethical Issues**

Ethical approval was obtained from the Nepal Health Research Council (NHRC), the government's ethical clearance body for health research, which reviewed and approved the protocol, consent forms and questionnaires.

All the participants involved in the surveys were fully informed about the nature of the survey. They were made aware that their participation was voluntary and that they are free to refuse to answer any question or withdraw from the interview at any time. Furthermore, they were briefed that such withdrawal or refusal will not affect the services they will normally receive from the survey. A consent form describing the objectives of the survey, the nature of the participants' involvement, and the benefits and confidentiality issues was clearly read out to them. This survey had maintained all the applicable protocols of ethical issues.

## **2.12 Clinical and Laboratory Procedure**

### **2.12.1 Clinic Set-up**

Clinics was set up at different locations at major towns (namely, Birgunj, Birtamod, Butwal, Dhangadhi, Itahari, Lahan, Mahendranagar, Narayanghat, Nepalgunj Janakpur, Bardibas, Lalbandi, Hetauda, pathalैया,, chandranighapur, Bardaghat, Gourusinghe and Gajuri while Janakpur,

Bardibas, Lalbandi, Hetauda, Pathalaiya, Chandranighapur, Bardaghat, Gourusinghe and Gajuri sites were added in this round so that the selected survey participants do not face problem of transportation and could manage time to come to the clinic site for survey. This has greatly helped in proper enrollment of the survey participants. Each clinic had a lab facility for drawing blood and centrifuging it for separating the serum. There was a separate room for each activity, including administration of the questionnaire.

The survey population selected randomly in the sample and in bringing them to the survey clinic. Additional set up was done after preliminary field survey. Each clinic had a lab facility for drawing blood and centrifuging it for separating the serum. There was a separate room for each activity, including administration of the questionnaire.

There were five to six rooms in each clinic (at least four) and refrigerators at all the sites to maintain the cold chain. All the sites also had power backup facility. However, in case of still power problems, the samples were transported to the local HTC for storage.

### **2.12.2 Clinical Procedures**

The clinical examination included a simple health check-up such as measurement of the blood pressure, body temperature, weight, pulse, and symptomatic examination for STI with syndromic treatment. The participants were asked whether they had STI symptoms such as genital discharge, ulcers or lower abdominal pain, and those who had STI syndromes were given syndromic treatment according to the national guidelines. Vaginal Swab specimens were collected to test for *Chlamydia trachomatis* and *Neisseria gonorrhoea* in symptom positive cases. Furthermore, external genital examination was complemented with a speculum examination.

### **2.12.3 Laboratory Methods**

#### ***Screening for HIV Antibodies:***

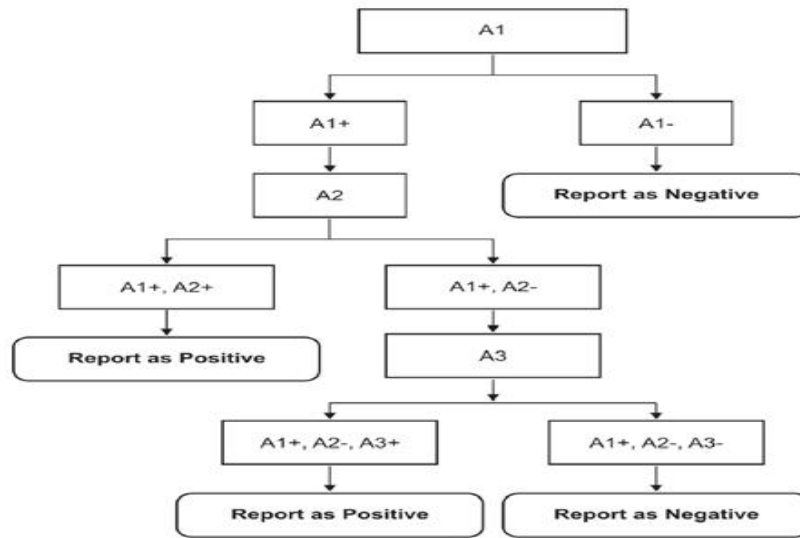
HIV antibody screening was performed using the serial testing approach. All the serum samples were tested using Determine HIV-1/2 as the first test.

All the negative samples by the first test were recorded as negative. All serum samples that tested positive in the first test were retested using Uni-Gold as a second test.

If the second test shows also positive, the test was recorded as positive. If the test result was positive by the first test and negative by the second test, the sample was retested by a third tie-breaker test SD-Bioline.

If the third test shows positive, the test result was recorded as positive, and if negative, it was recorded as negative. The testing protocol was based on VCT Guidelines of National Center of AIDS and STD Control (NCASC).





NOTE:	
<b>A1 (First test) :</b>	Determine HIV 1/2
<b>A2 (Second test) :</b>	Uni-Gold HIV
<b>A3 (Third test) :</b>	SD Bioline HIV 1/2
<b>"+" :</b>	Reactive
<b>"-" :</b>	Non-reactive

<sup>1</sup> Assay A1, A2, A3 represent 3 different assays.

<sup>2</sup> Such a result is not adequate for diagnostic purposes; use strategies II or III. Whatever the final diagnosis, donations which were initially reactive should not be used for transfusions or transplants.

<sup>3</sup> Report: result may be reported.

<sup>4</sup> For newly diagnosed individuals, a positive result should be confirmed on a second sample.

<sup>5</sup> Testing should be repeated on a second sample taken after 14 days.

<sup>6</sup> Result is considered negative in the absence of any risk of HIV infection.

**Figure 2.1: HIV Testing Algorithm**

**Table 2.1: Sensitivity and Specificity of HIV 1/2 Kits**

Test Kits	Company	Initial	Confirmatory	Tie Breaker	Antigen Type	Specificity	Sensitivity
<i>Determine HIV 1-2</i>	Abbott, Japan Co. Ltd	X			Recom HIV-1 and HIV-2	99.40%	100%
<i>Uni-Gold HIV 1-2</i>	Trinity Biotech,		X		HIV-1 and HIV-2	100%	100%
<i>SD Bioline HIV 1-2</i>	Standard Diagnostics, Inc, Kyonggi-do South Korea			X	HIV-1 (gp41;p24)-2 (gp36)	99.30%	100%

### Screening for Syphilis:

All the serum samples were tested for syphilis infection using the BD. Micro-Vue RPR card test. All the samples that tested negative for RPR was recorded as negative.

All the positive samples for RPR were retested with serial serum dilution up to 64 times, and the test result was recorded with the dilution factor. All the RPR positive serums were also tested by the Treponema Pallidum Particle Agglutination (TPPA) test using Serodia TPPA as a confirmatory test. On the basis of the titre of RPR, all the specimens with RPR/TPHA positive results were divided into two categories.

TPPA positive with RPR-ve or RPR +ve with titre < 1:8 were categorized as “history of syphilis or past syphilis”. TPPA positive with RPR+ve with titre 1:8 or greater was categorized as “current syphilis” requiring immediate treatment.

PCR was performed for the detection of Neisseria gonorrhoea and Chlamydia trachomatis among the survey population. The vaginal swab was tested for detection of these infections

#### 2.12.4 Storage and Transportation of Samples

Blood samples for the HIV/syphilis test was collected from each of the survey participants using disposable syringe. Serum samples was separated from the collected blood samples and stored in a fridge in the field.

The serum samples were stored in the laboratory at a temperature of -12 to -20°C. The vaginal swab samples were handed over to the Laboratory in Kathmandu on regular basis to be stored at room temperature for necessary test. Two separate cold boxes were used to transport blood and vaginal swab samples from the field to reference laboratory in Kathmandu.

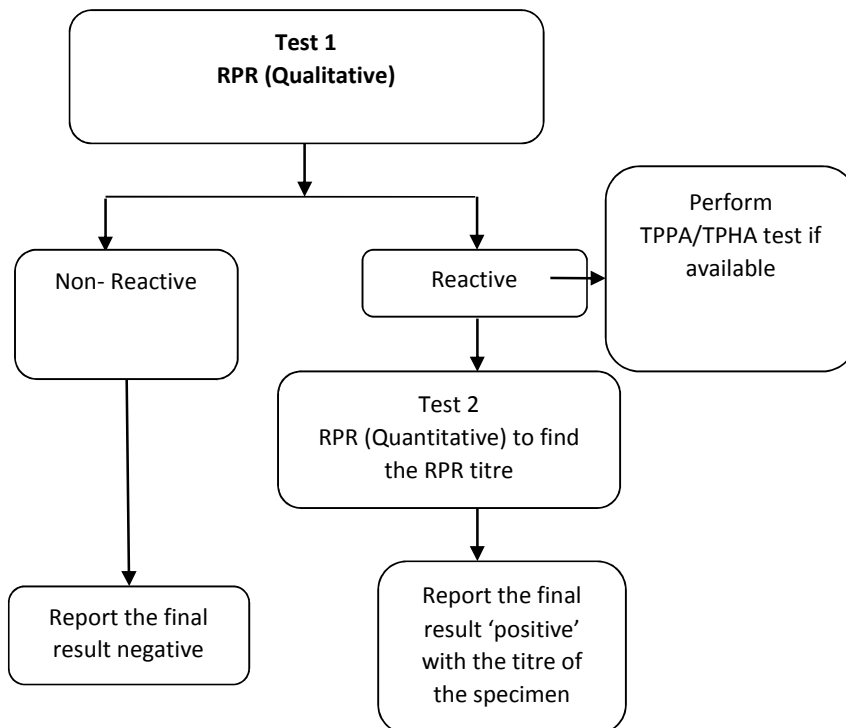


Figure 2.2: Syphilis testing algorithm

### **2.12.5 Quality Control of Laboratory Tests**

Quality control was maintained throughout the stages of collecting the specimen, its handling and testing. All the tests were performed using internal controls. These controls were recorded with all the laboratory data. Of the total serum collected, all positive and 10 % Negative of the sample was submitted for quality control assurance to the National Public Health Laboratory (NPHL) for conducting the EQA test. The same test kit and testing principles were used for the EQA test also.

### **2.12.6 External Quality Assurance**

Quality control was strictly maintained throughout the collection, handling, and testing of the Specimens. All the tests were performed using internal controls. External Quality Assurance (EQA) is evaluation of the performance of a testing laboratory by an external agency. An External Quality Assurance Scheme (EQAS) is very essential in such studies to determine the quality of testing. All HIV positive and 10 % of all HIV negative samples were retested at NPHL in this survey as an External Quality Assessment of HIV testing. Similarly, all RPR reactive and 10 % of all RPR non-reactive samples were retested at National Public Health Laboratory (NPHL) as an EQA of Syphilis testing. Aliquots of selected serum specimens were prepared in the field and sent to the laboratory in Kathmandu within a week of specimen collection. Serum specimens were stored at Intrepid-Nepal's laboratory at a temperature below -20°C. Once testing activities in the field were completed, the serum specimens were handed over to NPHL for retesting. The test kits as those used in the field were also provided to the NPHL.

### **2.13 Survey Management and Coordination**

Before the fieldwork, each survey teamed visit district public health offices, different local organizations working in the field of HIV particularly with FSWs to inform them about the survey, its objectives, and its methodology. Meetings were held with the staff of government agencies and NGO personnel's. These meetings allowed research members and local staff to get to know each other. The motivators to facilitate the listing and recruitment process and the runners were also recruited in consultation with local organizations. In each clinic location coordination and sharing meeting was conducted with the Government partners like DACC, CDO, Police and other relevant stakeholders.

#### **2.13.1 Implementation of the Survey**

There was a core team at the center that was involved in research design, tools development and finalization, pretesting, implementation, coordination (field team, NCASC, central level laboratories), monitoring, supportive supervision, recruitment and training of survey personnel, data management, data analysis, report writing and overall survey management.

At field level three teams of the surveyors were formed that were involved in local level coordination, tracing the respondents for interview, HTC (pre-test and posttest), blood and vaginal swab collection, sample transport, clinical examination, client referral, waste management and overall field related activities.

#### **2.13.2 Monitoring of the Survey Field work and Quality Assurance**

The key research team members were involved in the monitoring and supervision of the field activities coordinating with NCASC and other involved organization. Monitoring checklist was used to monitor the field set-up and activities and supportive supervision was provided to the field team as necessary. SSO survey team members visited the field sites regularly to monitor the

fieldwork and coordinate with various concerned organizations. Strategic information (SI) unit of NCASC, SSP and other concerned individuals also monitored the field work.

Research assistants and field supervisors were responsible on a day-to-day basis to ensure that the survey is being implemented according to the protocol in the field. Team meetings were held regularly to plan ahead and solve any problems in the field. The field supervisors reported to the field executives, core team members or the project experts in Kathmandu by telephone whenever necessary. SI unit staffs closely monitored the data entry, cleaning and analysis process after the field work. In addition, the key research team member from SSO made periodic site visits throughout the fieldwork.

### **2.13.3 Post-Test Counseling and Test Result Distribution**

Pre-and post-test counseling was provided to all participants. At the time their blood is drawn the survey participants was informed of the time and place they may obtain their test results. They were also informed of post-test counseling. Additionally they were informed of the importance of obtaining their results. The test results were provided by a trained counselor after checking the respondents' ID card. Those respondents wishing to take written test results were provided the same. Individual counseling was provided to the participants and they were referred to other counseling centers for follow-up services as appropriate.

### **2.14 Data Management and Analysis**

The entire collected data were field edited, checked for error in entry and fixed before the datasets are ready for analysis. SPSS program was used for data collected through cluster sampling for data management and analysis. Analysis was performed in two levels: (a) simple frequency tables and measure of central tendency in relevant variables; and Standard Deviation of few relevant variables; (b) co-relation and regression analysis in few selected variable to measure the association among outcome and its predictors.

All filled-in questionnaires were brought to SSO's Kathmandu Office for scrutiny and coding before data compilation and analyses. Before data entry, the schedules were edited for consistency, accuracy and logic. Coding personnel and coding supervisors were recruited and trained on the survey objectives in order to complete the data scrutiny of filled-in quantitative forms. The core research team members supervised the entire scrutiny operation to ensure quality output.

The entire data management and analysis operations were conducted using statistical software SPSS and Epi – data. Appropriate analysis and tables was generated after finalizing. Confidence intervals were also generated with frequency distribution.

### **2.15 Dissemination of IBBS Survey Findings**

The dissemination of the IBBS survey results was conducted at three levels:

- i) First, the key findings were shared with the communities at the survey sites to receive their comments; also preliminary findings were shared with program people to draw the implications from the data.
- ii) Secondly, it was shared at the national and central level stakeholders including the government, non-governmental organizations; development partners and stakeholders working in the field of HIV and AIDS in Nepal. This was primarily aimed to update on the status and the trends of the HIV epidemic among the key population at higher risk; and draw policy and program implications;

- iii) Thirdly, it will be disseminated at the regional level to transfer policy and program the update and potential implication as the result of the survey findings among stakeholders from districts and regional authorities.

## **2.16 Intended use of IBBS Survey Results**

The survey results are primarily intended to use (in reference to the FSWs population in 22 Terai Highway Districts) for:

- Tracking the trend in HIV and STI prevalence
- Tracking the trend in high risk behaviors
- Estimating and projecting HIV infection
- Evaluating the progress of HIV prevention interventions

## **2.17 Methodological Limitations of the Survey**

It was a challenging task to identify and convince the FSWs to participate in the survey. In many cases, randomly selected respondents were not interested in waiting for the test results, complaining that process took too much time. During the listing of the survey participants in the field setting initially the physical appearance or dress code was used but it created difficulties to find and enroll those previously listed respondents. Hence the strategy was changed to identify the respondents for listing. The respondents were given fake name with the physical appearance and dress code to identify them for the listing.

During the first mapping for the size estimation of the respondents in the study areas the number of respondents obtained was used for the sampling. In the selected clusters the second mapping was done to list the exact number of respondents. Large variation in measure of size was observed between initial and second mapping. To make the initial and second measure of size closer more time need to be allocated and cooperation of relevant stakeholders during the survey is very much crucial.

## CHAPTER 3

### FINDINGS

#### 3.1 Response status of the survey participants

Among the 862 FSWs of the 6 districts and 1425 FSWs of the 16 districts, 247 and 432 were selected randomly in the survey. The number of refusal in the 6 - districts was 36 (specify possible reasons for refusal) and in the 16 district were 32. One duplication was identified in the first cluster during screening for interview and it was excluded from the survey.

#### 3.2 Socio-Demographic Characteristics

##### 3.2.1 Female Sex Workers by Development Region

The survey was conducted among 610 female sex workers (FSW) residing in Terai highway. One third (32.1%) of the respondents in this survey were from the Central Terai region followed by Western Terai (25.6%) and the least proportion (11.5%) of FSWs was in Far Western Region (Table 3.2.1).

**Table 3.2.1: Distribution of Female Sex Workers by Development Region**

Current Places of Residence of Female Sex Workers	N=610	%
Eastern Terai	107	17.5
Central Terai	196	32.1
Western Terai	156	25.6
Mid-western Terai	81	13.3
Far-western Terai	70	11.5
<b>Total</b>	<b>610</b>	<b>100</b>

##### 3.2.2 Socio-demographic Characteristics of Female Sex Workers

In the 2012 round survey, the median age of the respondents was found to be 27 years with a range from 16 to 57 years. Just over one quarter (26.4%) of the respondents were from the age group 35 and above (Table 3.2.2). Overall, 32.1 % of the respondents were illiterate. Relatively more respondents from 6 districts (38.1%) in comparisons to 16 districts (29%) were found to be illiterate. Further, respondents who had completed their SLC or a higher level of education were found to be nominal (7.7%). Comparatively, no notable difference was observed in between the group of districts (7.1% in 6 and 8 % in 16 districts) (Table 3.2.2). Regarding ethnic composition of respondents, 17.5% of respondents comprised of Chhettri or Thakuri community and equal %age (17%) Terai ethnicity (Yadav, Das, Mishra, Satar, Karmi, Kohar etc.) as well predominantly followed by 13.6 % of Chaudhary or Tharu community. The details on ethnic composition of FSWs in Terai Highway Districts are provided in Table 3.2.2.

**Table 3.2.2: Socio-demographic Characteristics of Female Sex Workers (a)**

Socio-demographic Characteristics	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
<b>Age of respondent (N=610)</b>						
16-19 years	28	13.3	57	14.3	85	13.9

Socio-demographic Characteristics	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
20 – 24 years	38	18.6.8	92	22.8	130	21.3
25 – 29 years	44	20.0	90	23.0	134	22.0
30 – 34 years	42	21.4	58	13.8	100	16.4
(35 and above)	58	27.1	103	26.0	161	26.4
Mean(SD)/Median	29.2(8.1)/29		28.2(8.2)/27		28.6(8.1)/27	
Range	16-52		16-57		16-57	
Total	210	100	400	100	610	100
<b>Education (N=610)</b>						
Illiterate	80	38.1	116	29.0	196	32.1
Literate, no schooling	36	17.1	71	17.8	107	17.5
Grade 1 – 5	34	16.2	91	22.8	125	20.5
Grade 6 – 9	45	21.4	90	22.5	135	22.1
SLC and above	15	7.1	32	8.0	47	7.7
Total	210	100	400	100	610	100
<b>Ethnic/Caste group (N=610)</b>						
Chhetri/Thakuri	44	21.0	63	15.8	107	17.5
Chaudary/Tharu	26	12.4	57	14.3	83	13.6
Dalit/B.K/Pariyar	27	12.9	55	13.8	82	13.4
Rai	13	6.2	26	6.5	39	6.4
Magar	12	5.7	34	8.5	46	7.5
Brahmin	26	12.4	56	14.0	82	13.4
Gurung	9	4.3	11	2.8	20	3.3
Newar	7	3.3	12	3.0	19	3.1
Lama	4	1.9	10	2.5	14	2.3
Mandal	4	1.9	5	1.3	9	1.5
Giri	3	1.4	4	1.0	7	1.1
Kurmi	3	1.4	3	0.8	6	1.0
Muslim	32	15.2	64	16.0	96	15.7
Others (Yadav, Das, Mishra, Satar, Karmi, Kohar, etc.)	44	21.0	63	15.8	107	17.5
<b>Total</b>	<b>210</b>	<b>100</b>	<b>400</b>	<b>100</b>	<b>610</b>	<b>100</b>
<b>Marital status (N=610)</b>						
Married	140	69.0	220	53.8	360	59.0
Divorced/separated	38	16.7	83	21.5	121	19.8
Widow	6	2.4	21	5.5	27	4.4
Never married	26	11.9	76	19.3	102	16.7

**Table 3.2.2: Socio-demographic Characteristics of Female Sex Workers (b)**

Socio-demographic Characteristics	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	210	100	400	100	610	100
<b>Age at first marriage (N=508)</b>						
10–14	47	25.4	92	28.5	139	27.4
15 – 19	126	68.1	190	58.8	316	62.2
20 – 24	12	6.5	37	11.5	49	9.6
25 and Above	0	0.0	4	1.2	4	0.8
Mean(SD)/Median	15.9(2.4)/16		16.1(2.9)/16		16.0(2.8)/16	
Range (in years)	10 – 22		10 – 30		10 – 30	
Total	185	100	323	100	508	100
<b>Age of respondent when she was divorced/separated/widowed (N=148)</b>						
15–19	7	17.5	15	13.9	22	14.9
20 – 24	9	22.5	34	31.5	43	29.1
25 – 29	10	25.0	22	20.4	32	21.6
30 – 34	5	12.5	17	15.7	22	14.9
35 or above	9	22.5	20	18.5	29	19.6
Mean(SD)/Median	27.4(7.3)/26		27.1(7.9)/25		27.1(7.7)/25	
Range	16-42		16-56		16-56	
Total	40	100	108	100	148	100
<b>Husband has second wife (N=360)</b>						
Yes	12	8.3	32	14.9	44	12.2
No	133	91.7	183	85.1	316	87.8
<b>Total</b>	<b>145</b>	<b>100</b>	<b>215</b>	<b>100</b>	<b>360</b>	<b>100</b>

In this round of survey, in general, 59% of respondents were married, 19.8% were divorced or separated and 16% of the respondents were never married. In comparison, more than two third (69%) of respondents in 6 districts were married than that of 16 districts (58.3%). But in contrast never married respondents and divorced or separated were comparatively high (19.3% never married and 21.5% divorced or separated) in 16 districts than those in 6 districts (11.9% never married and 16.7% divorced or separated). Median age of first marriage was 16 years. Overall, 62.2% of respondents were married by the age of 15-19 years. Moreover, more than two-third (68.1%) of the respondents from 6 districts had got married in between the age of 15-19 years than those (58.8%) from 16 districts. Likewise, 27.4% of total respondents were married by the age of less than 14. Comparatively 28.5% respondents from 16 districts were found to have got married before the age of 14 than those from 6 districts (25.4%). This showed that most of the respondents were married in their early age. The median age of respondents when they got divorced or separated was 25. Among the married respondents, 12.2% of respondents reported that their husband had second wife.



### 3.2.3 Respondents by their Living Status

Nearly two third (65.6%) of the married respondents were living with their husband or male friend. However 34.4% were living alone. In comparison to married respondents, minimal proportions (4.9%) of the unmarried respondents were found living with their male friend. More than half (55.9%) of the respondents had dependents. Of them 53.7% had 2-3 dependents, 21.4% had 4 dependents and 24.9% had only one dependent. (Table 3.2.3)

**Table 3.2.3: Distribution of FSWs by their Living Status**

Living Status of Female Sex Worker	2012 Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Currently married respondents living with husband/male friend (N=360)						
Yes	92	63.4	144	67.0	236	65.6
No	53	36.6	71	33.0	124	34.4
Total	145	100	215	100	360	100
Unmarried respondents living with male friend (N=102)						
Yes	0	0.0	5	6.5	5	4.9
No	25	100.0	72	93.5	97	95.1
Total	25	100	77	100	102	100
Have dependents (N=610)						
Yes	116	55.2	225	56.3	341	55.9
No	94	44.8	175	43.8	269	44.1
Total	210	100	400	100	610	100
Total number of dependents (N=341)						
One	25	21.6	60	26.7	85	24.9
2 – 3	59	50.9	124	55.1	183	53.7
4 and more	32	27.6	41	18.2	73	21.4
Mean(SD)/Median number of	2.73(1.5)/2.0		2.48(1.4)/3.0		2.57(1.4)/3.0	
Total	116	100	225	100	341	100

### 3.2.4 Child birth and Use of Family Planning Devices

This section deals with the pregnancy history of ever married female sex workers along with the status of childbirth. Additionally, knowledge and practice of condom use among female sex workers was also assessed.

#### Pregnancy History of Ever Married Female Sex Workers

Of all the ever married respondents, 88.6% had ever given birth to a child. The mean number of live births was 2.6. More than one quarter (30.5%) of the respondents in 6 districts had four or more than four live births compared to 17.7% in 16 districts. A quarter (22.9%) of FSWs had undergone miscarriage taken as a whole. However, higher proportion (28.6%) was observed in 16 districts relative to FSWs (19.8%) in 6 districts. Less than a quarter of respondents (21.4% in 6 and 27.8% in 16 districts) had ever terminated or aborted any pregnancies. Moreover, above two- third (69%) of

the respondents had terminated pregnancies for at least one time. Among them, a remarkable difference (83.9% in 6 and 62.3% in 16 districts) was observed in both districts. (Table 3.2.4)

**Table 3.2.4: Distribution of Ever Married Respondents by their Pregnancy History (a)**

Pregnancy History	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Respondent ever gave birth (N=360)						
Yes	128	88.3	191	88.8	319	88.6
No	17	11.7	24	11.2	41	11.4
Total	145	100	215	100	360	100
Number of live births (N=319)						
One	25	19.5	51	26.7	76	23.8
Two	30	22.9	63	31.1	93	27.2
Three	33	25.2	41	20.2	74	22.2
Four and more	40	30.5	36	17.7	76	22.8
Mean(SD)/Median number of live birth	2.9(1.5)/3.0		2.4(1.2)/2.0		2.6(1.3)/2	
Total	128	100	191	100	319	100
Ever had miscarriage (N=319)						
Yes	24	18.8	49	25.7	73	22.9
No	104	81.2	142	74.3	246	77.1
Total	128	100	191	100	319	100
Ever terminated/aborted any pregnancies (N=360)						
Yes	31	21.4	69	27.8	100	27.6
No	114	78.6	146	72.2	260	72.2
Total	145	100	215	100	360	100
Number of pregnancies terminated/aborted (N=100)						
One time	26	83.9	43	62.3	69	69.0
Two times	2	6.5	17	24.6	19	19.0
Three times	2	6.5	7	10.1	9	9.0
Four times	0	0.0	2	2.9	2	2.0
Five times	1	3.2	0	0.0	1	1.0
Total	31	100	69	100	100	100
Person who assisted the last abortion (N=100)						
Doctor	17	54.8	37	53.6	54	54.0
Nurse	11	35.5	29	42.0	40	40.0
MCHW	3	9.7	3	4.3	6	6.0
Total	31	100	69	100	100	100
Wish to have a child in the next two-years (N=360)						
Yes	20	13.8	34	15.6	54	15
No	125	86.2	181	84.2	306	85

**Table 3.2.4: Distribution of Ever Married Respondents by their Pregnancy History (b)**

Pregnancy History	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	170	100	292	100	462	100
Wish to have a child in the next 6-months (N=54)						
Yes	9	45.0	8	23.5	17	31.5
No	11	55.0	26	76.5	37	68.5
Total	20	100	34	100	54	100
Was pregnant in the last 12 month (N=360)						
Yes	4	2.8	11	5.1	15	4.2
No	141	97.2	204	94.9	345	95.8
Total	145	100	215	100	360	100
Outcome of the last pregnancy (N=15)						
Live birth	1	25.0	3	27.3	4	26.7
Spontaneous abortion	3	75.0	8	72.7	11	73.3
Total	4	100	11	100	15	100
Person who assisted the last delivery (N=15)						
Nurse	1	25.0	6	54.5	7	46.7
Doctor	1	25.0	3	27.3	4	26.7
Sudeni	0	0.0	1	9.1	1	6.7
Mother in-law	2	50.0	0	0.0	2	13.3
Don't know	0	0.0	1	9.1	1	6.7
Total	4	100	11	100	15	100
Place where the last child was delivered (N=15)						
Home	1	25.0	3	27.3	4	26.7
Health post	1	25.0	0	0.0	1	6.7
District hospital	2	50.0	5	45.5	7	46.7
No response	0	0.0	3	27.3	3	20.0
Total	4	100	11	100	15	100

More than half of the respondents (54.8% in 6 and 53.6% in 16 districts) were assisted by Doctor in their last abortion. Most of the respondents (86.2% in 6 and 84.2% in 16 districts) did not want to have child in next 6 months. A great proportion (97.2% in 6 and 94.9% in 16 districts) of respondents reported that they were not pregnant in the preceding year. A major proportion (75% in 6 and 72.7% in 16 districts) of respondents ended up with spontaneous abortion in their last pregnancy. Nurses had assisted the last deliveries (54.3%) of the respondents in 16 districts while on the other hand last deliveries of most (50%) FSWs in 6 districts were assisted by mother in-laws. District Hospital was the most visited place for last deliveries by most (50% in 6 and 45.5% in 16 districts) of the respondents. Around a quarter (25% in 6 and 27.3% in 16 districts) of FSWs had delivered at home.

### 3.2.5 Knowledge and Practice of Family Planning Methods

All of the respondents had heard about condom. Apart from condom, permanent methods (sterilization) were found to be known by more (50% each in both male and female sterilization) number of the respondents in 6 districts while in 16 districts, Pills was found to be known by more (88.9%) respondents. Less than half (44.1% in 6 and 37.2% in 16 districts) of the respondents had not used any method to delay or avoid getting pregnant during the survey period. Of all the family planning methods, more (43.8% in 6 and 45.1% in 16 districts) number of FSWs had undergone sterilization followed by condom (40% in 6 and 41.4% in 16 districts), Injectable (31.2% in 6 and 32.4% in 16 districts) (refer table 3.2.5).

**Table 3.2.5: Distribution of Respondents by their Knowledge and Practice of Family Planning Methods**

Family Planning Methods	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Types of family planning methods heard by respondent*	N=4	%	N=9	%	N=13	%
Condom	4	100.0		100	13	100.0
Injectable	1	25.0	6	66.7	7	53.8
Pills	1	25.0	8	88.9	9	69.2
Female sterilization	2	50.0	7	77.8	9	69.2
Male sterilization	2	50.0	3	33.3	5	38.5
Implants	1	25.0	7	77.8	8	61.5
Withdrawal	1	25.0	5	55.6	6	46.2
IUD	1	25.0	6	66.7	7	53.8
Rhythm method	1	25.0	1	11.1	2	15.4
Continue breastfeeding	0	0.0	3	33.3	3	23.1
Currently using any method to delay or avoid getting pregnant (N=360)						
Yes	81	55.9	135	62.8	216	60
No	64	44.1	80	37.2	144	40.0
Total	145	100	215	100	360	100
Methods of family planning currently used*	N=81	%	N=136	%	N=217	%
Condom	32	40	55	41.4	87	40.8
Injectable	25	31.2	44	33.4	69	32.4
Pills	8	10	11	8.3	19	8.9
Female sterilization	35	43.8	60	45.1	95	44.6
Male sterilization	2	2.5	6	4.5	8	3.8
Implants	2	2.5	7	5.3	9	4.2
Withdrawal	20	25	21	15.8	41	19.2
IUD	3	3.8	5	3.8	8	3.8
Rhythm method	2	2.5	2	1.5	4	1.9
Others	1	1.2	6	4.5	7	3.3

\*Note: Multiple Responses Allowed

### 3.3 Prevalence of HIV and Syphilis

#### 3.3.1 Prevalence of HIV and Syphilis

In this round of survey, one percent of FSWs (6/610) was found to be HIV positive. All the HIV positive FSWs were from 16 districts. Similarly, 0.7% FSWs had laboratory test suggestive of syphilis history and 0.3% FSWs had active syphilis.

#### Prevalence of Chlamydia and Gonorrhoea:

Specimens collected from the field were tested for Chlamydia and Gonorrhoea using PCR technology and the prevalence of both Chlamydia and Gonorrhoea was found to be 4.5% respectively.

**Table 3.3.1: Prevalence of HIV and Syphilis Infection among Female Sex Workers**

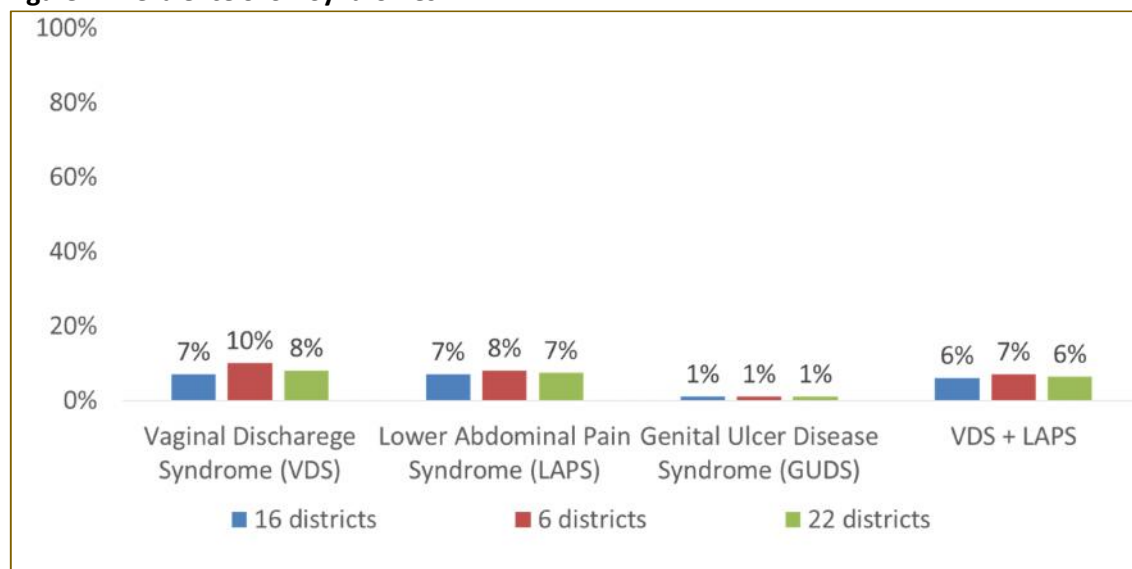
STI Infection	Female sex workers Districts, 2012								
	6 Dist.			16 Dist.			22 Dist.		
	N	%	95% CI	N	%	95% CI	N	%	95% CI
HIV Positive	0	0	-	6	1.5	0.5-2.8	6	1.0	0.3-1.8
Syphilis Infection									
Syphilis history	0	0.0	0	4	2	0.3-2.0	4	0.7	0.2-1.3
Active syphilis	0	0.0	-		0.5	0-1.3	2	0.3	0.0-0.8

Quality control was strictly maintained throughout the collection, handling and testing of the specimen. All tests were performed using external control. A total of 76 serum samples were sent to NPHL for testing of HIV and 6 samples for TPHA testing. Overall, the site results were concordant with NPHL results and none of the results were discordant. The strength of agreement was almost perfect.

#### 3.3.2 Prevalence of STI Syndromes

Vaginal Discharge Syndrome (VDS) was found to be more prevalent FSWs of both 6 districts and 16 districts with 10% and 7% respectively followed by Lower Abdomen Pain Syndrome (LAPS) 8% and 7% respectively. Genital Ulcer Disease Syndrome (GUDS) was found 1% in both 6 districts and 16 districts. (Refer fig 1).

**Figure 1: Prevalence of STI Syndromes**



### 3.4 Sexual Behavior and Condom Use among Female Sex Workers

This section describes the sexual behaviour of the FSWs, including the duration of their involvement in the sex trade, age at first sexual intercourse, average number of the clients, types of the clients, income sources, and their condom use with different types of sex partners.

#### 3.4.1 Sexual Behavior of FSWs

Table 3.4.1 describes the sexual behaviour of the FSWs. The median age at first sexual intercourse was 16 years. More than half (59.7%) of the respondents were found to have their first sexual intercourse when they were 15-19 years of age, however, more (68.1%) respondents in 6 districts were likely to have their first sexual intercourse compared to those (55.3%) in 16 districts. Only 0.5% of the respondents reported of having had their first sexual intercourse after reaching 25 years of age.

The mean number of months for which the respondents were involved in the sex trade was 36.9 months. Almost four out of ten (39.5%) of the respondents in 6 districts had involved in sex trade for no more than a year, indicating new sex workers entering the business at an increasing rate while in 16 districts, majority (23.5%) had been involved in sex trade for more than 48 months.

**Table 3.4.1: Sexual Behavior of FSWs (a)**

Sexual Behavior	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Age at first sexual intercourse (N=610)						
11 years and below	1	0.5	7	1.8	8	1.3
12 – 14 years	56	26.7	106	26.5	162	26.6
15 – 19 years	143	68.1	221	55.3	364	59.7
20 – 24 years	9	4.3	57	14.3	66	10.8
25 – 29 years	0	0.0	3	0.8	3	0.5
Don't know	1	0.5	6	1.5	7	1.1
Mean(SD)/median age at first sex	15.8(2.1)/16		16(10.3)/16		16.1(2.6)/16	
Total	210		100	400	100	610
Duration of sex work (N=610)						
Up to 6 months	4	1.9	9	2.3	13	2.1
7 – 12 months	83	39.5	92	23.0	175	28.7
13 – 24 months	30	14.3	87	21.8	117	19.2
25 – 36 months	46	21.9	72	18.0	118	19.3
37– 48 months	14	6.7	37	9.3	51	8.4
More than 48 months	31	14.8	94	23.5	125	20.5
Don't know	2	1.0	9	2.3	11	1.8
Total	210	100	400	100	610	100
Working as a sex worker from the sampled location						
Up to 6 months	6	2.9	33	8.3	39	6.4
7 – 12 months	76	36.2	104	26.0	180	29.5
13 – 24 months	25	11.9	91	22.8	116	19.0

Sexual Behavior	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
25 – 36 months	67	31.9	83	20.8	150	24.6
37 – 48 months	10	4.8	29	7.3	39	6.4
More than 48 months	26	12.4	60	15.0	86	14.1
Total	210	100	400	100	610	100
Other type of sites where the respondent work as a sex worker*	N=210	%	N=400	%	N=610	%
Disco	0	0.0	5	1.3	5	0.8
Dance restaurant	1	0.5	5	1.3	6	1.0
Cabin restaurant	11	5.2	29	7.3	40	6.6
Call girl	9	4.3	30	7.5	39	6.4
House work	57	27.1	85	21.3	142	23.3
Bhatti pasal	7	3.3	32	8.0	39	6.4
Road	17	8.1	23	5.8	40	6.6
Garment/carpet factory	0	0.0	1	0.3	1	0.2

**Table 3.4.1: Sexual Behavior of FSWs (b)**

Sexual Behavior	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Squatter settlement/refugee	1	0.5	11	2.8	12	2.0
Restaurant	2	1.0	21	5.3	23	3.8
Dohori restaurant	0	0.0	10	2.5	10	1.6
Hotel/lodge	100	47.6	230	57.5	330	54.1
Do not work anywhere else	32	15.2	62	15.5	94	15.4
Others	19	9.0	42	10.5	61	10.0
Ever worked as a sex worker in other places (N=610)						
Yes	4	1.9	81	20.3	85	13.9
No	206	98.1	319	79.75	525	86.1
Total	210	100	400	100	610	100
Had worked in India as a sex worker (N=610)						
Yes	9	4.3	11	2.8	20	3.3
No	201	95.7	389	97.3	590	96.7
Total	210	100	400	100	610	100

\*Note: Multiple Responses Allowed

On an average, respondents had worked as a sex worker from the sampled location for 30.3 months. On the whole, one quarter (29.5%) of the respondents had worked for 7 to 12 months as a sex worker in the sampled location. In particular, those FSWs accounted for 36.2% of FSWs in 6 districts and 26% in 16 districts. Only 6.4% of the sampled FSWs stayed on the business for less than 6

months. Of those, FSWs in 16 districts were comparatively higher (8.3%) in proportion compared to FSWs than (2.9%) in 6 districts. More than half (54.1%) of the recruited FSWs were found to have performed the sex trade from hotel or lodges followed by house-work (23.3%). Relatively, FSWs in 16 districts were higher (57.5%) in proportion than FSWs in 6 districts (47.6%) who had performed sex trade from hotel or lodges. Fewer numbers of respondents were reported to have performed the sexual trade from sites such as disco, dance restaurants, garment/carpet factory. Only, 3.3% of the FSWs had previously worked as a sex worker in India.

### 3.4.2 Sex Workers and their Clients

Table 3.4.2 presents the number of clients (i.e. paying sex partners) of the respondents and their average working days. The number of clients per day ranged from 1 to 11 with a mean of 1.5 clients per day. Nearly two third of the respondents (65.2%) reportedly entertained one client per day. Moreover, the proportion of FSWs who entertained one client per day was 85.7% in 6 districts and 54.5% in 16 districts. Only 2% (0.5% in 6 and 2.8% in 16 districts) of the respondents reported to have entertained more than four clients on an average per day.

In order to have a clear picture of the number of clients that FSWs served, they were asked about the number of clients they served on the day before the interview, during the week preceding the survey, and on the day of their most recent sexual contact. The number of clients served by the FSWs on the previous day of the interview ranged from none to 10 with an average of one.

In general, 52.3% of the respondents (61.9% in 6 and 47.3% in 16 districts) did not have any clients on the day preceding the survey, 33.9 % (31.4% in 6 and 35.3% in 16 districts) reported that they had served one client, 9.2 % (5.7% in 6 and 11% in 16 districts) had two clients, while the remaining 4.4% (1% in 6 and 6.5% in 16 districts) reportedly had more than two clients on the previous day (Table 3.4.2).

**Table 3.4.2: Number of Clients and Average Working Days as Reported by FSWs (a)**

Number of Clients of Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Average number of clients per day (N=610)						
One	180	85.7	218	54.5	398	65.2
Two	19	9.0	118	29.5	137	22.5
Three– Four	10	4.8	53	13.3	63	10.3
More than Four	1	0.5	11	2.8	12	2.0
Mean(SD) clients per day	1.2(0.6)		1.7(1.1)		1.5(1)	
Range	1-5		1-11		1-11	
Total	210	100	400	100	610	100
Number of clients on the previous day (N=610)						
None	130	61.9	189	47.3	319	52.3
One	66	31.4	141	35.3	207	33.9
Two	12	5.7	44	11.0	56	9.2
3-4	2	1.0	22	5.5	24	3.9
More than 4	0	0.0	4	1.0	4	0.7
Range	0-4		0-10		0-10	



Number of Clients of Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	210	100	400	100	610	100
Number of clients in the past week (N=610)						
0	11	5.2	19	4.8	30	4.9
One	54	25.7	29	7.3	83	13.6
Two	59	28.1	62	15.5	121	19.8
3 – 4	57	27.1	135	33.8	192	31.5
5 – 10	21	10.0	129	32.3	150	24.6
More than 10	8	3.8	26	6.5	34	5.6
Total	210	100	400	100	610	100
Time of last sexual contact (N=610)						
On the day of interview	23	11.0	35.0	8.75	58	9.5
1 – 2 days before	111	52.9	236.0	59	347	56.9

**Table 3.4.2: Number of Clients and Average Working Days as Reported by FSWs (b)**

Number of Clients of Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
3 – 5 days before	46	21.9	104.0	26	150	24.6
6 and more days before	30	14.3	25.0	6.25	55	9.0
Total	210	100	400	100	610	100
Number of clients on the day of last sexual contact (N=610)						
One	151	71.9	273	68.3	424	69.5
Two	57	27.1	103	25.8	160	26.2
3 – 7	2	1.0	24	6.0	26	4.3
Total	210	100	400	100	610	100
Mean number of clients on the day of last sexual Contact	1.3		1.4		1.4	
Average number of days worked in a week (N=610)						
One	41	19.5	14	3.5	55	9.0
Two	48	22.9	40	10.0	88	14.4
Three	49	23.3	60	15.0	109	17.9
4-7 days	72	34.3	286	71.5	358	58.7
Mean(SD) number of days worked in a week	3.1(1.8)		4.5(1.6)		4.0(1.8)	
Total	210	100	400	100	610	100

Additionally, the average number of clients entertained by the sex workers in the past week was around four. Overall, 4.9% (5.2% in 6 and 4.8% in 16 districts) of them did not have any clients, 31.5% (27.1% in 6 and 33.4% in 16 districts) of them had three to four clients followed by 24.6%

(10% in 6 and 32.3% in 16 districts) who had five to 10 clients in the preceding week. Nearly six percent (3.8% in 6 and 6.5% in 16 districts) of the respondents reportedly had more than 10 clients in the week preceding the survey.

Majority (52.9% in 6 and 59% in 16 districts) of FSWs had sexual contact a day or two before the day of the interview. Large proportion (71.9% in 6 and 68.3% in 16 districts) of the respondents had entertained one client on the day they last had sexual contact and around one quarter (27.1% in 6 and 25.8% in 16 districts) of the total respondents had intercourse with two clients. Furthermore, the average number of days, respondents had worked was 4 days in a week (Table 3.4.2). Around 60 % on the whole (58.6%) of FSWs reported that they had worked as sex workers for four to seven days a week. Relatively, higher proportion (71.5%) of FSWs in 16 districts was found to work for four to seven days a week than FSWs in 6 (34.3%) districts.

### 3.4.3 Occupational Background of Clients of Female Sex Workers

As illustrated by the Table 3.4.3, the sex workers clients belonged to a wide variety of professions. More than one-third (31.9% in 6 and 36.8% in 16 districts) of the sex workers reported bus or truck or tractor worker as the most frequent clients which constituted highest proportion in both district region. Other common clients as reported by the respondents were businessmen (29% in 6 and 33% in 16 districts), service holders (15.7% in 6 and 23.5% in 16 districts), labourer (14.3% in 6 and 23.3% in 16 districts) and taxi or jeep or micro or minibus workers (11.9% in 6 and 22% in 16 districts). On the contrary, students, foreign employee, rickshaw pullers and farmers were among the least frequent clients.

**Table 3.4.3: Occupational Background of Clients of Female Sex Workers**

Types of Clients	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Occupation of most frequent clients	N=210	%	N=400	%	N=610	%
Bus/truck/tractor worker	67	31.9	147	36.8	214	35.1
Taxi/jeep/micro/minibus worker	25	11.9	88	22.0	113	18.5
Labor	30	14.3	93	23.3	123	20.2
Policeman	39	18.6	61	15.3	100	16.4
Army personnel	30	14.3	39	9.8	69	11.3
Student	12	5.7	25	6.3	37	6.1
Rikshaw puller	18	8.6	24	6.0	42	6.9
Service holder	33	15.7	94	23.5	127	20.8
Businessman	61	29.0	132	33.0	193	31.6
Mobile businessman	17	8.1	63	15.8	80	13.1
Foreign employee	11	5.2	28	7.0	39	6.4
Contractor	24	11.4	57	14.3	81	13.3
Foreigner (Indian)	20	9.5	28	7.0	48	7.9
Farmer	26	12.4	20	5.0	46	7.5
Others (guide, guard, politician, restaurant worker etc.)	10	4.8	22	5.5	32	5.2
Don't know	5	2.4	27	6.8	32	5.2

Types of Clients	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total						
Occupation of last client	N=210	%	N=400	%	N=610	%
Bus/truck/tractor worker	19	9.0	43	10.8	62	10.2
Taxi/jeep/micro/minibus worker	9	4.3	20	5.0	29	4.8
Labor	19	9.0	41	10.3	60	9.8
Policeman	20	9.5	11	2.8	31	5.1
Army personnel	6	2.9	10	2.5	16	2.6
Student	9	4.3	9	2.3	18	3.0
Rikshaw puller	4	1.9	6	1.5	10	1.6
Service holder	21	10.0	39	9.8	60	9.8
Businessman	32	15.2	73	18.3	105	17.2
mobile businessman	4	1.9	18	4.5	22	3.6
Foreign employee	7	3.3	12	3.0	19	3.1
Contractor	16	7.6	26	6.5	42	6.9
Foreigner (Indian)	4	1.9	15	3.8	19	3.1
Farmer	32	15.2	17	4.3	49	8.0
Others (guide, guard, politician, restaurant worker, etc.)	7	3.3	32	8.0	39	6.4
Don't know	1	0.5	28	7.0	29	4.8
Total	210	*	400	*	610	*

*\*Note: Multiple Responses Allowed*

Higher (15.2% in 6 and 18.3% in 16 districts) proportion of the FSWs had businessmen as their most recent client followed by clients of other professions such as bus or truck or tractor worker (9% in 6 and 10.8% in 16 districts), Labourer (9% in 6 and 10.3% in 16 districts) and Service holders (10% in 6 and 9.8% in 16 districts).

#### **3.4.4 Sex Workers and Their Sex Partners**

This section presents additional information on the number of sex partners including both paying and non-paying regular sex partners. Non-paying partners included boyfriends, husbands, and regular partners of the respondents who did not pay them for sexual services; while paying partners included those partners who paid them for sexual contact.

The respondents were asked about the number of paying as well as non-paying regular sex partners they had in the week preceding the survey. The respondents had an average of 4.3 paying and 3.2 non-paying sex partners in the preceding week. A major proportion (42%) of the respondents in 16 districts had 3-5 paying sex partners while in 6 districts majority (55.7%) had 1-2 paying sex partners in the preceding week. Nearly, four percent (3.3% in 6 and 3.8% in 16 districts) of the FSWs were however reported to have more than 10 paying sex partners in the week preceding the survey. (Table 3.4.4)

**Table 3.4.4: Number of Different Types of Sex Partners of Female Sex Workers**

Sex Partners of Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
No. of paying sex partners in the past week (N=610) (Calculate range also)						
0	16	7.6	56	14.0	72	11.8
1 – 2	117	55.7	95	23.8	212	34.8
3 – 5	58	27.6	168	42.0	226	37.0
6 – 10	12	5.7	60	15.0	72	11.8
More than 10	7	3.3	15	3.8	22	3.6
Can't remember	0	0.0	6	1.5	6	1.0
Total	210	100	400	100	610	100
<b>Table 3.4.4: Number of Different No. of non-paying regular sex partners in the past week (N=610)</b>						
0	117	55.7	195	48.8	312	51.1
1 – 2	73	34.8	163	40.8	236	38.7
3-5	13	6.2	24	6.0	37	6.1
6-10	4	1.9	5	1.3	9	1.5
More than 10	1	0.5	0	0.0	1	0.2
Can't remember	2	1.0	13	3.3	15	2.5
Total	210	100	400	100	610	100
No. of paying and non-paying regular sex partners in the past week (N=610)						
0	7	3.3	42	10.5	49	8.0
1 – 2	97	46.2	75	18.8	172	28.2
3 – 5	85	40.5	180	45.0	265	43.4
6 – 10	14	6.7	75	18.8	89	14.6
More than 10	7	3.3	23	5.8	30	4.9
Can't remember	0	0.0	5	1.3	5	0.8
Mean (SD) (paying and non-paying regular partners in the past week)	3.1(2.8)		5.5(11.0)		4.7(9.1)	
Total	210	100	400	100	610	100
Last sex partner (N=610)						
Client	64	30.5	176	44	240	39.3
Regular client	87	41.4	89	22.3	176	28.9
Husband/male friend	56	26.7	125	31.3	181	29.7
Other male	3	1.4	6	1.5	9	1.5
Others	0	0	4	1	4	0.7
Total	210	100	400	100	610	100

Around half (55.7% in 6 and 48.8% in 16 districts) of FSWs had no non-paying sex partners following 34.8% in 6 and 40.8% in 16 districts with 1-2 non-paying sex partners in the week preceding the survey (Table 3.4.4). Nearly 44% (37.1% in 6 and 47% in 16 districts) of the sex workers had their

last sexual contact with non-regular clients, 42.4% in 6 and 32.8% in 16 districts) with husband or male friend and with regular clients (16.7% in 6 and 12.8% in 16 districts) as their last sex partner.

### 3.4.5 Types of Sex Practiced and Acts of Violence Faced by FSWs

Above one quarter (28.8%) of FSWs in 16 districts was forced to have sex in the year prior to the survey in comparison to (4.8%) of FSWs in 6 districts. Similarly, one out of five (21.8%) FSWs in 16 districts had sexual contacts other than vaginal sex in the preceding year than those (15.2%) in 6 districts. Regarding the types of sexual contacts, oral sex was found to be more (64.4%) practiced in 16 districts while in 6 districts, anal sex was highly (84.4%) practiced. (Table 3.4.5)

**Table 3.4.5: Types of Sex Practiced by Female Sex Workers**

Type of Sex	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Any partner forcibly demanded sex in the past year (N=610)						
Yes	10	4.8	115	28.8	125	20.5
No	200	95.2	285	71.3	485	79.5
Total	210	100	400	100	610	100
Types of sexual contacts in the past year (N=610)						
Only vaginal sex	178	84.8	313	78.3	491	80.5
Other sexual contact	32	15.2	87	21.8	119	19.5
Total	210	100	400	100	610	100
Types of other sexual contacts in the past year*						
Oral sex	5	15.6	56	64.4	61	51.3
Anal sex	27	84.4	53	60.9	80	67.2
Masturbation	24	75.0	49	56.3	73	61.3
Others	0	0.0	3	3.4	3	2.5
Clients refusing to pay for sexual services (N=610)						
Yes	91	43.3	192	48.0	283	46.4
No	119	56.6	208	52.0	327	53.6
Total	210	100	400	100	610	100
Clients performing such activities that the female sex workers disliked in the past year(N=610)						
Yes	17	8.1	84	21.0	101	16.6
No	193	91.9	316	79.0	509	83.4
Total	210	100	400	100	610	100
Types of activities performed by clients which female sex workers disliked (N=101)						
Oral Sex	10	58.8	40	47.6	50	49.5
Physically assaulted	1	5.9	7	8.3	8	7.9
Stealing money	0	0.0	5	6.0	5	5.0
Verbal abuse	5	29.4	7	8.3	12	11.9
Masturbation	1	5.9	7	8.3	8	7.9
Anal sex	0	0.0	11	13.1	11	10.9
Runway without paying	0	0.0	5	6.0	5	5.0

Type of Sex	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Others	0	0.0	2	2.4	2	2.0
Total	17	100	84	100	101	100
Types of sex with last client (N=119)						
Masturbation	8	25.0	3	3.4	11	9.2
Oral sex	5	15.6	72	82.8	77	64.7
Vaginal sex	19	59.4	7	8.0	26	21.8
Anal sex	0	0.0	5	5.7	5	4.2
Total	32		87		119	
Physically assaulted by any person for any reason in the past year (N=610)						
Yes	12	5.7	69	17.3	81	13.3
No	198	94.3	331	82.8	529	86.7
Total	210	100	400	100	610	100

\*Note: Multiple Responses Allowed

FSWs who did not like client's activities during sexual contact in the preceding year were 21% in 16 districts than those (8%) in 6 districts. Of those who did not liked clients activities, majority (58.8% in 6 and 47.6% in 16 districts) had not liked oral sex followed by (29.4% in 6 and 8.3 % in 16 districts) verbal abuse. Large proportion (82.8%) of FSWs in 16 districts had oral sex with their last clients while (59.4%) FSWs in 6 districts had vaginal sex. FSWs in 16 districts were found to be assaulted more (69/400) by any person for any reason in the preceding year than those (12/210) in 6 districts (Table 3.4.5)

### 3.4.6 Income of FSWs from Sex Work and Other Jobs

Table 3.4.6 categorizes the FSWs according to their income from sex work and other jobs outside of the sex industry. Both cash and gifts received by the sex workers have been taken into account when calculating their total income. The mean income of FSWs from their last client was NRs.

1026.7. Such variations in income could be due to the varying rates for sex acts charged by the different categories of sex workers in the survey population. (Table 3.4.6)

**Table 3.4.6: Income of Female Sex Worker's from Sex Work and Other Jobs**

Income from Sex Work and Other Jobs	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total Income from last sex with client (N=610)						
Up to Rs. 100	12	5.7	9	2.3	21	3.4
NRs. 101 – Rs. 500	94	44.8	131	32.8	225	36.9
NRs. 501 – Rs. 1,000	64	30.5	152	38.0	216	35.4
NRs. 1001 – Rs. 1,500	12	5.7	50	12.5	62	10.2
NRs. 1501 – Rs. 2,000	16	7.6	27	6.8	43	7.0
NRs. 2001 and above	12	5.7	31	7.8	43	7.0
Total	210	100	400	100	610	100

Income from Sex Work and Other Jobs	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total Average weekly income from sex work						
Up to Rs. 1,000	70	33.3	63	15.8	133	21.8
Rs. 1,001 – Rs. 2,000	65	31.0	63	15.8	128	21.0
Rs. 2,001 – Rs. 3,000	34	16.2	53	13.3	87	14.3
Rs. 3,001 – Rs. 4,000	11	5.2	56	14.0	67	11.0
Rs. 4,001 – Rs. 5,000	9	4.3	38	9.5	47	7.7
Rs. 5,001 – Rs. 10,000	18	8.6	73	18.3	91	14.9
More than Rs 10,000	3	1.43	54	13.5	57	9.3
Total	210	100	400	100	610	100
Have other jobs besides sex work (N=610)						
Yes	117	55.7	176	44.0	293	48.0
No	93	44.3	224	56.0	317	52.0
Total	210	100	400	100	610	100
Types of job besides sex work (N=293)						
Waitress	1	0.9	10	5.7	11	3.8
Domestic/restaurant helper	8	6.8	7	4.0	15	5.1
Wage laborer	45	38.5	66	37.5	111	37.9
Owner of restaurant/ Bhatti Pasal	4	3.4	17	9.7	21	7.2
Retail shops/business	20	17.1	17	9.7	37	12.6
Knitting/weaving	9	7.7	18	10.2	27	9.2
Peer communicator in NGO	1	0.9	5	2.8	6	2.0
Service (accountant, peon, teacher)	5	4.3	3	1.7	8	2.7
Agriculture	18	15.4	14	8.0	32	10.9
Beauty parlour	1	0.9	6	3.4	7	2.4
House maid	0	0.0	2	1.1	2	0.7
Labor	1	0.9	2	1.1	3	1.0
Others	4	23	9	5.2	13	4.5
Total	117	100	176	100	293	100
Average weekly income from other sources besides sex work (N=610)						
0 (No other source)	93	44.3	224	56.0	317	52.0
Up to Rs. 500	32	15.2	50	12.5	82	13.4
Rs. 501- Rs. 1,000	29	13.8	42	10.5	71	11.6
Rs. 1001 – Rs. 1,500	15	7.1	22	5.5	37	6.1
Rs. 1501 – Rs. 2,000	13	6.2	15	3.8	28	4.6
Rs. 2,001 and above	28	13.3	47	11.8	75	12.3
Total	210	100	400	100	610	100

Majority of sex workers who had other jobs had been working as wage labor (38.5% in 6 and 37.5% in 16 districts) (Table 3.4.6). Among the surveyed FSWs, the average weekly income from the other jobs was Rs. 1,917 ranging from NRs. 100-40,000.

### 3.4.7 Knowledge of Condoms

HIV and AIDS awareness and prevention campaigns focus on promoting condom use by raising awareness and facilitating easy access to free condoms. Different types of information, education and communication (IEC) materials are distributed and awareness messages are aired through radio, television, and other media.

Nearly two third of the respondents (61.9% in 6 and 58.3% in 16 districts) had not ever heard of female condoms. Non-Government Organization staffs (48.8% in 6 and 45.5% in 16 districts), Friends or relatives or neighbors (17.5% in 6 and 8.4% in 16 districts) and Health Workers or Volunteers (16.3 % in 6 and 9% in 16 districts) were the most popular sources of information for female condoms. Other sources of information on female condoms reported by the respondents have been listed in Table 3.4.7. On the whole, 4.4% (6.3% in 6 and 3.6% in 16 districts) had ever used female condom and had considered female condoms to be useful (Table 3.4.7)

**Table 3.4.7: Sources of Knowledge of Condom among Female Sex Workers**

Source of Knowledge of Condoms	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Heard about female condom (N=610)						
Yes	80	38.1	167	41.8	247	40.5
No	130	61.9	233	58.3	363	59.5
Total	210	100	400	100	610	100
Source of information about female condom*	N=80	%	N=167	%	N=247	%
TV	5	6.3	8	4.8	13	5.3
Pharmacy	4	5.0	3	1.8	7	2.8
Health Post/health center	5	6.3	6	3.6	11	4.5
Hospital	5	6.3	10	6.0	15	6.1
Health workers/volunteers	13	16.3	15	9.0	28	11.3
Friends/relatives/neighbors	14	17.5	14	8.4	28	11.3
NGO staff	49	48.8	97	45.5	146	59.3
Newspapers/posters	4	5.0	6	3.6	10	4.0
Sign board/Billboard	2	2.5	3	1.8	5	2.0
From client	1	1.3	1	0.6	2	0.8
Others	6	7.5	26	15.6	32	13.0
Don't know	2	2.5	23	13.8	25	10.1
Ever used female condom (N=247)						
Yes	5	6.3	6	3.6	11	4.5
No	75	93.8	161	96.4	236	95.5
Total	80	100	167	100	247	100
Respondents consider female condoms as useful (N=247)						
Yes	5	6.3	80	47.9	85	34.4
No	75	93.8	87	52.1	162	65.6



Source of Knowledge of Condoms	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	80	100	167	100	247	100

\*Note: Multiple Responses Allowed

### 3.4.8 Condom Use with Different Partners

The FSWs basically entertained three different types of sex partners: (i) paying partners, i.e., those who pay them in cash or buy gifts for sex (ii) non-paying regular partners, i.e. those who do not pay them for sex i.e. their husbands, boyfriends, and cohabiting male partners (iii) regular partners, i.e. those who visit them on a regular basis. In addition, some FSWs had neither other sex partners who were neither their clients nor regular partners, and they have been included in this survey as “other” sex partners. The following sections describe their condom use patterns with these different sex partners.

#### 3.4.8.1 Condom use with clients and non-paying regular sex partners

In general, three quarter (75.5%) of the respondents had used a condom during their last sexual contact with their clients. Relatively, respondents who had used a condom during their last sexual contact were more (80.3%) in 16 districts than those (66.7%) in 6 districts. In most cases, the respondents themselves (51.4% in 6 and 77.9% in 16 districts) had suggested using condoms to these clients (Table 3.4.8).

Overall, 59% of the respondents had used condoms consistently with their clients in the past year with more respondents (63.3%) in 16 districts compared to those (51%) in 6 districts. Likewise, 7.3 % reported of never used condom in general with major proportion (13.8%) in 6 districts than in (4%) 16 districts.

More than half (55.2% in 6 and 61.8% in 16 districts) of the sex workers had clients visiting them on a regular basis and majority (55.2% in 6 and 55.5% in 16 districts) of them reported that they consistently used condoms with the regular client in the past year. Similarly, high proportion (68.1% in 6 and 85.7% in 16 districts) of respondents had used condom during the sexual intercourse with the most recent regular client. A majority of these respondents (60.8% in 6 and 83% in 16 districts) had themselves suggested using a condom to their regular clients during their most recent sexual intercourse with them.

Table 3.4.8 demonstrates the use of condoms by FSWs with their husband or male partner in the last 6 months. Around 64% (69% in 6 and 60.8% in 16 districts) of FSWs were engaged in sexual acts with husband or boyfriend in the last 6 months.

**Table 3.4.8: Condom Use with Clients and Non-paying regular Sex Partners**

Condom Use	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Use of condom with most recent client (N=610)						
Yes	140	66.7	321	80.3	461	75.6
No	70	33.3	79	19.8	149	24.4
Total	210	100	400	100	610	100

Condom Use	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Condom use suggested by (N=461)						
Respondent (Myself)	72	51.4	250	77.9	322	69.8
Sex partner	67	47.9	68	21.2	135	29.3
Don't know	1	0.7	3	0.9	4	0.9
Total	140	100	321	100	461	100
Use of condom with the client in the past year (N=610)						
Every time	107	51	253	63.3	360	59
Most of the time	18	8.6	84	21	102	16.7
Sometimes	40	19	35	8.8	75	12.3
Rarely	16	7.6	12	3	28	4.6
Never	29	13.8	16	4	45	7.4
Total	210	100	400	100	610	100
Have regular client in the past year (N=610)						
Yes	116	55.2	247	61.8	363	59.5
No	94	44.8	153	38.3	247	40.5
Total	210	100	400	100	610	100
Use of condom with most recent regular client (N=363)						
Yes	79	68.1	187	75.7	266	73.3
No	37	31.9	60	24.3	97	26.7
Total	116	100	247	100	363	100
Condom use suggested by (N=266)						
(Myself)	48	60.8	155	82.9	203	76.3
Sex partner	31	39.2	32	17.1	63	23.7
Total	79	100	187	100	266	100
Use of condom with regular clients in the past year (N=363)						
Every time	64	55.2	137	55.5	201	55.4
Most of the time	14	12.1	57	23.1	71	19.6
Sometimes	13	11.2	26	10.5	39	10.7
Rarely	7	6.0	17	6.9	24	6.6
Never	18	15.5	10	4.0	28	7.7
Total	116	100	247	100	363	100
Condom use suggested by (N=266)						
(Myself)	48	60.8	155	82.9	203	76.3
Sex partner	31	39.2	32	17.1	63	23.7
Total	79	100	187	100	266	100
Sexual contact with husband or boyfriend in last 6 month (N=610)						
Yes	145	69.0	243	60.8	388	63.6
No	65	31.0	157	39.3	222	36.4

Condom Use	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	210	100	400	100	610	100
Frequency of sexual contact with husband or boyfriend in the past one-month (N=388)						
No sexual contact	5	3.4	7	2.9	12	3.1
1-2 times	9	6.2	21	8.6	30	7.7
3-6 times	27	18.6	55	22.6	82	21.1
7-10 times	37	25.5	33	13.6	70	18.0
11-15 times	30	20.7	87	35.8	117	30.2
More than 15 times	37	25.5	40	16.5	77	19.8
Total	145	100	243	100	388	100
Used condom in the last sex with husband/living in male partner (N=388)						
Yes	53	36.6	52	21.4	105	27.1
No	92	63.4	191	78.6	283	72.9
Total	145	100	243	100	388	100
Person who suggested condom use at the time of last sex with husband/male partner						
My Self	28	52.8	44	84.6	72	68.6
Sex partner	25	47.2	8	15.4	33	31.4
Total	53	100	52	100	105	100

The frequency of sexual contact with their spouse (husband or male partner) was found to be high (20.7% in 6 and 35.8% in 16 districts) in proportion for 11 to 15 times in the preceding month followed by 3 to 6 times (18.6% in 6 and 22.6% in 16 districts) and more than 15 times per month (25.5% in 6 and 16.3% in 16 districts) of respondents.

Major proportion (63.5% in 6 and 78.6% in 16 districts) of them had not used a condom during their last sexual contact with their husband or living male partner. Most (52.8% in 6 and 84.6% in 16 districts) of them who had used a condom during the last sexual contact had themselves suggested using condoms (Table 3.4.8)

More than 60% (69% in 6 and 60.8% in 16 districts) of the respondents reported having non-paying regular sex partners within the 6 months preceding the survey. One third (33.8% in 6 and 32.3% in 16 districts) of those respondents had never used condoms while around 18% (18.1% in 6 and 18.5% in 16 districts) had consistently used condom during their most recent sexual contact with their non-paying partners in the year preceding the survey.

### 3.4.9 Condom Use with Partners other than Clients, Husband and Male Friends

Table 3.4.9 demonstrates the use of condoms with other males who were other than the participants clients, friends, and their spouses but with whom they met once in a while. Around 30% (24.8% in 6 and 36.8% in 16 districts) of the respondents were engaged in sexual acts with such people in the past year. More than two third (75% in 6 and 72.1% in 16 districts) of them had used a condom during their last sexual contact with such people. Most (84.6% in 6 and 70.8% in 16 districts) of those who had used a condom had themselves suggested for using condoms during their last sexual contact. More than 60% (61.7% in 6 and 67.3% in 16 districts) of them had

consistently used condom during the sexual intercourse with such partners in the year preceding the survey.

**Table 3.4.9: Condom Use with Partners Other than Clients, Husband and Male Friends**

Condom Use by Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Have sex with partner other than client, husband, male friend in the past year (N=610)						
Yes	52	24.8	147	36.8	199	32.6
No	158	75.2	253	63.3	411	67.4
Total	210	1000	400	100	610	100
Use of condom with partner other than client, husband, male friend in the last Sex (N=199)						
Yes	39	75.0	106	72.1	145	72.9
No	13	25.0	41	27.9	54	27.1
Total	52	100	147	100	199	100
Condom use suggested by (N=145)						
Respondent	33	84.6	75	70.8	108	74.5
Sex partner	6	15.4	31	29.2	37	25.5
Total	39	100	106	100	145	100
Use of condom with partner other than client, husband, male friend in the Past Year (N=199)						
Every time	32	61.5	99	67.3	131	65.8
Most of the time	5	9.6	23	15.6	28	14.1
Sometimes	5	9.6	6	4.1	11	5.5
Rarely	6	11.5	12	8.2	18	9.12
Never	4	7.7	7	4.8	11	5.5
Total	52	100	147	100	199	100

### 3.4.10 Availability of Condoms and Their Brand Names

When asked if they usually carried condoms with them, more than 60% (67.1% in 6 and 65.5% in 16 districts) of respondents stated of not doing so. However, among those who carried condoms, more than half (60.8 %in 6 and 54.3% in 16 districts) said they usually carry condoms followed by 3 to 5 condoms (18.84% in 6 and 26.81% in 16 districts) during the time of interview (Refer table 3.4.10). In order to assess their accessibility to condoms, the respondents were asked how long it took for them to get a condom from the nearest source. Around 40% (39.5% in 6 and 38.5% in 16 districts) of the sex workers said that they could get condoms within five minutes from their place of work, while only 5.6% (6.7% in 6 and 5.0% in 16 districts) could get them in 20 or more than 20 minutes. Additionally, nearly half (48.1% in 6 and 49.3% in 16 districts) of the sex workers reported that they could get condoms from pharmacies, while about 45% (41.9% in 6 and 46.0% in 16 districts) said that they could have condoms from Health post/health centres. Nearly one third of the respondents mentioned that the condoms were available from NGO/health workers/volunteers. (Refer table 3.4.10).

**Table 3.4.10: Availability of Condoms and Brand Names of Widely Used Condoms**

Condom Acquisition	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Carry condom usually (N=610)						
Yes	69	32.9	138	34.5	207	33.9
No	141	67.1	262	65.5	403	66.1
Total	210	100	400	100	610	100
No. of condoms carried (N=207)						
1	42	60.9	75	54.3	117	56.5
2	11	15.9	15	10.9	26	12.6
3 – 5	13	18.8	37	26.8	50	24.2
6 – 10	1	1.4	9	6.5	10	4.8
More than 10	2	2.9	2	1.4	4	1.9
Total	69	100	138	100	207	100
Time needed to obtain condoms from nearest place (N=610)						
Condom available at working place	38	18.1	50	12.5	88	14.4
Up to 5 minutes	83	39.5	154	38.5	237	38.9
6 – 10 minutes	30	14.3	85	21.3	115	18.9
11 – 15 minutes	17	8.1	34	8.5	51	8.4
16 – 20 minutes	15	7.1	29	7.3	44	7.2
21 and more minutes	14	6.7	20	5.0	34	5.6
Don't know	13	6.2	28	7.0	41	6.7
Total	210	100	400	100	610	100
Places where condoms are available*	N=210	%	N=400	%	N=610	%
Health post/ health center	88	41.9	184	46.0	272	44.6
Pharmacy	101	48.1	197	49.3	298	48.9
General retail store ( <i>Kirana Pasal</i> )	6	2.9	20	5.0	26	4.3
Private clinic	20	9.5	41	10.3	61	10.0
Paan Shop	33	15.7	77	19.3	110	18.0
Hospital	44	21.0	83	20.8	127	20.8
FPAN clinic	19	9.0	48	12.0	67	11.0
Peer/friends	22	10.5	58	14.5	80	13.1
NGO/health workers/volunteers	74	35.2	129	32.3	203	33.3
Hotel/Lodge	19	9.0	54	13.5	73	12.0
Client/other sex partner	30	14.3	49	12.3	79	13.0
Massage parlor	11	5.2	23	5.8	34	5.6

**Table 3.4.10: Availability of Condoms and Brand Names of Widely Used Condoms**

Condom Acquisition	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
<i>Bhatti pasal</i>	37	17.6	65	16.3	102	16.7
Others	20	9.5	51	12.8	71	11.6
Don't know	14	6.7	24	6.0	38	6.2
Brand names of mostly used	N=210	%	N=400	%	N=610	%
Never used	47	22.4	102	25.5	149	24.4
Number One	37	17.6	85	21.3	122	20.0
<i>Dhaal</i>	77	36.7	115	28.8	192	31.5
Panther	52	24.8	104	26.0	156	25.6
<i>Kamasutra</i>	32	15.2	61	15.3	93	15.2
<i>Jodi</i>	33	15.7	79	19.8	112	18.4
Black cobra	108	51.4	225	56.3	333	54.6
Brands not known	35	16.7	50	12.5	85	13.9
<i>Lili</i>	34	16.2	69	17.3	103	16.9
Vega	27	12.9	49	12.3	76	12.5
Skin less	7	3.3	26	6.5	33	5.4
Playvet	12	5.7	16	4.0	28	4.6
Haven't used in past 12 months	14	6.7	30	7.5	44	7.2
Others	21	10.0	53	13.3	74	12.1

\*Note: Multiple Responses Allowed

More than half (51.4% in 6 and 56.3% in 16 districts) of FSWs reported of using Black Cobra brand followed by Dhaal (36.7% in 6 and 28.8% in 16 districts), Panther (24.8% in 6 and 26% in 16 districts) and Number One (17.6% in 6 and 21.3% in 16 districts) representing some of the common brands of condoms (Table 3.4.10).

### 3.4.11 Modes of Obtaining Condoms

Table 3.4.11 classifies the modes of obtaining condoms by the respondents. More than half of FSWs (56.2% in 6 and 59% in 16 districts) reported of receiving the condoms free of cost while 31.4% in 6 and 23.5% of FSWs in 16 districts however purchased the condoms. Nearly 7% (6.2% in 6 and 7% in 16 districts) of FSWs reported that they had never used a condom.

Table 3.4.11 shows the places from where FSWs usually obtained free condoms or purchased them. Among those respondents who reported obtaining free condoms, majority (57.3% in 6 and 50% in 16 districts) said that they accessed them from NGOs or Health Workers or Volunteers, followed by health post or health centre (16% in 6 and 21.9% in 16 districts). Other reported sources of free condoms have been listed in Table 3.4.11.

**Table 3.4.11 Distribution of FSWs by modes and places for obtaining condoms**

Condom Acquisition	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Mode of obtaining condoms (N=610)						
Always get free of cost	118	56.2	236	59.0	354	58.0
Purchase	66	31.4	94	23.5	160	26.2
Obtain both ways	13	6.2	42	10.5	55	9.0
Condom never used	13	6.2	28	7.0	41	6.7
Total	210	100	400	100	610	100
Free condoms usually obtained from*	N=131	%	N=278	%	N=409	%
Health post/health centre	21	16.0	61	21.9	82	20.0
Hospital	2	1.5	2	0.7	4	1.0
FPAN clinics	4	3.1	6	2.2	10	2.4
Peers/friends	2	1.5	2	0.7	4	1.0
Community events	0	0.0	1	0.4	1	0.2
NGO/health workers/volunteers	75	57.3	139	50.0	214	52.3
Client/other sex partner	13	9.9	46	16.5	59	14.4
Massage parlor	5	3.8	15	5.4	20	4.9
Hotel/lodge/restaurant/ <i>bhatti</i>	21	16.0	38	13.7	59	14.4
<i>Bhatti Pasal</i>	0	0.0	3	1.1	3	0.7
Others specify	23	17.6	36	12.9	59	14.4
Most convenient place to obtain free	N=131	%	N=278	%	N=409	%
Health post/health centre	35	26.7	68	24.5	103	25.2
Hospital	28	21.4	58	20.9	86	21.0
FPAN clinics	53	40.5	97	34.9	150	36.7
Peers/friends	52	39.7	113	40.6	165	40.3
Community events	34	26.0	76	27.3	110	26.9
NGO/health workers/volunteers	66	50.4	135	48.6	201	49.1
Client/other sex partner	52	39.7	109	39.2	161	39.4
Massage parlor	5	3.8	8	2.9	13	3.2
Hotel/lodge/restaurant/ <i>bhatti</i>	8	6.1	34	12.2	42	10.3
<i>Bhatti Pasal</i>	4	3.1	4	1.4	8	2.0
Others	14	10.7	22	7.9	36	8.8
Respondent received condom in the past one-year (N=409)						
Yes (free)	63	48.1	123	44.2	186	45.5
Yes (paid)	37	28.2	119	42.8	156	38.1
Not given	31	23.7	36	12.9	67	16.4
Total	131	100	278	100	409	100
Place of purchasing condom*	N=79	%	N=136	%	N=215	%
Pharmacy	40	50.6	66	48.5	106	49.3
General retail store ( <i>KiranaPasal</i> )	16	20.3	8	5.9	24	11.2

Private clinic	34	43.0	53	39.0	87	40.5
Paan shop	23	29.1	65	47.8	88	40.9
Hotel/Lodge	2	2.5	4	2.9	6	2.8
Others	11	13.9	50	36.8	61	28.4
Most convenient place to purchase condom*	N=79	%	N=136	%	N=215	%
Pharmacy	29	36.7	52	38.2	81	37.7
General retail store ( <i>Kirana Pasal</i> )	9	11.4	20	14.7	29	13.5
Private clinic	48	60.8	29	21.3	77	35.8
Paan shop	79	100.0	128	94.1	207	96.3
Hotel/Lodge	0	0.0	1	0.7	1	0.5
Others	0	0.0	0	0.0	0	0.0

\*Note: Multiple Responses Allowed

Almost half (50.4% in 6 and 48.6% in 16 districts) of the respondents felt it was convenient to have free condoms from NGOs or health workers or volunteers, while about 40 % (39.7% in 6 and 40.7% in 16 districts) preferred to receive condoms from Peers/Friends followed by FPAN Clinics, Community Events, Health post/health centre and Hospital (Please refer to the table 3.4.11 for other convenient places to obtain free condom). Among those sex workers who purchased condoms all the time or occasionally, majority (50.6% in 6 and 48.5% in 16 districts) usually bought them from pharmacies. Hotels or lodges were found to be the place from where few FSWs (2.5% in 6 and 2.9% in 16 districts) had purchased condoms.

When asked about their opinion on the most convenient places for them to purchase condoms, the majority of the respondents (96.2%) said they preferred to buy condoms from a Paan Shop followed by Pharmacy (37.6%), private clinic (35.8%) and Retail stores (13.4%) (Table 3.4.11).

### 3.4.12 Use of Alcohol and Drugs by FSWs and Clients

Almost half (55.2% in 6 and 47.8% in 16 districts) of the respondents reported that they had never consumed alcohol. Around a quarter (24.8% in 6 and 28.8% in 16 districts) had consumed alcohol 2 to 3 times per week while those who consumed alcohol on a daily basis were found to be 5.2 % in 6 and 11 % in 16 districts (Table 3.4.12). Overall, 3.3 % of total FSWs were reported to have tried any kind of drugs during the month preceding the survey.

**Table 3.4.12 Distribution of Female Sex Workers by Use of Alcohol/Drugs**

Consumption of Alcohol and Drugs	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Consumption of alcohol in the past month (N=610)						
On a daily basis	12	5.7	43	10.8	55	9.0
2-3 times a week	52	24.8	115	28.8	167	27.4
Once a week	10	4.8	24	6.0	34	5.6
Less than once a week	20	9.5	25	6.3	45	7.4
Never	116	55.2	191	47.8	307	50.3
Don't know	1	0.5	1	0.3	2	0.3
Total	210	100	400	100	610	100
Tried any type of drugs in the past month (N=610)						
Yes	3	1.4	17	4.3	20	3.3
No	195	92.9	366	91.5	561	92.0



Consumption of Alcohol and Drugs	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Don't know	12	5.7	17	4.3	29	4.8
Total	210	100	400	100	610	100
Know injecting drug users (IDUs) personally (N=1)						
Yes	0	0	1	100	1	100
Total	0	0	1	100	1	100
Relationship with known IDUs*(N=2)						
Friend	0	0	1	100	1	100
Neighbor/local boys/ no relative	0	0	1	100	1	100
Total	0		2		2	
Knowledge of sex partners being IDUs (N=1)						
Yes	0	0	0	0	0	0
No	0	0	1	100	1	100
Total	0	0	1	100	1	100
Ever exchanged sex for drugs (N=1)						
Yes	0	0	0	0	0	0
No	0	0	1	100	1	100
Total	0	0	1	100	1	100
Ever exchanged sex for money to buy drugs (N=1)						
Yes	0	0	0	0	0	0
No	0	0	1	100	1	100
Total	0	0	1	100	1	100

\*Note: Multiple Responses Allowed

### 3.4.13 Injecting History and Practices among Female Sex Workers

This round of IBBS survey had additional behavioral questions for those FSWs who had previously injected drugs. In 22 Terai Highway district 6.6% respondents (6.2% in 6 and 6.8% in 16 districts) were found to have ever injected drugs while nearly half (53.8% in 6 and 48.1% in 16 districts) of them had injected drugs in last 12 month preceding the survey. Among 6.6% FSWs who ever injected drugs, around 40% (38.5% in 6 and 40.7% in 16 districts) of them were aged 15 to 19 years when they had injected drugs for the first time. Further, about 30% (38.5% in 6 and 29.6% in 16 districts) of FSWs injected drugs during the age of 20-24 years for the first time.

The mean duration of drug injection by FSWs was 1.9 years. Among those respondents who had ever injected drugs (N=40) 15% of the respondents had injected drugs within a last month preceding the survey on the whole. Comparatively, more (28.8%) respondents in 6 districts had injected drugs in preceding month than those (7.7%) in 16 districts. (Table 3.4.13)

**Table 3.4.13: Injecting History and Practices among Female Sex Workers**

Drug injecting History	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Ever injected drugs (N=610)						
Yes	12	5.7	28	7	40	6.6
No	191	91	360	90	551	90.3
Don't know	7	3.3	12	3.0	19	3.1
Total	210	100	400	100	610	100

Drug injecting History	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Injected in past 12 months(N=40)						
Yes	7	53.8	13	48.1	20	50.0
No	6	46.2	14	51.9	20	50.0
Total	13	100	27	100	40	100
Age of FSW when injected drugs first time (N=40)						
Less than 15	1	7.7	4	14.8	5	12.5
15 – 19	5	38.5	11	40.7	16	40.0
20 – 24	5	38.5	8	29.6	13	32.5
25-29	1	7.7	0	0.0	1	2.5
30-34	0	0.0	1	3.7	1	2.5
35 and above	1	7.7	2	7.4	3	7.5
Don't know	0	0.0	1	3.7	1	2.5
Total	13	100	27	100	40	100
Time when respondents started injecting drugs (N=40)						
Less than one year	0	0.0	0	0.0	0	0.0
1-2 Yrs	13	100	27	100	40	100
Mean(SD) Years	1.9(0.3)		1.8(0.4)		1.9(0.4)	

**Table 3.4.13: Injecting History and Practices among Female Sex Workers**

Drug injecting History	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	13	100	27	100	40	100
Respondents had injected drugs in the past one-month (N=20)						
Yes	2	28.6	1	7.7	3	15.0
No	5	71.4	12	92.3	17	85.0
Total	7	100	13	100	20	100
Respondent had injected drugs in the past one-week (N=3)						
Yes	0	0	1	100	1	33.3
No	2	100	0	0	2	66.7
Total	2	100	1	100	3	100
Respondents had used a needle or syringe that had previously been used by someone else in the last injection (N=1)						
Yes	0	0	1	100	1	100
Total	0	0	1	100	1	100
Frequency of use of needle or syringe that had previously been used by someone else in the past one month(N=1)						
Sometimes	0	0	1	100	1	100

Drug injecting History	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	0	0	1	100	1	100
Respondents usually obtained syringe/needle from(N=1)						
Use a new needle/syringe given by	0	0	1	100	1	100
Total	0	0	1	100	1	100
Used non-sterile needle/syringe in the last month (N=1)						
No	0	0	1	100	1	100
Total	0	0	1	100	1	100
Switching from injecting to oral drugs within the last month(N=1)						
Yes	0	0	1	100	1	100
Total	0	0	1	100	1	100

### 3.5 Knowledge of HIV and STI

HIV and AIDS awareness along with knowledge about STIs is crucial to reduce the risk of HIV transmission. This section deals with the level of knowledge among FSWs regarding HIV and AIDS along with STIs.

#### 3.5.1 Source of knowledge of HIV and AIDS

All of the respondents in 6 districts had heard about HIV and AIDS while in case of 16 districts, 11% of FSWs was found not heard about HIV and AIDS. The most common sources of information on HIV and AIDS were friends or relatives (80.5% in 6 and 78.9% in 16 districts), radio (87.1% in 6 and 68% in 16 districts), television (77.1% in 6 and 59.6% in 16 districts), health workers, NGO staffs, pamphlets. (Refer table 3.5.1). A considerable proportion of the respondents (51.4%) in 16 districts had also heard about HIV and AIDS from their work place in comparison to 6 (18.1%) districts (Table 3.5.1).

**Table 3.5.1: Sources of Knowledge of HIV and AIDS among Female Sex Workers**

Statements related to HIV and AIDS	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Ever heard of HIV and AIDS (N=610)						
Yes	210	100.0	356	89.0	566	92.8
No	0	0.0	44	11.0	44	7.2
Total	210	100	400	100	610	100
HIV and AIDS information sources*	N=210	%	N=356	%	N=566	%
Radio	183	87.1	242	68.0	425	75.1
Health workers	169	80.5	193	54.2	362	64.0
Friends/Relatives	169	80.5	281	78.9	450	79.5
Television	162	77.1	212	59.6	374	66.1
Community workers	79	37.6	84	23.6	163	28.8
Pamphlets/Posters	74	35.2	141	39.6	215	38.0

Statements related to HIV and AIDS	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
School/teacher	61	29.0	101	28.4	162	28.6
NGO	57	27.1	62	17.4	119	21.0
Community event/training	53	25.2	86	24.2	139	24.6
Comic book	48	22.9	19	5.3	67	11.8
Work Place	38	18.1	183	51.4	221	39.0
Video van	29	13.8	2	0.6	31	5.5
Street drama	28	13.3	89	25.0	117	20.7
Bill Board	27	12.9	20	5.6	47	8.3
Newspaper	0	0.0	42	11.8	42	7.4
Cinema Hall	0	0.0	47	13.2	47	8.3

\*Note: Multiple Responses Allowed.

### 3.5.2 FSW's Knowledge on Major Ways to Avoid HIV

Table 3.5.2 further reflects the comprehensive awareness of HIV and AIDS among the respondents. The proportion of sex workers reporting to be aware of (A) (abstinence from sex), (B) (being faithful to one partner or avoiding multiple sex partners), and (C) (consistent condom use or use of a condom during every sex act) as HIV preventive measures were 62.9%, 59.9%, and 61.8% respectively. Remarkable differences among group of districts were observed (refer table 3.5.2).

Overall, 37.6% of the respondents correctly identified all three (A), (B), and (C) as HIV preventive measures. Relatively, respondents in 16 districts (50.8%) were found likely to know all three A, B and C as HIV preventive measures compared to those (15.1%) in 6 districts. Additionally, 67.8 % knew that a healthy looking person can be infected with HIV (D), 53.4 % of them identified that a person cannot get HIV from a mosquito bite (E), and 71.7 % knew that one cannot get HIV by sharing a meal with an HIV-infected person (F). For details refer table 3.5.2) Overall, only 20% (13.8% in 6 districts and 23.6% in 16 districts) of the respondents were aware of all the five major indicators i.e. BCDEF.

**Table 3.5.2: Knowledge of HIV and AIDS among Female Sex Workers**

Statements related to HIV and AIDS	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Comprehensive Knowledge Indicators*	N=210	%	N=356	%	N=566	%
A. Can protect themselves through abstinence from sexual contact	103	49.0	253	71.1	356	62.9
B. Can protect themselves through monogamous sexual contact	90	42.9	249	69.9	339	59.9
C. Can protect themselves through condom use every time during sex	88	41.9	262	73.6	350	61.8
D. A healthy-looking person can be infected with HIV	137	65.2	247	69.4	384	67.8
E. A person cannot get the HIV virus from mosquito bite	118	56.2	184	51.7	302	53.4

F. Cannot get HIV by sharing a meal with an HIV infected person	151	71.9	255	71.6	406	71.7
Knowledge of all the three – ABC	35	16.7	178	44.5	213	34.9
Knowledge of all five major indicators – BCDEF	27	13.8	86	23.6	113	20.0

\*Multiple Responses Allowed

### 3.5.3 Knowledge on Major Ways of Transmitting HIV

Further, the respondents were asked if they knew any person infected with HIV or who had died of AIDS. Around 36% (44% in 6 and 32.3% in 16 districts) of the respondents answered affirmatively. Among them, 13.5% had an HIV infected close friend while 11.3% had a close relative infected of HIV or had died due to AIDS. (Table 3.5.3) The respondents' understanding of HIV and AIDS and its different modes of HIV transmission were further tested with the help of certain questions related to the topic (Table 3.5.3). A larger proportion (91% in 6 and 97.2% in 16 districts) of respondents perceived that HIV could be transmitted through the transfusion of blood from an infected person to another; through the use of pre-used needles/syringes (91% in 6 and 93.8% in 16 districts) and can also be transmitted from HIV positive mother to her unborn child (68.1% in 6 and 75.6% in 16 districts). Almost 83% (81.9% in 6 and 83.7% in 16 districts) of them also mentioned that holding an HIV-infected person's hand did not pose a risk of HIV transmission. Among those sex workers who said that an infected mother could transmit the virus to her unborn child, were asked of awareness on measures to reduce mother-to-child HIV transmission, 35.3% of them mentioned that they were unaware of any such measures that could minimize such risk while a one-third (39.5% in 6 and 29.2% in 16 districts) of them stated that the risk of transmission can be reduced by abortion followed by an intake of medicine (33.3% in 6 and 27.2% in 16 districts) as a measure for reducing the risk. (Table 3.5.3).

**Table 3.5.3: Female Sex Workers' Knowledge on People Living with HIV and AIDS and Other Ways of HIV Transmission**

Statements Related to HIV and AIDS	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Knowledge of anyone who is infected with HIV or who has died of AIDS (N=610)						
Yes	93	44.3	129	32.3	222	36.4
No	117	55.7	227	56.8	344	56.4
Never heard of HIV and AIDS	0	0.0	44	11.0	44	7.2
Total	210	100	400	100	610	100
Have a close relative or close friend who is infected with HIV or has died of AIDS (N=566)						
Yes, a close relative	7	7.5	18	14.0	25	11.3
Yes, a close friend	12	12.9	18	14.0	30	13.5
No relation	74	79.6	93	72.1	167	75.2
Total	93	100	129	100	222	100
Awareness on HIV and AIDS*	N=210	%	N=3	%	N=56	%
An HIV positive woman can transmit the virus to her new-born child through breastfeeding	142	67.6	253	71.1	395	69.8

A person cannot get HIV by holding an HIV infected person's hand	172	81.9	298	83.7	470	83.0
A person can get HIV, by using previously used needle/syringe	191	91.0	334	93.8	525	92.8

**Table 3.5.3: Female Sex Workers' Knowledge on People Living with HIV and AIDS and Other Ways of HIV Transmission**

Statements Related to HIV and AIDS	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Blood transfusion from an infected person to the other transmit HIV	193	91.9	346	97.2	539	95.2
An HIV positive pregnant woman can transmit the virus to her unborn child	143	68.1	269	75.6	412	72.8
Ways by which a pregnant woman can reduce the risk of transmission of HIV to her unborn child (N=566)						
Take medicine	70	33.3	97	27.2	167	29.5
Do Abortion	83	39.5	104	29.2	187	33.0
Don't know	56	26.7	144	40.4	200	35.3
Other	1	0.5	11	3.1	12	2.1
Total	210	100	356	100	566	100

\* Note: Multiple Responses Allowed

### 3.5.4 Perception of HIV Test

Table 3.5.4 summarizes the FSWs according to their perceptions about the HIV test. Most (74.3% in 6 and 60.3% in 16 districts) of the respondents stated that the confidential HIV test facility being available in the community and more than 80% (85.2% in 6 and 84.6% in 16 districts) of the respondents knew at least one such place where HIV testing could be done.

Additionally, more than half (64.8% in 6 and 54% in 16 districts) of the respondents had ever tested themselves for HIV. Among those ever tested for HIV, majority (98.5% in 6 and 97.2% in 16 districts) of the respondents received their test result. Most (98.5% in 6 and 87.5% in 16 districts) of them had taken up the test voluntarily while others had been asked to do the test. Of those who did not receive the test result, the prime reason to do so was either being afraid of the result or they did not consider it necessary (57.1%). Furthermore, among those ever tested for HIV (N=352), 78.8% of respondents received the result within a year preceding the survey in general.

**Table 3.5.4: FSWs' Knowledge of HIV and AIDS Testing Facilities and History of HIV Test**

HIV Testing behavior	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Confidential HIV test Facility available in the community (N=610)						
Yes	156	74.3	241	60.3	397	65.1
No	28	13.3	34	8.5	62	10.2
Don't know	26	12.4	81	20.3	107	17.5
Never heard about HIV	0	0.0	44	11.0	44	7.2

Total	210	100	400	100	610	100
Knowledge of HIV testing place (N=566)						
Yes	179	85.2	301	84.6	480	84.8
No	31	14.8	55	15.4	86	15.2
Total	210	100	356	100	566	100
Ever had an HIV test (N=610)						
Yes	136	64.8	216	54.0	352	57.7
No	43	20.5	85	21.3	128	21.0
Never heard about HIV	0	0.0	44	11.0	44	7.2
No knowledge of HIV testing place	31	14.8	55	13.8	86	14.1
Total	210	100	400	100	610	100
Voluntarily underwent the HIV test or because it was required (N=352)						
Voluntarily	134	98.5	189	87.5	323	91.8
Required	2	1.5	27	12.5	29	8.2
Total	136	100	216	100	352	100
Received HIV test result (N=352)						
Yes	134	98.5	210	97.2	344	97.7
No	2	1.5	6	2.8	8	2.3
Total	136	100	216	100	352	100
Reason for not receiving the test result (N=8)						
Forgot about it	0	0.0	2	33.3	2	25.0
Sure of not being infected	2	100.0	0	0.0	2	25.0
Others (afraid of result, felt unnecessary)	0	0.0	4	66.7	4	50.0
Total	2	100	6	100	8	100
Most recent HIV test (N=352)						
Within Last 12 months	108	79.4	169	78.2	277	78.7
Between 1-2 years	25	18.4	33	15.3	58	16.5
Between 2-4 years	3	2.2	14	6.5	17	4.8
Total	136	100	216	100	352	100
Respondents had heard, seen or read any other messages relating to STI/HIV and AIDS prevention or condom uses (N=610)						
Yes	154	73.3	256	64.0	410	67.2
No	56	26.7	144	36.0	200	32.8

**Table 3.5.4: FSWs' Knowledge of HIV and AIDS Testing Facilities and History of HIV Test**

HIV Testing behavior	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Total	210	100	400	100	610	100
Had HIV test in the past one-year (N=352)						
Yes	108	97.4	169	78.2	277	78.7

No	28	72.6	47	21.8	75	21.3
Total	136	100	216	100	352	100
Had received result of HIV test (N=309)						
Yes	122	96.8	177	96.7	299	96.8
No	4	3.2	6	3.3	10	3.2
Total	126	100	183	100	309	100

### 3.5.5 Access to HIV and AIDS Awareness Messages

One of the components of the HIV intervention programs in Nepal is to bring awareness about HIV and AIDS among high-risk groups of people. Various messages regarding the use of condoms for the prevention of HIV were aired on the radio and on television. Elevated hoarding boards and posters were also put up with pictorial and written messages at different places, including health posts and along the roadside. In an effort to review the coverage of such interventions, the sex workers were asked about their awareness of such information. Table 3.5.5 illustrates the messages and the responses provided by the female sex workers regarding their awareness of the messages. Some of the popular messages respondents were aware of - "Jhilkedai cha chaina condom" (40% in 6 and 41.5% in 16 districts) "Younrogra AIDS bata bachna lai rakhnu parchha sarbatra paine condom lai" (31.9% in 6 and 33 % in 16 districts) "Ramro sanga prayog gare jokhim huna dinna, bhar pardo chhu santosh dinchhu jhanjat manna hunna," ( 29.5% in 6 and 29.3% in 16 districts) "Condom Bata Suraksha, Youn Swasthya Ko Raksha" (20.5% in 6 and 27.8% in 16 districts)and "Maya Garau Sadbhav Badaun" (12.4% in 6 and 22.8% in 16 districts) respectively.

About 75% (78.6% in 6 and 72.8% in 16 districts) of the respondents reported that these messages had made them understand that the use of condoms prevents the transmission of HIV and AIDS, around 30% (29% in 6 and 29.5% in 16 districts) of them also said that these message had made them aware that about use of condom for family planning while nearly 7% (7.6% in 6 and 6.5% in 16 districts) mentioned that the awareness messages helped then to learn that use of condom prevents STIs transmission. (Table 3.5.5)

**Table 3.5.5: Seen/Heard HIV Awareness Message**

Messages about Condom and HIV and AIDS	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
Heard/seen/read the following messages*	N=210	%	N=400	%	N=610	%
Condom Bata Suraksha, Youn Swasthya Ko Raksha	43	20.5	111	27.8	154	25.2
HIV and AIDS Bare Aajai Dekhi Kura Garau	28	13.3	79	19.8	107	17.5
YounRog Ra AIDS Bata Bachnalai Rakhnu Parchha Sarbatra Paine Condom Lai	67	31.9	132	33.0	199	32.6
Ramro Sanga PrayogGareJokhim Huna Dinna Bharpardo Chhu Santosh Dinchhu	62	29.5	117	29.3	179	29.3
Maya Garaun Sadbhav Bandaun	26	12.4	91	22.8	117	19.2
Jhilke Dai Chha Chhaina Condom	84	40.0	166	41.5	250	41.0
EkApash Ka Kura	10	4.8	45	11.3	55	9.0
Des Pardes	15	7.1	71	17.8	86	14.1
Information derived from the message*	N=210	%	N=400	%	N=610	%
Use condom against AIDS	165	78.6	291	72.8	456	74.8
Use condom for family planning	61	29.0	119	29.8	180	29.5
Use condom against STI	16	7.6	26	6.5	42	6.9

\*Note: Multiple Responses Allowed



### 3.5.6 Knowledge of STIs, Experienced STI Symptoms and Treatment in the Past Year

Due to the nature of their work, sex workers are at risk of contracting STIs. Any program targeting this particular group should focus on STI awareness and treatment options. In order to assess the extent of the problem among the respondents, they were asked about their understanding of STIs and whether they had experienced any STI symptoms during the past year. For more than 60% (60.5% in 6 and 63.5% in 16 districts), STI meant white discharge or discharge of pus or dhatu (whitish bodily fluid) flow followed by itching in vagina (36.2% in 6 and 55% in 16 districts). Similarly, STI was understood as having symptoms such as blisters and ulcers around vagina, lower abdomen pain, syphilis, HIV and AIDS, burning sensation respectively (refer Table 3.5.6). Further, 72.8% of the respondents in 6 districts and 58.3% in 16 districts had experienced vaginal discharge followed by 45.6% in 6 and 57% in 16 districts considered STI as a genital ulcer or sore in the preceding year.

**Table 3.5.6: Knowledge of STI, Symptoms Experienced in the Past Year and Treatment Sought**

Understanding on STI, Reported STI Symptoms and Treatment	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
Understanding of STI*	N= 210	%	N= 400	%	N=610	%
White discharge/ discharge of pus/dhatu flow	127	60.5	254	63.5	381	62.5
Itching in vagina	76	36.2	220	55.0	296	48.5
Blisters and ulcers around vagina	63	30.0	126	31.5	189	31.0
Lower abdominal pain	41	19.5	132	33.0	173	28.4
Syphilis (Bhiringi)/Gonorrhoea	20	9.5	34	8.5	54	8.9
HIV AND AIDS	32	15.2	80	20.0	112	18.4
Burning sensation while urinating	16	7.6	30	7.5	46	7.5
Pain in vagina	19	9.0	19	4.8	38	6.2
Swelling of vagina	20	9.5	18	4.5	38	6.2
Unusual bleeding from vagina	17	8.1	32	8.0	49	8.0
Other (fever, weakness, body itching, weight loss)	37	17.6	76	19.0	113	18.5
Don't know	60	28.6	66	16.5	126	20.7
Types of STI symptoms experienced in the past year (N=277)						
Vaginal discharge	75	72.8	134	58.3	209	62.8
Lower abdominal Pain	39	37.9	72	31.3	111	33.3
Vaginal Itching	25	24.3	50	21.7	75	22.5
Dysuria	30	29.1	65	28.3	95	28.5
Painful sex	16	15.5	64	27.8	80	24.0
Genital ulcer or sore	47	45.6	131	57.0	178	53.5
Vaginal odor	14	13.6	73	31.7	87	26.1
Polyuria	4	3.9	23	10.0	27	8.1
Genital warts	58	56.3	101	43.9	159	47.7
Unusual vaginal bleeding	3	2.9	21	9.1	24	7.2
Other	1	1.0	2	0.9	3	0.9

Understanding on STI, Reported STI Symptoms and Treatment	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
Understanding of STI*	N= 210	%	N= 400	%	N=610	%
Any of the above symptoms	103	49.0	230	57.5	333	54.6
None of the above symptoms	107	51.0	170	42.5	277	45.4
Places visited for treatment of STI symptoms in the past year*						
Private Clinic	33	32.0	85	37.0	118	35.4
AMDA Clinic	4	3.9	10	4.3	14	4.2
NFCC	3	2.9	1	0.4	4	1.2
FPAN clinic	3	2.9	9	3.9	12	3.6

**Table 3.5.6: Knowledge of STI, Symptoms Experienced in the Past Year and Treatment Sought**

Understanding on STI, Reported STI Symptoms and Treatment	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
Health Post/Health Centre	17	16.5	5	2.2	22	6.6
Hospital	11	10.7	33	14.3	44	13.2
Pharmacy	5	4.9	6	2.6	11	3.3
Self-Medication	5	4.9	11	4.8	16	4.8
GWP	10	9.7	47	20.4	57	17.1
Watch	0	0.0	1	0.4	1	0.3
CAC	0	0.0	1	0.4	1	0.3
NSARC	4	3.9	3	1.3	7	2.1
Indreni Sewa Samaj	0	0.0	1	0.4	1	0.3
Other (Bijam, Thaigil, RDF, Sahabhagi etc.)	24	23.3	70	30.4	94	28.2
Received counseling to avoid the problem from the place of treatment (N=333)						
Yes	47	45.6	110	47.8	157	47.1
No	56	54.4	120	52.2	176	52.9
Total	103	100	230	100	333	100
Types of counseling received* (N=157)						
Take medicine regularly	5	10.6	25	22.7	30	19.2
Advised to come for regular check up	5	10.6	19	17.3	24	15.4
Use condom	23	48.9	79	71.8	102	65.4
Not to make sexual contact while using medicine	9	19.1	36	32.7	45	28.8
Reduce number of sexual partners	26	55.3	56	50.9	82	52.6
Others	1	2.1	6	5.5	7	4.5

\*Note: Multiple Responses Allowed

Those respondents who had encountered any of the STIs symptoms in the previous year were asked where they sought for treatment. The common places to seek for STIs treatment were private clinic (32% in 6 and 37% in 16 districts), GWP, and hospital respectively (refer Table 3.5.6). Among those who had seek treatment for STI, less than half (45.6% in 6 and 47.8% in 16 districts) of had received counselling to avoid their STI-related problems such as – “use condom-(48.9% in 6 and 71.8% in 16 districts) “reduce number of sex partners- (55.3% in 6 and 50.9% in 16 districts) “avoid sexual contact whilst in medication-(19.1% in 6 and 32.7% in 16 districts) accordingly. (Table 3.5.6).

### 3.5.7 Currently Experiencing STI Symptom/s and Treatment

Apart from their past year's experiences, the FSWs were also asked if they had been experiencing any STI symptoms at the time of the survey. Among those respondents (300/610) reported that they were experiencing at least one of the STI symptoms during the survey period. Some of the common symptoms reported by them were lower abdominal pain (27.2%), painful sex (24.9%), vaginal discharge (21%), vaginal itching (17.9%), dysuria (15.2%) respectively in general. Out of 300 respondents who had been experiencing at least one STI symptom during the survey period, only 11.4% in 6 district and 14.5% in 16 districts had sought treatment. Among the respondents who had sought for treatment, more than two-third (41.7% in 6 district and 36.2% in 16 districts) had waited for more than 4 weeks to seek treatment while (25% in 6 and 31% in 16 districts) of FSWs seeking treatment had received treatment within the week of symptom experience. Around a quarter (25.6%) of those respondents had sought treatment from private clinics followed by Hospital (20.7%), pharmacies (8.5%) taken as a whole. Furthermore, others constituted major (40.2%) portion of places visited for treatment by FSWs. More than 70% (70.8% in 6 district and 72.4% in 16 districts) of the respondents who had sought treatment for the STI symptoms experienced at the time of survey had received a prescription for medicine to be used. (Table 3.5.7)

**Table 3.5.7: Existing STI Symptoms, and Treatment**

Reported STI Symptoms and Treatment Among the Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N= 210	%	N= 400	%	N= 610	%
Types of STI symptoms experiencing currently (N=310)						
Vaginal discharge	49	23.3	79	19.8	128	21.0
Lower abdominal Pain	53	25.2	113	28.3	166	27.2
Painful sex	32	19.0	61	28	152	24.9
Vaginal itching	40	18.6	112	17.5	109	17.9
Dysuria	39	15.2	70	15.3	93	15.2
Vaginal odor	13	6.2	68	11.8	60	9.8
Polyuria	22	6.2	54	17	81	13.3
Genital ulcer or sore	13	10.5	47	13.5	76	12.5
Genital Warts	2	1.0	18	4.5	20	3.3
Unusual vaginal bleeding (discharge)	4	1.9	18	4.5	22	3.6
Other	4	1.9	8	2	12	2.0
Any of the above symptoms	87	41.4	213	53.3	300	49.2
None of the above symptoms	123	58.6	187	46.8	310	50.8
Total	210	100	400	100	610	100
Went for treatment for any of above symptoms (N=300)						
Yes	24	11.4	58	14.5	82	13.4
No	63	30.0	155	38.8	218	35.7
Total	87	41.4	213	53.3	300	49.2

**Table 3.5.7: Existing STI Symptoms, and Treatment**

Reported STI Symptoms and Treatment Among the Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N= 210	%	N= 400	%	N= 610	%
Duration, respondent waited to received treatment after experiencing STI symptoms (N=82)						
Less than a week	6	25.0	18	31.0	24	29.3
After one week	3	12.5	10	17.2	13	15.9

Reported STI Symptoms and Treatment Among the Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N= 210	%	N= 400	%	N= 610	%
After two weeks	2	8.3	2	3.4	4	4.9
After three weeks	3	12.5	7	12.1	10	12.2
After four weeks and ahead	10	41.7	21	36.2	31	37.8
Total	24	100	58	100	82	100
Respondent received treatment from*						
Private Clinic	6	25.0	15	25.9	21	25.6
AMDA clinic	0	0.0	2	3.4	2	2.4
FPAN clinic	1	4.2	1	1.7	2	2.4
Health Post/Health Centre	3	12.5	2	3.4	5	6.1
Hospital	4	16.7	13	22.4	17	20.7
Pharmacy	2	8.3	5	8.6	7	8.5
Self-Medication	0	0.0	2	3.4	2	2.4
Others	9	37.5	24	41.4	33	40.2
Received medicine prescription (N=82)						
Yes	17	70.8	42	72.4	59	72.0
No	7	29.2	16	27.6	23	28.0
Total	24	100	58	100	82	100

\*Note: Multiple Responses Allowed

### 3.6.3 Exposure to HIV Prevention Interventions

This section discusses and explores the exposure of FSWs to the ongoing HIV and AIDS awareness programs and their participation in those activities. The respondents in the survey were asked several questions relating to some of the most important components of current HIV/AIDS related programs run by several organizations. Information provided by them has been analyzed in the following sections.

#### 3.6.1 Peer/Outreach Education

One of the major components of the ongoing HIV and STI intervention is the mobilization of outreach and peer educators (OEs and PEs) to educate the target population on HIV and STI preventive measures. In this round of survey among FSWs from 22 terai highway districts, 47% of the respondents had met or discussed or interacted with peer educators or outreach educators in the preceding year. Relatively, 53.3% of the respondents in 6 districts and 43.8% in 16 districts had met or discussed with peer educators or outreach educators. During those meetings or interaction equal proportion (68.6%) of respondents in both 6 and 16 district had discussed on the transmission of HIV and AIDS. More than 70% (77.7% in 6 and 73.7% in 16 districts) of respondents had met peer educators or outreach educators from NRCS. Of those who had met peer educators outreach educators, majority (51.8% in 6 and 54.3% in 16 districts) had met or interacted for 2 to 3 times in the year prior to the year of survey. (Table 3.6.1)

**Table 3.6.1: Meeting/Interaction of FSWs with Peer Educator/Outreach Educators**

Peer Educator/Outreach Educator Visited to Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Met or discussed or interacted with peer educators (PE) or outreach educators (OE) in the last 12 months (N=610)						
Yes	112	53.3	175	43.8	287	47.0
No	98	46.7	220	55.0	318	52.1
Didn't give answer	0	0.0	5	1.3	5	0.8
Total	210	100	400	100	610	100
Activities involved in with PE or OE*						
Discussion on how HIV and AIDS is/isn't	77	68.8	120	68.6	197	68.6
Discussion on how STI is/isn't transmitted	55	49.1	111	63.4	166	57.8
Regular/non-regular use of condom	34	30.4	66	37.7	100	34.8
Demonstration on using condom correctly	31	27.7	53	30.3	84	29.3
STI treatment/cure after treatment	9	8.0	20	11.4	29	10.1
Counseling on reducing number of sex	7	6.3	8	4.6	15	5.2
Training on HIV and STI, condom day, AIDS day, participation in discussions and interaction programs	7	6.3	13	7.4	20	7.0
Other	11	9.8	10	5.7	21	7.3
Organizations represented by OE/PEs*						
AMDA	21	18.8	32	18.3	53	18.5
GWP	24	21.4	48	27.4	72	25.1
Trinetra	10	8.9	17	9.7	27	9.4
Warch	44	39.3	62	35.4	106	36.9
ICH	35	31.3	50	28.6	85	29.6
NSARC	19	17.0	30	17.1	49	17.1
NRCS	87	77.7	129	73.7	216	75.3
INF/Paluwa	92	82.1	143	81.7	235	81.9
Siddhratha Club	35	31.3	40	22.9	75	26.1
CAC	6	5.4	10	5.7	16	5.6
SACTS	21	18.8	29	16.6	50	17.4
NFCC	10	8.9	20	11.4	30	10.5
NAPN	10	8.9	21	12.0	31	10.8

**Table 3.6.1: Meeting/Interaction of FSWs with Peer Educator/Outreach Educators**

Peer Educator/Outreach Educator Visited to Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Sparsha Nepal	56	50.0	72	41.1	128	44.6
Saathi Organization	14	12.5	14	8.0	28	9.8
Indreni Sewa Samaj	20	17.9	31	17.7	51	17.8

Step Nepal	17	15.2	25	14.3	42	14.6
Other	25	22.3	34	19.4	59	20.6
Don't know	2	1.8	2	1.1	4	0.9
Number of meeting with PE/OE in the past year (N=610)						
Once	4	3.6	4	2.3	8	2.8
2-3 times	58	51.8	95	54.3	153	53.3
4-6 times	25	22.3	42	24.0	67	23.3
7-12 times	9	8.0	17	9.7	26	9.1
More than 12 times	16	14.3	17	9.7	33	11.5
Total	112	100	175	100	287	100

\*Note: Multiple Responses Allowed.

### 3.6.2 Drop-In Centers (DICs) Visiting Practice

Drop-in-Centers (DICs) are another important component of HIV prevention programs. The DICs not only provide a safe space for the target communities to socialize but are also the site for educational and counseling activities. More than half of the respondents (53.3%) in 6 districts had visited DICs. But just 43.8% respondents in 16 districts had visited DICs in the last 12 months. It was noticed that over two-third (68.8% in 6 and 68.6% in 16 districts) of the respondents visited DICs to collect condoms. Likewise majority of respondents (49.1% in 6 and 63.4% in 16 districts) had gone to learn the correct way of using condoms. Most of the respondent visited DICs run by NSARC (77.7% in 6 and 75.8% in 16 districts). Among those who visited DIC, majority (51.8% in 6 and 53.4% in 16 districts) of the respondents had visited 2 to 3 times in past one year (Table 3.6.2).

**Table 3.6.2: DIC Visiting Practice of FSWs**

DIC Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
DIC visit in the last 12 months (N=610)						
Yes	112	53.3	175	43.8	287	47.0
No	98	46.7	220	55.0	318	52.1
Total	210	100	400	100	610	100
Activities Involved in at DIC*	N=112	%	N=175	%	N=287	%
Went to collect condoms	77	68.8	120	68.6	197	68.6

**Table 3.6.2: DIC Visiting Practice of FSWs**

DIC Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Went to learn the correct way of using condom	55	49.1	111	63.4	166	57.8
Went to watch film on HIV and AIDS	34	30.4	66	37.7	100	34.8
Participated in discussion on HIV Transmission	31	27.7	53	30.3	84	29.3
Participated in discussion on STI transmission	9	8.0	20	11.4	29	10.1

DIC Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Participated in training, interaction and discussion programs on HIV AND AIDS and STI	7	6.3	8	4.6	15	5.2
Went to collect IEC materials	7	6.3	13	7.4	20	7.0
Went for STI treatment	11	9.8	10	5.7	21	7.3
Took friend with me	77	68.8	120	68.6	197	68.6
Other	55	49.1	111	63.4	166	57.8
Name of organizations that run DIC/s visited by them* (N=?)						
AMDA	8	7.1	17	10.6	25	9.2
GWP	7	6.3	17	10.6	24	8.8
Trinetra	26	23.2	41	25.5	67	24.5
Warch	9	8.0	3	1.9	12	4.4
ICH	14	12.5	16	9.9	30	11.0
NSARC	87	77.7	122	75.8	209	76.6
NRCS	3	2.7	11	6.8	14	5.1
INF/Paluwa	17	15.2	16	9.9	33	12.1
Siddhratha Club	1	0.9	0	0.0	1	0.4
Sacts	1	0.9	0	0.0	1	0.4
NFCC	1	0.9	1	0.6	2	0.7
NAPN	14	12.5	27	16.8	41	15.0
Sparsha Nepal	1	0.9	1	0.6	2	0.7
Indreni SewaSamaj	1	0.9	2	1.2	3	1.1
Step Nepal	8	7.1	6	3.7	14	5.1
Other	11	9.8	18	11.2	29	10.6
Don't know	10	8.9	20	12.4	30	11.0
Number of visits to the DICs in the past year (N=287)						
Once	4	3.6	4	2.3	8	2.8
2-3 times	58	51.8	95	54.3	153	53.3
4-6 times	25	22.3	42	24.0	67	23.3
7-12 times	9	8.0	17	9.7	26	9.1

**Table 3.6.2: DIC Visiting Practice of FSWs**

DIC Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
More than 12 times	16	14.3	17	9.7	33	11.5
Total	112	100	175	100	287	100

\*Note: Multiple Responses Allowed.

### 3.6.3 STI Clinic Visiting Practice

Prompt detection and treatment of STIs can prevent many health hazards. Several STI clinics are being run by different organizations to facilitate timely detection and urgent treatment of STIs. The survey respondents were also asked if they had visited any STI clinics in the past year. Around 51% of the respondents in 6 districts and 41.8% in 16 districts had visited STI clinic in the past year. It was found that great majority (92.5% in 6 and 94% in 16 districts) take their friend along while visiting STI clinic. It was also found that over two-third of the respondents (73.8% in 6 and 61.1% in 16 districts) visited STI clinic for physical examination. The most frequently visited STI clinic was NRCS (48.6% in 6 and 65.9% in 16 districts). Among those who visited STI clinic, around two-third (71 % in 6 and 65.3% in 16 districts) of the respondents visited the clinic for 2 to 3 times in the past year (Table 3.6.3).

**Table 3.6.3: STI Clinic Visiting Practice of FSWs**

STI Clinic Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Visited any STI clinic in the last 12 months (N=610)						
Yes	107	51.0	167	41.8	274	44.9
No	103	49.0	233	58.3	336	55.1
Total	210	100	400	100	610	100
Activities involved at STI clinic*	N=107		N=167		N=274	
Blood tested for STI	54	50.5	79	47.3	133	48.5
Physicalexamination conducted for STI identification	79	73.8	102	61.1	181	66.1
Was advised to use condom in each sexual intercourse	24	22.4	23	13.8	47	17.2
Was advised to take complete and regular	19	17.8	27	16.2	46	16.8
Was suggested to reduce number of sexual	16	15.0	39	23.4	55	20.1
Took friend with me	99	92.5	157	94.0	256	93.4
Other	8	7.5	4	2.4	12	4.4
Name of organizations who run STI clinic visited by FSW*	N=107		N=167		N=274	

**Table 3.6.3: STI Clinic Visiting Practice of FSWs**

STI Clinic Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
AMDA clinic	17	15.9	35	21.0	52	24.3
NSARC	49	45.8	57	34.1	106	49.5
NRCS	52	48.6	110	65.9	162	75.7
INF/Paluwa	37	34.6	50	29.9	87	40.7
Siddhartha club	13	12.1	19	11.4	32	15.0
Sacts	1	0.9	7	4.2	8	3.7
NFCC	5	4.7	12	7.2	17	7.9
Watch	8	7.5	9	5.4	17	7.9



GWP	0	0.0	2	1.2	2	0.9
Don't know	12	11.2	34	20.4	46	21.5
Number of visits to STI clinics in the past year (N=274)						
Once	15	14.0	20	12.0	35	12.8
2-3 times	76	71.0	109	65.3	185	67.5
4-6 times	8	7.5	11	6.6	19	6.9
7-12 times	4	3.7	16	9.6	20	7.3
More than 12 times	4	3.7	11	6.6	15	5.5
Total	107	100	167	100	274	100

\*Note: Multiple Responses Allowed.

### 3.6.4 HIV Testing and Counseling Centers (HTCs) Visiting Practice

The survey results showed that over half (52.9%) of the respondents from 6 districts and just 42.3% from 16 districts had visited HTC in the last 12 months. Most (90.1% in 6 and 88.8% in 16 districts) of the respondents were able to recall blood samples withdrawal during HTC visits. Likewise over three quarters (89.2% in 6 and 78.7% in 16 districts) mentioned about pre HIV and AIDS test counseling. Only few (0.9% in 6 and 4.1% in 16 districts) respondents mentioned of post HIV and AIDS test counseling. (Table 3.6.4)

**Table 3.6.4: HTC Centers Visiting Practice of FSWs**

Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Visited center in the last 12 months (N=610)						
Yes	111	52.9	169	42.3	280	45.9
No	99	47.1	231	57.8	330	54.1
Total	210	100	400	100	610	100
Activities involved in at center*						

**Table 3.6.4: HTC Centers Visiting Practice of FSWs**

Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Received pre-HIV and AIDS test counseling	99	89.2	133	78.7	232	82.9
Blood sample taken for HIV and AIDS test	100	90.1	150	88.8	250	89.3
Got information on HIV and AIDS window period	81	73.0	112	66.3	193	68.9
Received post HIV and AIDS test counseling	1	0.9	7	4.1	8	2.9
Received HIV and AIDS test result	17	15.3	17	10.1	34	12.1
Received counseling on using condom correctly in each sexual intercourse	16	14.4	21	12.4	37	13.2

Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Took a friend with me	5	4.5	17	10.1	22	7.9
Other	0	0.0	4	2.4	4	1.4
Name of the organization that run the HTC's visited by FSWs*						
AMDA	38	34.2	55	32.5	93	33.2
NSARC	19	17.1	19	11.2	38	13.6
NRCS	77	69.4	128	75.7	205	73.2
INF/Paluwa	43	38.7	54	32.0	97	34.6
SACTS	5	4.5	26	15.4	31	11.1
Watch	0	0.0	4	2.4	4	1.4
GWP	15	13.5	36	21.3	51	18.2
Indreni Sewa Samaj	8	7.2	5	3.0	13	4.6
Trinetra	0	0.0	1	0.6	1	0.4
Others (Bijam, Namuna, RDF etc.)	62	55.9	82	48.5	144	51.4
Don't know	11	9.9	21	12.4	32	11.4
Number of visits to HTC's in the past year						
Once	28	25.2	42	24.9	70	25.0
2-3 times	56	50.5	76	45.0	132	47.1
4-6 times	18	16.2	34	20.1	52	18.6
7-12 times	7	6.3	16	9.5	23	8.2
More than 12 times	2	1.8	1	0.6	3	1.1
Total	111	100	169	100	280	100
Reason for not visiting HTC center in the last 12 months* (n=330)						
Do not know about HTC center	71	71.7	180	77.9	251	76.1
I do not think I need to be tested	3	3.0	20	8.7	23	7.0
I have no symptoms of HIV	23	23.2	53	22.9	76	23.0
HTC Center is not near	6	6.1	25	10.8	31	9.4
I have already tested and know my status	30	30.3	58	25.1	88	26.7
No money to go to HTC center	6	6.1	21	9.1	27	8.2
Fear that people will see me visiting HTC	30	30.3	80	34.6	110	33.3

**Table 3.6.4: Visiting Practice of FSWs**

Visiting Practice of Female Sex Workers	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Fear that family members/friend/ clients will know it	8	8.1	29	12.6	37	11.2
Others	4	4.0	8	3.5	12	3.6
Respondents were ever been approached and explained about need of HTC by health workers/ outreach workers						
Yes	107	51.0	217	54.3	324	53.1
No	103	49.0	183	45.8	286	46.9
Total	210	100	400	100	610	100
Topics discussed by the health/outreach workers*						
Talked about my sex partners	26	24.3	47	21.7	73	22.5
Advised to visit HTC if I have some problems	66	61.7	139	64.1	205	63.3
Advised me to visit HTC once in a month in any case	59	55.1	122	56.2	181	55.9
Did not talk about HIV testing	34	31.8	46	21.2	80	24.7
Other	0	0.0	4	1.8	4	1.2

\*Note: Multiple Responses Allowed

It was found that more than two-third (69.4% in 6 and 75.7% in 16 districts) of the respondents had visited NRCS for HTC in past one year. Among the respondents visiting HTC, about half (50.5% in 6 and 45% in 16 districts) of the respondents had visited HTC for 2 to 3 times in past one year. Of those respondents who had not visited HTC center in the last 12 months, over two- third (71.7% in 6 and 77.9% in 16) of respondents were found to be unknown about HTC center. It was also noticed that majority (51% in 6 and 54.3% in 16 districts) of the respondents were ever been approached and explained about HTC by health workers or outreach workers. Among the respondents approached by health workers or outreach workers, about two-third (61.7% in 6 and 64.1% in 16 districts) were being advised to visit HTC if they encountered some problems.

### 3.6.5 Participation in HIV Awareness Program

The respondents were further asked if they had participated in any HIV awareness raising programs or community events in the past year. From the survey it was noticed that over one quarter (27.7%) of respondents had ever participated in HIV awareness raising program or community events in the last 12 months prior to the survey period in all 22 districts. Comparatively, over one-third (39%) of the respondents from 6 districts and less than one quarter (21.8%) from 16 districts had participated in the HIV awareness program. Among the one participating in the HIV awareness programs, almost half (48.8%) of respondents from 6 districts had involved in HIV related training programs while those from 16 districts (48.3%) were found to have participated in Group discussions. Over two-third (68.3% in 6 districts and 67.7% in 16 districts) of the respondents were found to have participated in the programs organized by NRCS.

Moreover, around 40% (42.7% in 6 districts and 44.8% in 16 districts) of the respondents had participated in those programs for 2 to 3 times in past one year. On the other hand, over two third (72.3%) of the respondents haven't never participated in the HIV and AIDS awareness program. (Table 3.6.5).

**Table 3.6.5: Participation of FSWs in STI/HIV and AIDS Awareness Program**

Participation in HIV Awareness Program	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Ever participated in HIV awareness raising program or community events in the last 12 months (N=610)						
Yes	82	39.0	87	21.8	169	27.7
No	128	61.0	313	78.3	441	72.3
Total	210	100	400	100	610	100
Activities participated in* (N=169)						
Street drama	13	15.9	35	40.2	48	28.4
AIDS day	30	36.6	36	41.4	66	39.1
Condom day	25	30.5	33	37.9	58	34.3
Video Program	19	23.2	15	17.2	34	20.1
Group discussions	30	36.6	42	48.3	72	42.6
Debate program	3	3.7	4	4.6	7	4.1
HIV and AIDS related training	40	48.8	35	40.2	75	44.4
HIV and AIDS related workshops	22	26.8	10	11.5	32	18.9
Condom use demonstrations	7	8.5	10	11.5	17	10.1
Other	6	7.3	4	4.6	10	5.9
Name of the organizations that organized such activities* (N=169)						
AMDA	19	23.2	19	21.8	38	22.5
GWP	6	7.3	6	6.9	12	7.1
Trinetra	2	2.4	7	8.0	9	5.3
Watch	1	1.2	3	3.4	4	2.4
ICH	6	7.3	8	9.2	14	8.3
NSARC	3	3.7	3	3.4	6	3.6
NRCS	56	68.3	58	66.7	114	67.5
SACTS	1	1.2	0	0.0	1	0.6
Female Rescue group	4	4.9	4	4.6	8	4.7
Maiti Nepal	0	0.0	1	1.1	1	0.6
IndreniSewaSamaj	3	3.7	4	4.6	7	4.1
Others	69	84.1	65	74.7	134	79.3
Don't know	3	3.7	5	5.7	8	4.7

**Table 3.6.5: Participation of FSWs in STI/HIV and AIDS Awareness Program**

Participation in HIV Awareness Program	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Frequency of such participation (N=169)						
Haven't participated	6	7.3	7	8.0	13	7.7
Once	18	22.0	20	23.0	38	22.5

Participation in HIV Awareness Program	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
2-3 times	35	42.7	39	44.8	74	43.8
4-6 times	19	23.2	15	17.2	34	20.1
7-12 times	3	3.7	6	6.9	9	5.3
More than 12 times	1	1.2	0	0.0	1	0.6
Total	82	100	87	100	169	100

\*Note: Multiple Responses Allowed.

### 3.7 Perception on Risk of HIV among Female Sex Workers

#### 3.7.1 Stigma and Discrimination

People living with HIV/AIDS are often ostracized in society. The respondents perceptions of HIV-positive persons and the stigma associated with the disease were examined with the help of a series of questions, as shown in Table 3.7.1.

In this round of survey, questions related to stigma and discrimination was asked among the FSWs from 22 Terai Highway Districts. The survey result revealed that around three quarter (70.5% for male relatives and 71.9% for female relatives) of respondents of 6 districts were willing to take care of HIV positive relatives. About 55.3% for male and 58% for female relatives of respondents in 16 districts were found of similar opinion. Moreover, 60% (60.5% for male and 62.8% for female relatives) was found willing towards taking care of HIV positive relatives in 22 districts. Similarly 15.6% for male HIV positive relatives and 14.8% for female HIV positive relatives in the household were found to be not sure regarding their willingness.

In this round of survey, 48.4% of the respondents were willing to maintain confidentiality of HIV positive family members while 38.2% had contrasting view and remaining 13.4% were found confused on their will to maintain confidentiality (Table 3.7.1).

**Table 3.7.1: Stigma and Discrimination**

Stigma and Discrimination	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Willing to take care of HIV Positive male relative in the household (N=610)						
Yes	148	70.5	221	55.3	369	60.5
No	30	14.3	116	29.0	146	23.9
Don't know	32	15.2	63	15.8	95	15.6
Total	210	100	400	100	610	100
Willing to take care of HIV positive female relative in the household (N=610)						
Yes	151	71.9	232	58.0	383	62.8
No	29	13.8	108	27.0	137	22.5
Don't know	30	14.3	60	15.0	90	14.8
Total	210	100	400	100	610	100.0
Willing to maintain confidentiality of a HIV positive family member (N=610)						

Stigma and Discrimination	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Yes	100	47.6	195	48.8	295	48.4
No	85	40.5	148	37.0	233	38.2
Don't know	25	11.9	57	14.3	82	13.4
Total	210	100	400	100	610	100

### 3.8 Psychosocial Health of Female Sex Workers

#### 3.8.1 Housing Instability

The Table 3.9.1 shows that majority (66.2%) of the respondents live in their own house in 6 district region as well as 16 district region, 43.5 % followed by living in rented house, hotel and other places. Few (0.5 % in 6 district and 3.5%in 16 districts) respondents said that they don't have their own house and live on streets.

Most (80.9% in 6 and 74.6 % in16 districts) of the respondents didn't experience of forceful stay by house owner or male friend in past year. Sixteen percent (13.9% in 6 and 17.6% in 16 district region) stated experience of facing that problem, 1-2 times in the past 5 year. Few (2.9% in 6 and 3.9 % in16 districts) stated of experiencing it more than 5 times.

**Table 3.9.1: Current living status of the FSWs**

Living status	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Living place						
Don't have own house and live on the street	1	0.04	14	3.5	15	2.5
Live in own house	139	66	174	43.5	313	51.3
Live in hotel	5	2	37	9.3	42	6.9
Live in rented house	57	27	160	40.0	217	35.6
Other (specify)	8	4	15	3.8	23	3.8
Total	210	100	400	100	610	100
Forced to live house by house owner or male friend in past 5 year						
Never forced to live house	169	80.9	288	74.6	457	76.8
1-2 times	29	13.9	68	17.6	97	16.3
3-5 times	5	2.4	15	3.9	20	3.4
More than 5 times	6	2.9	15	3.9	21	3.5
Total	209	100	386	100	595	100

### 3.8.2 Social Support and Mental Health Status of FSWs

This *table 3.9.2* explains the social support and mental health status of FSWs. When asked about the suicidal feeling, about 34.3% in 6 and 34.7% in 16 districts of the respondents have the feeling to suicide. Most (73.6% in 6 and 54.7% in 16 districts) of the respondents reported that at some time, they had suicidal ideation in both group of districts whereas most (74% in 6 and 62.6% in 16 districts) said that they did not have any suicidal plan. A quarter (25%) of respondents in 6 district region and 30.2 % of respondents in 16 district region had attempted suicide.

**Table 3.9.2: Suicidal Attempt**

Suicidal feeling in life time	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Yes	72	34.3	139	34.7	211	34.5
No	138	65.7	262	65.3	400	65.5
Total	210	100	400	100	610	100
Suicidal Ideation						
Many times	13	18.1	27	19.4	40	19.0
Some of the time	43	59.7	64	46.0	107	50.7
1-2 days	15	20.8	45	32.4	60	28.4
No response	1	1.4	3	2.2	4	1.9
Total	72	100	139	100	211	100
Suicidal Plan						
Yes	18	25	54	38.8	72	34.1
No	53	73.6	76	54.7	129	61.1
No response	1	1.4	9	6.5	10	4.7
Total	72	100	139	100	211	100
Suicidal Attempt						
Yes	18	25	42	30.2	60	28.4
No	53	73.6	87	62.6	140	66.4
No response	1	1.4	10	7.2	11	5.2
Total	72	100	139	100	211	100

### 3.8.3 Acts of Violence Faced by FSWs from Security Personnel

When respondents were asked about the harassment from the security personnel, majority (96.2% in 6 and 81.8% in 16 districts) of respondents reported of not being harassed by security personnel. However, 18 % of respondents in 16 districts while only 3.8 % in 6 districts experienced of being harassed by security personnel. (*Table 3.9.3*)

**Table 3.9.3: Act of Violence Faced by FSWs from Security Personnel**

Characteristics of violence faced by FSWs	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Harassed by security personnel in last 12 months						
Yes	8	3.8	73	18.3	81	13.3
No	202	96.2	327	81.8	529	86.7
Total	210	100	400	100	610	100

### 3.8.4 Social Support and Level of Satisfaction

The mean (Standard Deviation) of the SSQN and SSQS were 1.3 (0.7) [1.3(0.9) in 6 districts and 1.3(0.6) in 16 districts] meaning survey participants in 22 Terai Highway Districts had between 1-2 supportive persons who could be counted on for different forms of social support and most were fairly satisfied with the available support (4.8). (Table 3.5.4)

**Table 3.9.4: Social Support among FSWs**

Social support number among FSWs	Female sex workers Districts, 2012		
	6 Dist.	16 Dist.	22 Dist.
	N=178	N=372	N=610
Mean/Median	1.3/1.0	1.3/1.2	1.3/1.2
SD	0.9	0.6	0.7
Range	0.17 to 29	0.17 to 29	0.17 to 8.17
Social Support Satisfaction			
Mean/Median	4.7/5.0	4.9/5.0	4.8
SD	1.3	1	1.1
Range	1.5 to 6	1.3 to 6	1.33 to 6

### 3.8.5 Distress and Depression Status

This table states the depression status of female sex workers. Nearly 50 percent of respondents (50% from 6 district sample and nearly 33% from 16 districts) were distressed, 37.6% in 6 and 18.7% in 16 districts of the respondents were found to be free from depression whereas 12.4% in 6 and 14.4% in 16 districts of respondents were found depressed. The overall prevalence of distress and depression was 68.4 (Table 3.5.5).

**Table 3.9.5 Level of Depression among FSWs**

Depression	Female sex workers Districts, 2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Euthymic	79	37.6	114	18.7	193	31.6
Distressed	105	50	198	32.5	303	49.7
Depressed	26	12.4	88	14.4	114	18.7
Total	210	100	400	65.6	610	100

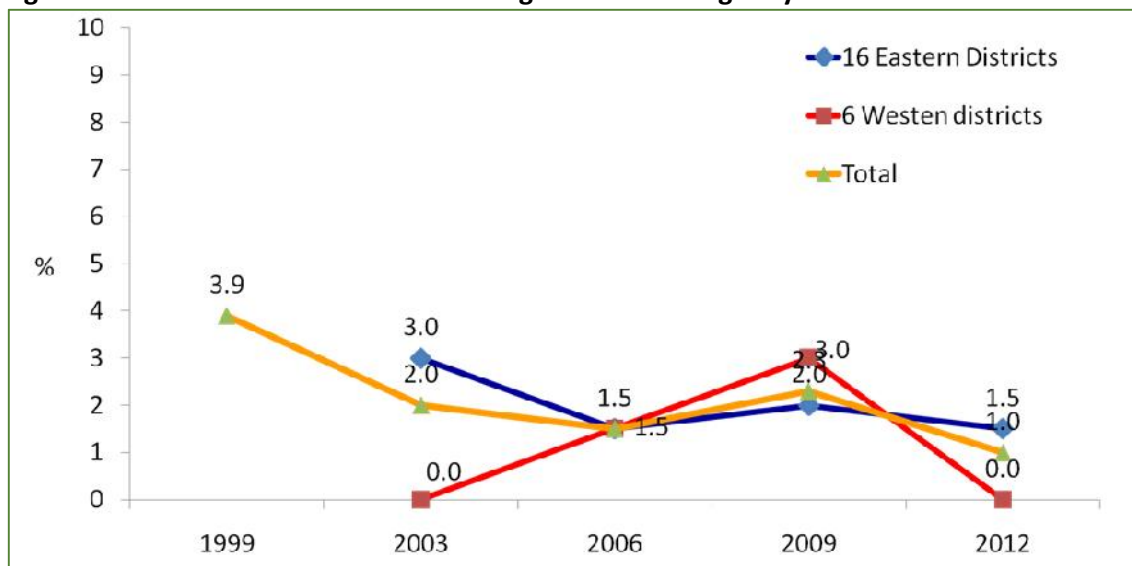
## 3.9 Trend Analysis of Key Indicators

### 3.9.1 Trends of HIV and Syphilis prevalence

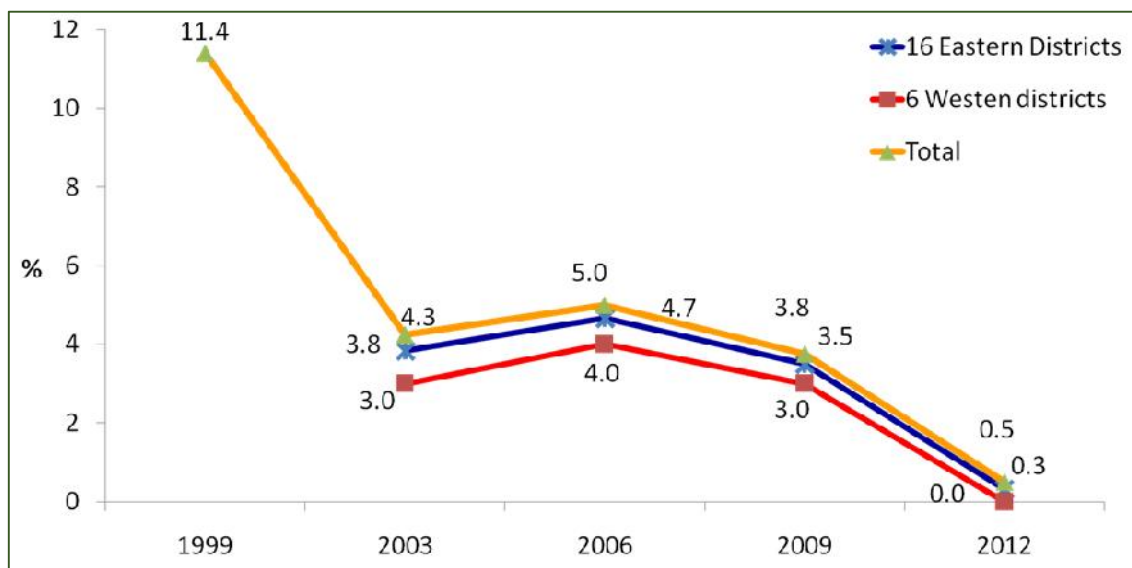
Prevalence of both Syphilis and HIV has decreased over the year from 2006 to 2012. Prevalence of Syphilis and HIV has decreased to 0.3 % and 1% respectively in 2012. (Fig. 1)



**Figure 3.10.1: Trends of HIV Prevalence among FSWs in Terai Highway districts**



**Figure 3.10.2: Trends of Active Syphilis Prevalence among FSWs in Terai Highway districts**



### 3.9.2 Trend in Socio-Demographic Characteristics of FSWs

Table 3.10.1 shows the trend in different socio-demographic characteristics of the respondents. In all the three years the proportion of respondents who were ever married almost exceeded 80%. The proportion of respondents who attended school increased from 32.6% in 2006 to around 50% in 2012. Around 95% of the respondents had their first sex before age 20 years in the year 2006 and 2009 which decreased to 87.5% in 2012. More than one fourth of the respondents had entered the sex trade in last 12 months in all the years.

**Table 3.10.1: Trend in Socio-Demographic Characteristics**

Characteristics of the respondents	2006	2009	2012
<20 years	18.7	21.8	18.9
Ever married	86.9	79.9	83.3
Attended school	32.6	49.3	50.3
Had first sex at <20 years	95.8	94.5	87.5
Entered sex trade in last 12 months	29.2	25.7	30.8

### 3.9.3 Trend in Average Number of Clients Served by FSWs

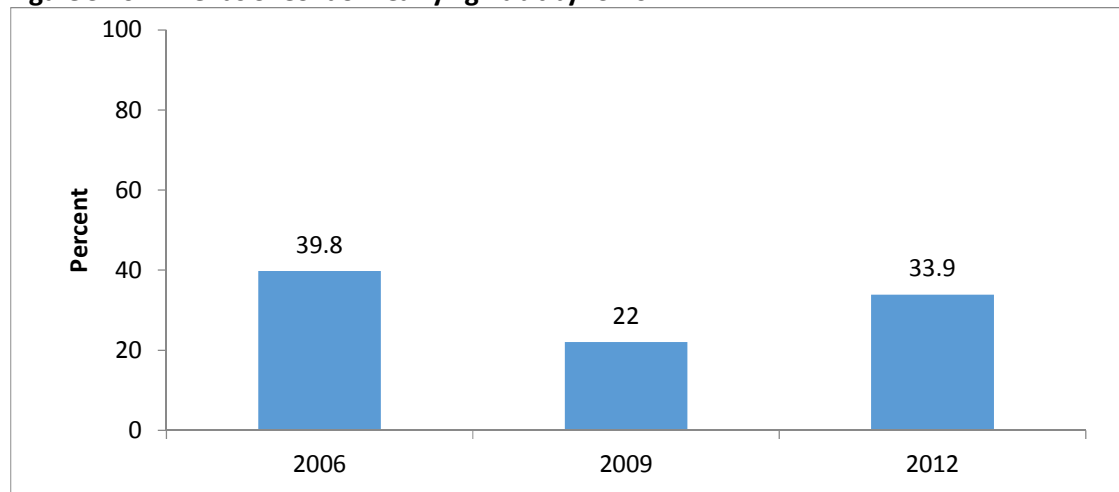
Most of the respondents have one client on an average in a day in all consecutive years. The IBBS round four shows increment in percentage of respondents having two clients in a day. The mean number of clients per day in this round was found to be 1.6, more than previous years. (Table 3.10.2)

**Table 3.10.2 Trend in Average Number of Clients Served by FSWs**

Number of Clients of Sex Workers	2006		2009		2012	
	N	%	N	%	N	%
Average number of clients per day						
One	482	80.3	420	70.0	398	65.2
Two	76	12.6	117	19.5	137	22.5
Three– Four	37	6.1	41	6.6	63	10.3
More than Four	7	1.3	22	3.7	12	2.0
Mean clients per day	1.3		1.5		1.6	
Total	600	100	600	100	610	100

### 3.9.4 Trends of Condom Carrying Habit by FSWs

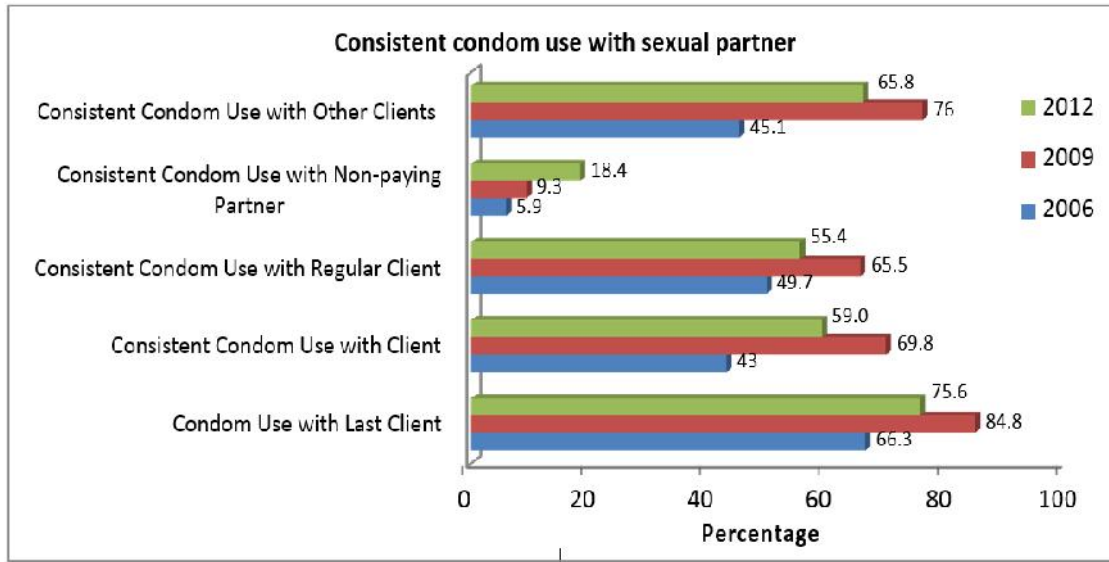
Figure 3.10.4 shows that the percent of respondents who usually carry condom ranges from 22 to 40%. This was around 40% in 2006 which rapidly decreased to 22% in 2009 and again increased slightly to 34% in 2012.

**Figure 3.10.4: Trends of Condom Carrying Habit by FSWs**

### 3.9.5 Consistent Condom Use with Different Sex Partners

Figure 3, highlights those respondents who consistently use condom with different types of partner. Those consistently using condom with regular client is 55.4% in 2012 which was around 50% in 2006. However, the data was much higher that is 65.5% in 2009. More than three fourth of the respondents had used condom with their last client in all the years. Though the percentage of respondents who consistently use condom with non-paying partner is in increasing trend from 2006 to 2012; the increase is very low that is from around 6% in 2006 to 18% in 2012.

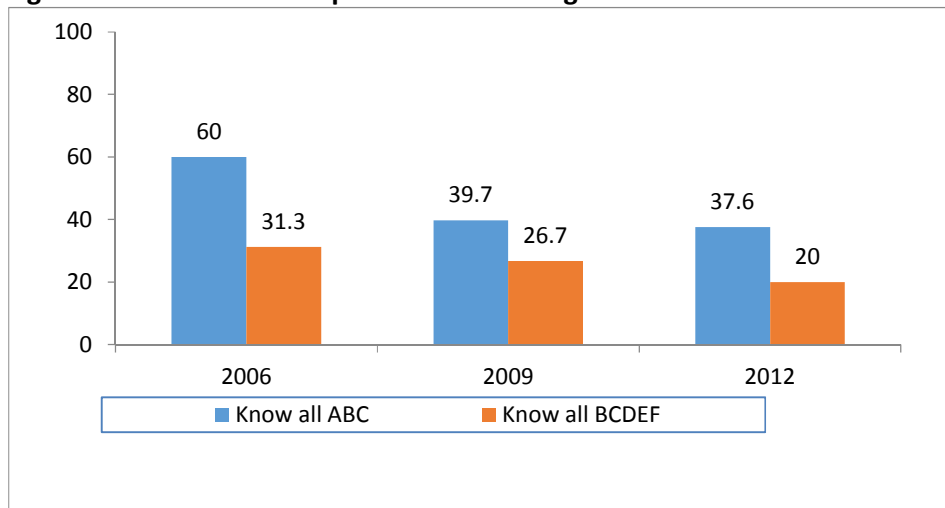
**Figure 3.10.5: Consistent Condom Use with Different Sex Partners**



### 3.9.6 Trends of Comprehensive Knowledge of HIV

Comprehensive knowledge on HIV and AIDS is in decreasing trend in the year from 2006 to 2012. Proportion of the respondents knowing all A, B and C has decreased from 60% in 2006 to 37.6% in 2012; the percent of respondents knowing all B, C, D, E and F has decreased from 31.3% in 2006 to 20% in 2012 (Figure 3.10.6).

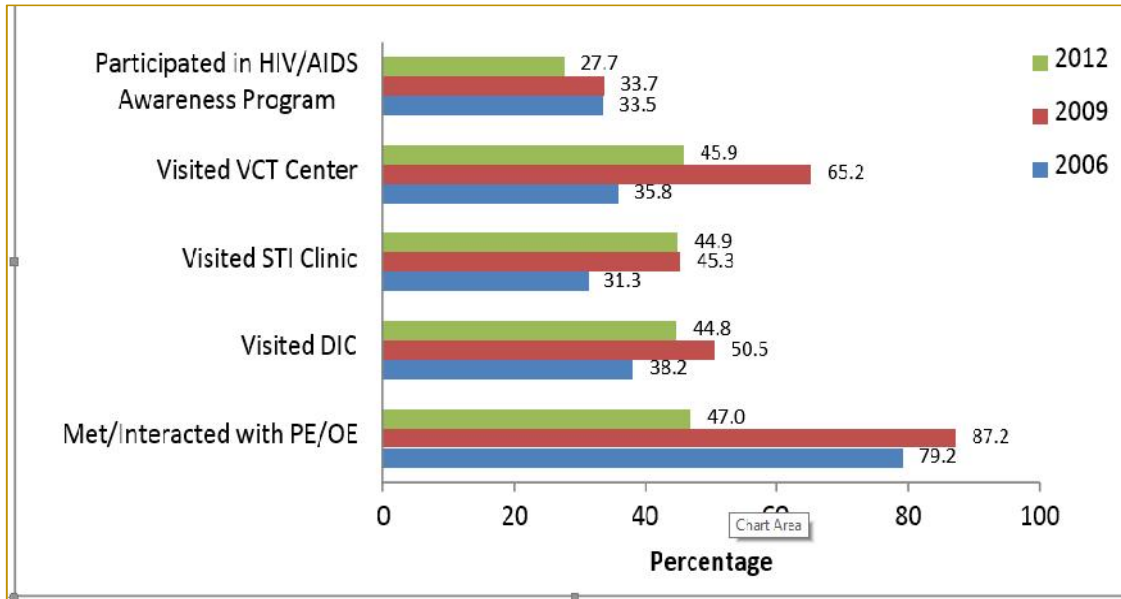
**Figure 3.10.6: Trends of Comprehensive Knowledge of HIV**



### 3.9.7 Exposure to HIV and AIDS Program

Figure 6 shows that exposure to the HIV prevention program like participation in awareness raising activities, visit to HTC center, visit to STI clinic, visit to DIC and meeting/interaction with PE/OE has decreased in the year 2012 in comparison to the year 2009. Percentage of respondents visiting HTC center decreased rapidly to around 46% in 2012 from 65% in 2009. More rapid decrease is in the participation/meeting and interaction with PE/OE in the year 2012 than in the previous years. Only 28% of the respondents had participated in the HIV and AIDS awareness raising activities in the year 2012 which was a slight decrease than the previous years.

**Figure 3.10.7: Exposure to HIV Programs**



## **CHAPTER 4**

### **SUMMARY OF MAJOR FINDINGS AND POSSIBLE POLICY AND PROGRAMME IMPLICATIONS**

#### **6.1 Summary of Major Findings**

##### **Socio-demographic Characteristics**

The median age of the respondents was 27 years with a range from 14 to 57 years. Result showed that respondents from 6 districts were found to be more illiterate (38%) than those from 16 districts (29%). In general, 59% of respondents were married, 19.8% were divorced or separated and 16.7% of respondents were unmarried. The median age of respondents when they got divorced or separated was 25 years. Median age of first marriage of respondents was 16 years.

Child birth and use of family planning devices pregnancy history of ever married female sex workers (FSWs) Majority of FSWs (70.8%) in 6 districts had ever given birth than those (62.5%) in 16 districts. The mean number of live births was 2.5. FSWs that terminated their pregnancy once in 6 districts were higher in 6 districts (83.9%) than in 16 districts (62.3%). However, district hospital was the preferred choice to visit for delivery among FSWs.

##### **Knowledge and Practice of Family Planning Methods**

The result showed that all of the respondents knew about condom in both 6 and 16 districts. However, 2/4<sup>th</sup> FSWs knew about sterilization method in 6 districts while 8/9<sup>th</sup> FSWs knew about pills in 16 districts. Meanwhile, sterilization, seemed to be the widely known family planning methods followed by condom use and injectable among all FSWs in both the districts.

##### **Prevalence of HIV and Syphilis**

In this round of survey, one percent of FSWs was HIV positive. Similarly, 0.7% FSWs had laboratory test suggestive of syphilis history and 0.3% FSWs had active syphilis.

##### **Sexual Behavior and Condom Use among Female Sex Workers**

###### **Sexual behavior of FSWs**

The median age at first sexual intercourse was 16 years. On the whole, majority (68.1% in 6 and 55.2% in 16 districts) of the respondents were found to have their first sexual intercourse when they were 15-19 years of age. The mean number of months involved in the sex trade was 36.8 months. Among FSWs in 6 districts more than one third (39.5%) had involved in sex trade for no more than a year, indicating new sex workers entering the business at an increasing rate while around a quarter (23.5%) of FSWs in 16 districts had involved in sex trade for more than 48 months. Hotels and lodges remained the most sorts out sites for sex trade in both districts.

###### **Sex workers and their Clients**

The number of clients of FSWs were 1.56 clients per day ranging from one to 11 clients. Majority (65.2%) of respondents reportedly entertained one client per day. Moreover, the proportion of FSWs who entertained one client per day was 85.17 % in 6 districts and 54.5 % in 16 districts. On average, FSWs had worked for four days in a week. More than half (58.6 %) of FSWs reported that they had

worked as sex workers for four to seven days a week in all 22 districts. Nevertheless, most frequent clients were transport workers (bus or truck or tractor) following businessman, service holders, and laborers.

### **Types of Sex Practiced and Acts of Violence Faced by FSWs**

FSWs who were forced into sex were higher in 16 district (28.8%) while only (4.8%) in 6 districts. Likewise, oral sex was found to be widely practiced (put percent here) in 16 districts whereas masturbation was preferred (percent here) in 6 districts.

### **Income of FSWs from Sex Work and Other Jobs**

When calculating the total income of FSWs both cash and gifts have been taken into account. Furthermore, the average weekly income made by FSWs from the sex work was found to be nearly NRs 4500 while the average weekly income of sex workers from other jobs was NRs. 1,917.

### **Knowledge on Female Condoms**

Majority of the respondents (61.9% in 6 and 58.3 % in 16 districts) had not ever heard of female condoms. On the whole, only 4.4% (6.3% in 6 and 3.6% in 16 districts) had ever used female condom and had considered female condoms to be useful. , NGO staffs, friends, relatives, neighbors and health volunteers remained the important source of information on female condoms.

### **Condom Use with Different Partners**

Overall, 59% of the respondents had consistently used condoms with their clients in the preceding year. More than half (55.2% in 6 and 61.8% in 16 districts) of the sex workers had clients visiting them on a regular basis and among them, majority (55.2% in 6 and 55.5% in 16 districts) reported of consistently using condoms with the regular client in the year prior to the survey on the contrary, less than 20% (18.1% in 6 and 18.5% in 16 districts) had consistently used condom during their most recent sexual contact in the year preceding the survey.

### **Condom Use with Partners Other than Clients Husband and Male Friends**

Around 30% (24.8% in 6 and 36.8 % in 16 districts) of the respondents were engaged in sexual acts with partners other than client husband and male friend in the year prior to the survey. More than 70 % (75 % in 6 and 72.1 % in 16 districts) of them had used condom during their last sexual contact with such people. Furthermore, around 60 % (61.7 % in 6 and 67.3 % in 16 districts) of them had consistently used condom.

### **Availability of Condoms and their Brand Names**

Most of respondents (put proportion here) reported of not carrying condoms. Among those who carried condoms, majority (60.87 % in 6 and 54.35 % in 16 districts) said they usually carry condoms where observed to have carried one condom. Nearly 40 % (39.5 % in 6 and 38.5 % in 16 districts) of the sex workers said that they could get condoms within five minutes from their nearest place of work, while only 5.6 % (6.7 % in 6 and 5.0 % in 16 districts) could get them in 20 or more than 20 minutes. Pharmacy was more popular place from where sex workers could get condoms followed by health posts or health centers.

### **Modes of Obtaining Condoms**

More than half of FSWs reported of receiving the condoms free of cost in both the districts. Conversely, 31.4% in 6 and 23.5 % of FSWs in 16 districts purchased the condoms. Majority (50.6 %

in 6 and 48.5 % in 16 districts) usually bought them from pharmacies followed by hotels and lodges. However, respondents who reported of obtaining free condoms, majority accessed them from NGOs or Health Workers or Volunteers, followed by health post or health center.

#### **Use of Alcohol and Drugs by FSWs and Clients**

Almost half of the respondents (put proportion here) in both 6 and 16 districts reported that they had never consumed alcohol. Around a quarter had consumed alcohol 2 to 3 times per week while only 5.2 % in 6 and 11% in 16 districts had consumed alcohol on a daily basis preceding the month of survey. Similarly, overall, 3.2% of total FSWs were reported to have tried any kind of drug.

#### **Injecting history and Practices among Female Sex Workers**

Almost half of the respondents reported that they had never consumed alcohol. Around a quarter had consumed alcohol 2 to 3 times per week while only 5.2 % in 6 and 11 % in 16 districts had consumed alcohol on a daily basis preceding the month of survey. Similarly, overall, 3.2 % of total FSWs were reported to have tried any kind of drugs.

#### **Knowledge on HIV and AIDS**

##### **Source of Knowledge on HIV and AIDS**

All respondent in 6 districts were found to have heard about HIV and AIDS while in case of 16 districts, 11% of FSWs was found to not have heard about HIV and AIDS. The most common sources of information on HIV and AIDS were from friends (percent), relatives (percent), radio (percent), television (percent), health workers (percent), NGO staffs (percent) and pamphlets (percent). A considerable proportion of the respondents (51.4%) in 16 districts had also heard about HIV and AIDS from their work place in comparison to 6 (18.1%) districts.

##### **FSWs Knowledge on Major Ways to Avoid HIV**

Overall, 37.6 % of the respondents correctly identified all three A, B, and C as HIV preventive measures. Relatively, respondents in 16 districts (50.8%) were found likely to know all three A, B and C as HIV preventive measures compared to those (15.1%) in 6 districts. Considering five major indicators i.e. BCDEF, 20 % (13.8 % in 6 districts and 23.6 % in 16 districts) of the respondents were aware.

##### **FSWs Knowledge on Major Ways of Transmitting HIV**

A majority of respondents (put figure here) perceived that HIV could be transmitted through the transfusion of blood from an infected person to another; through the use of pre-used needles/syringes and can also be transmitted from HIV positive mother to her unborn child. More than 80 % also mentioned that holding an HIV-infected person's hand did not pose a risk of HIV transmission. Among those sex workers who said that an infected mother could transmit the virus to her unborn child, one-third of them stated that the risk of transmission can be reduced by abortion followed by an intake of medicine as a measure for reducing the risk.

##### **Perception of HIV Test**

Most of the respondents (put percent here) knew Confidential HIV Test Facility being available in the community. Additionally, more than half (% here) of the respondents had ever tested themselves for HIV. Among those ever tested for HIV, great majority (98.5 % in 6 and 97.2 % in 16 districts) of the respondents had received their test result. Most (98.5 % in 6 and 87.5 % in 16 districts) of them had taken up the test voluntarily while others had been asked to do the test. Of those who did not

received the test result (% here), the prime reason to do so was either being afraid of the result or they did not consider it necessary.

### **Access to HIV and AIDS Awareness Messages**

Some of the popular messages respondents were aware of were - “Jhilkedai cha chaina condom”. “Younrogra AIDS bata bachnalai rakhnu parchha sarbatra paine condom lai. “Ramro sangha prayog gare jo kohim huna dinna, bhar pardo chhu santosh dinchhu jhanjhat manna hunna”. More than 70% of the responses revealed that messages had made them understand that the use of condoms prevents the transmission of HIV and AIDS; around 30 % stated that these messages had made them aware about use of condom for family planning. Around 7 % mentioned that the messages helped them to learn that use of condom prevents STIs transmission.

### **Knowledge of STIs, Experienced Symptoms and Treatment in the Past Year**

For more than 60 %, STI meant White discharge or Discharge of pus or *dhatu* flow. Further, 72.8 % of the respondents in 6 districts and 58.3 % in 16 districts had experienced vaginal discharge followed by 45.6 % in 6 and 57 % in 16 districts considered STI as a genital ulcer or sore in the preceding year while private clinic seemed to be the common place to seek STI treatment.

### **Existing STI Symptom/s and Treatment**

In general, some common symptoms FSWs were experiencing at the time of survey were lower abdominal pain, painful sex, vaginal discharge, vaginal itching and dysuria. Out of 300 respondents (87 in 6 districts and 213 in 16 districts) who had been experiencing at least one STI symptom during the survey period, only 82 (24 out of 87 in 6 and 58 out of 213 in 16 districts ) had sought treatment. Around a quarter of those respondents (put % here) sought treatment from private clinics, Hospitals and pharmacies (8.5%).

### **Exposure to HIV Prevention Intervention**

#### **Peer or Outreach Education**

Overall, less than half of the respondents (% here) had met or discussed or interacted with peer educators or outreach educators in the preceding year. Relatively, 53.3 % of the respondents in 6 districts and 43.8 % in latter group of 16 districts had met or discussed with peer educators or outreach educators. Of them, majority (51.8 % in 6 and 54.3 % in 16 districts) had met or interacted for 2 to 3 times. Majority (77.7 % in 6 and 73.7 % in 16 districts) had met peer educators or outreach educators from NRCS.

#### **Drop In Centers Visiting Practice**

More than half of the respondents (53.3%) in 6 districts and less than half (43.8%) in 16 districts had visited Drop –In Centers (DIC) in 12 months prior to the survey with majority (% here) visited DIC two to three times. Most of the respondents (% here) had visited Drop –In Centers (DIC) to collect condoms. NSARC was the frequently visited Drop –In Center (DIC) by the respondents.

#### **STI Clinic Visiting Practice**

In the last 12 months, high proportion (51%) of the respondents in 6 districts than those (41.8%) in 16 districts had visited STI clinic. STI clinic run by NRCS was the most visited (% here) clinic by the respondents. Many of the respondents had visited for 2 to 3 times.



### **HIV Testing and Counseling (HTC) Centers Visiting Practice**

The survey results showed that major proportion (52.9%) of respondents from 6 districts visited HTC center in the last 12 months preceding the survey in comparison to those (42.3%) in 16 districts. Majority of them (% here) reported that blood samples were taken at HTC center where more than three quarters (%) had received pre HIV and AIDS test counseling whereas very few of respondents (n= ) had received post HIV and AIDS test counseling.

### **Participation in HIV Awareness Program**

The survey revealed that slightly more than a quarter of the respondents (27.7%) had ever participated in HIV and AIDS awareness raising program or community events in the last 12 months prior to the survey in all 22 districts. Comparatively, respondents (39%) of 6 districts were likely to participate in the awareness program than respondents (21.8%) of 16 districts.

### **Perception on Risk of HIV among Female Sex Workers**

#### **Stigma and Discrimination**

Relatively, high proportion (70.5 % for male relatives and 71.9 % for female relatives) of respondents of 6 districts was found positive towards taking care of HIV positive relatives than those (55.3 % for male and 58 % for female relatives) in 16 districts. In general, 48.4 % of the respondents had been willing to maintain confidentiality of HIV positive family members. Conversely, 38.2 % were not found willing. Remaining 13.4 % were found confused on their will to maintain confidentiality.

#### **Determinants of HIV Infection**

#### **Association of Socio-Demographic Characteristics and Syphilis Infection**

Age, marital status, educational status, year of sex work and sex work in India was not found to have significant association with HIV infection and current Syphilis in both regions.

#### **Association of Condom Use with HIV and Syphilis Infection**

The HIV infection at 95% CI. Regarding HIV as well as Syphilis infection, none of the condom use practice with regular clients, non-paying regular clients and clients was found to be not significant at 95% CI in 6 district region and 16 district regions.

#### **Association of Condom Carrying Practice and Comprehensive Knowledge on HIV**

None of the variables have significant association with HIV infection and Syphilis infection in any region as well as in total 22 districts with 95% CI.

#### **Transmission and Exposure to HIV Infection in the Past Year with HIV and Syphilis Infection**

The results show that there is need of strengthening of prevention programs as well as awareness programs. The respondents visiting HTC in past year and OE/PE were also found to be not significant with HIV infection and Syphilis infection.

## **Psychosocial Health of Female Sex Workers**

### **Housing Instability**

Majority (66.2%) of the respondents live in their own house in both the study regions. 43.5 % followed by living in rented house, hotel and other places while few respondents (n=) said that they don't have their own house and lives on streets.

### **Social Support and Mental Health Status of FSWs**

Most of the respondents reported that at some time, they had suicidal ideation but large number of the respondents (% here) denied when asked about suicidal plan. However, a quarter (25%) of respondents in 6 district region and 30.2 % of respondents in 16 districts region had attempted suicide.

### **Acts of Violence Faced by FSWs**

Majority of respondents in both study regions reported of not being harassed by security personals. However, 18 % of respondents in 6 districts while only 3.8 % in 16 districts said that they were being harassed.

### **Social Support and Level of Satisfaction**

The mean (SD) of the SSQN and SSQS were 1.3 (0.7) which means the survey participants in 22 Terai Highway Districts had between 1-2 supportive persons who could be counted on for different forms of social support and most (%) were fairly satisfied with the available support.

### **Depression Status**

## **6.2 The prevalence of distress and depression was very high (68.4).4Possible Policy and Program Implications**

The survey shows that HIV and syphilis prevalence is decreasing in comparison to the previous years. That means the intervention targeted to the FSWs is working and it needs to continue with greater effort.

Every year there is a high of new FSWs joining the sex work profession. Therefore, many of the girls and young women entering sex work for the first time may not be informed about the risks of HIV and STI, locations of HIV related service sites and the importance of consistent condom use with all partners. Continuous education and information on HIV knowledge and risk should be available for all FSWs. Additional community and peer-based efforts are required to identify and reach new FSWs early on and a special prevention package and extra support is needed for new comers. It is important that interpersonal behavior change communication and availability and utilization to HIV and STI services continue for all FSWs.

More than half of the FSWs are currently married which means their husbands are also at risk of HIV infection and STIs if safer sex is not always practiced. About a quarter of FSWs had ever terminated pregnancies, an indication of unwanted pregnancies and the need for family planning counseling. There is a need to provide education on HIV and STI to these FSWs, along with the importance of consistent and correct condom use for dual protection with all partners, family planning counseling and access to services and education on prevention of mother-to-child transmission (PMTCT) of HIV. Those who are using other forms of contraception need to know about and use condoms for HIV and STI protection.

Knowledge of female condoms is less than 40%, and use is very low (about 4.4%) and female condoms are not widely available free of cost. Education should be provided on female condoms, along with increased availability and linkages with social marketing.

Consistent condom use is only 59% among FSWs with their ( ) clients. This puts both them and their partners at risk of HIV and STI. The emphasis on current consistent condom use practices and focus on improved communication and negotiation among couples, especially non-paying regular partners, needs to be strengthened through continuous education outreach. Also condom distribution should be adequate for the need.

Condom carrying behavior is still low among FSWs, about 34% only. This implies that greater emphasis is required on the importance of condom-carrying behavior through improved outreach education and communication and negotiation skills for FSWs. Strengthened efforts are required to create an enabling environment for condom-carrying behavior.

Although knowledge on HIV and STI is high, the health seeking behavior of FSWs is comparatively low especially for the uptake of STI services. Interaction with OREs (47%) and participation of FSWs in the HIV awareness program (27.7%) is still low. Outreach education, increased access to HIV awareness program and referral to services should be strengthened and a comprehensive package on SRH needs of FSWs should be developed. The survey also reveals that about 45% participants had visited HTC center in the last 12 months emphasizing efforts to increase access to HTC center.

FSWs are more vulnerable to various forms of violence. They are more likely to be subjected to forceful sex, to be physically assaulted and to have clients performing objectionable acts. Prevention, treatment and care programs designed for FSWs must be made available, along with access to legal services.

Exposure to multiple risks is observed such as injecting drugs, frequent alcohol consumption and/or sex partners being people who inject drugs (PWIDs). Hence, FSWs with multiple risks need to be identified by programs and a national comprehensive package should be designed to include components on all the ways to reduce the risk of HIV e.g. prevention of sexual transmission, harm reduction etc.

More than a quarter of FSW reported having attempted suicide. Similarly around 7 out of every 10 FSW were distressed/depressed. Therefore, HIV prevention program directed towards the FSWs need to include mental health component as well in its activities.

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## ANNEXES

### Annex 1: Indicators for Monitoring and Evaluation of HIV Prevention Interventions

Prevention 1: HIV related risk and transmission among	Total (N=210)	95% CI	Total (N=400)	95% CI	Total (N=610)	95% CI
<b>Impact/Outcome Indicators</b>						
Percentage of FSWs who are HIV infected	0		1.5	0.5-2.8	1.0	0.3-2.0
Percentage of FSWs reporting the use of a condom with their most recent client						71.5-79
Percentage of FSWs reporting consistent condom use with their clients over the past 12 months				58.8-67.8		54.9-63.2
Percentage of FSWs who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission						
<b>Output/Coverage Indicators</b>						
Percentage of FSWs reached with HIV prevention service programs (BCC with OE/PE or DIC or STI Clinics or VCT or community events / trainings or drug treatment or rehabilitation)						
Percentage of FSWs reached with HIV prevention programs (Knows where to receive HIV test and received condoms)	43.3	79.5-89.5	45.5	40.8-50.7	78.7	81.6-87.6
Percentage of FSWs who received an HIV test in the last 12 months and who know their results	89.7	84.6-94.9	81.9	76.9-86.6	49.0	81.3-88.6

## Annex 2: Tables of Other Results

**Table 1: HIV Positive Respondents who Knew Their Status**

Variables	2012					
	6 Dist.		16 Dist.		22 Dist.	
	N=		N=	%	N=	%
HIV Positive respondents who knew	0	0				
Yes	0	0	3	0.8	3	0.5
No (test not done)	0	0	2	0.5	2	0.3

**Table 2: Frequency of Drug Injection**

Frequency of Drug Injection	2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Frequency of drug injecting on yesterday						
Not injected	0	0	1	100	1	100
One time	0	0	0	0	0	0
Two times	0	0	0	0	0	0
Total	0	0	1	100	1	100
Frequency of drug injections within the	0	0	1	100	1	100
Once a day	0	0	0	0	0	0
2-3 times a day	0	0	0	0	0	0
2-3 times a week	0	0	0	0	0	0
4-6 times a week	0	0	0	0	0	0
Total	0	0	1	100	1	100
Frequency of drug injection on last	0	0				
One time	0	0	0	0	0	0
Two times	0	0	0	0	0	0
Three times	0	0	1	100	1	100
Total	0	0	1	100	1	100

**Table 3: Injecting Behaviors of FSWs in the Past Week**

Injecting Practices	2012					
	6 Dist.		16 Dist.		22 Dist.	
	N	%	N	%	N	%
Frequency of injecting with a pre-used needle in the past one-week						
Never used	0	0	0	0	0	0
Not injected in the last week	0	0	1	100	1	100
Total	0	0	1	100	1	100
Frequency of injecting with a syringe/ needle picked from public place in the past one-week						
Never						
Not injected in the last week						
Total						
Sharing of syringe/needle with different persons in the past one –week						
Never shared						
Frequency of giving self-used syringe/ needle to someone else in the past one-week						
Never	0	0	1	100	1	100
Ever injected with a pre-filled syringe in the past one-week						
Yes	0	0	0	0	0	0
No	0	0	1	100	1	100
Total	0	0	1	100	1	100
Taking drugs by syringe squirted by someone else from their used syringe in the past one-week						
Sometimes	0	0	0	0	0	0
Never	0	0	1	100	1	100
Total	0	0	1	100	1	100
Sharing of cooker/vial/container, cotton/filter or rinse water in the past one –week						
Sometimes	0	0	0	0	0	0
Never	0	0	1	100	1	100
Total	0	0	1	100	1	100
Drawing up the drug solution from a common container in the past one –week						
Sometimes	0	0	0	0	0	0
Never	0	0	1	100	1	100
Total	0	0	1	100	1	100

**Table 4: Treatment/Help Received by Injecting FSWs**

Variables	2012					
	6 Dist.		16 Dist.		22 Dist.	
	N= 1	%	N=-0	%	N=1	%
Time for receiving treatment/help for						
Less than 1 month	0	0	0	0	0	0
Within 1 month	0	0	0	0	0	0
Within 4- 12 months	0	0	1	100	1	100
Total	0	0	1	100	1	100

**Table 5: Problems/Sympoms for Which Respondents Received Treatment in Past Year**

Problem/Symptoms	2012					
	6 Dist.		16 Dist.		22 Dist.	
	N=210	%	N=400	%	N=610	%
Problems/symptoms for which respondents received treatment during						
Vaginal discharge	58	27.6	101	25.3	159	26.1
Lower abdominal Pain	75	35.7	134	33.5	209	34.3
Vaginal Itching	47	22.4	131	32.8	178	29.2
Dysuria	39	18.6	72	18.0	111	18.2
Painful sex	30	14.3	65	16.3	95	15.6
Genital ulcer or sore	16	7.6	64	16.0	80	13.1
Vaginal odor	14	6.7	73	18.3	87	14.3
Polyuria	25	11.9	50	12.5	75	12.3
Genital warts	3	1.4	21	5.3	24	3.9
Unusual vaginal bleeding (discharge)	4	1.9	23	5.8	27	4.4
Other	1	0.5	2	0.5	3	0.5
Total	312	*	736	*	1048	*

Note:\* Multiple Responses Allowed



**Table 6: Distribution of Respondents reached by OE/PE by Use of Other Services**

Services used in past year	2012					
	6 Dist.		16		22	
	N=210	%	N=400	%	N=610	%
DIC visit						
Yes		53.3		40.25	273	44.8
No		46.7		59.75	337	55.2
Total	210	100	400	100	610	100
STI clinic visit						
Yes		51.0		41.8	274	44.9
No		49.0		58.3	336	55.1
Total	210	100	400	100	610	100
VCT visit						
Yes		52.9		42.3	280	45.9
No		47.1		57.8	330	54.1
Total	210	100	400	100	610	100
Participated in HIV/AIDS awareness						
Yes		39.0		21.8	169	27.7
No		61.0		78.3	441	72.3
Total	210	100	400	100	610	100

### Annex 3: Cluster Information Sheet

Cluster information \*\*\*

- a. Survey districts:
- b. Cluster number:
- c. Cluster name:
- d. Study population:
- e. Date (when cluster is visited):
- f. Actual measure of size for cluster (number of people at the site on the day):
- g. Number of people approached to be interviewed:
- h. Number of people who refused to be interviewed after being approached:
- i. Number of duplicates (people interviewed previously on another day or at another site):
- j. Number of interviews completed:

\*\*\* Responsibility of supervisors to fill in all the aforementioned information from selected cluster.

## Annex 4: Study Centre and Interview Evaluation

National Center for AIDS and STD Control (NCASC)  
Success Search Option P. Ltd.

### Integrated Biological and Behavioural Surveillance (IBBS) Study on Female Sex Workers, 22 Terai Highway Districts in Nepal

#### STUDY CENTER AND INTERVIEW EVALUATION

Respondents Listing

Any format/checklist used for FSW listing process:      Yes      No

Date:    Form Filled by: Cluster No:      Team No:

Name of Field worker:

Has respondent come through sampling methods/strategy? Yes No

1- Duration of Interview:              min

2- Please rate the interviewer on following on a scale of 1 to 5. Please tick (✓)

	Very Poor	Poor	Satisfactory	Good	Very Good
2.1 Informed Consent	1	2	3	4	5
2.2 Rapport building	1	2	3	4	5
2.3 Clarity in questioning	1	2	3	4	5
2.4 Probing by interviewer	1	2	3	4	5
2.5 Writing Eligibility	1	2	3	4	5
2.6 Quality of Information	1	2	3	4	5
2.7 Ability to answer interviewees questions	1	2	3	4	5
2.8 Availability of IEC materials	1	2	3	4	5
2.9 Room arrangement	1	2	3	4	5
2. Overall Interviewing	1	2	3	4	5

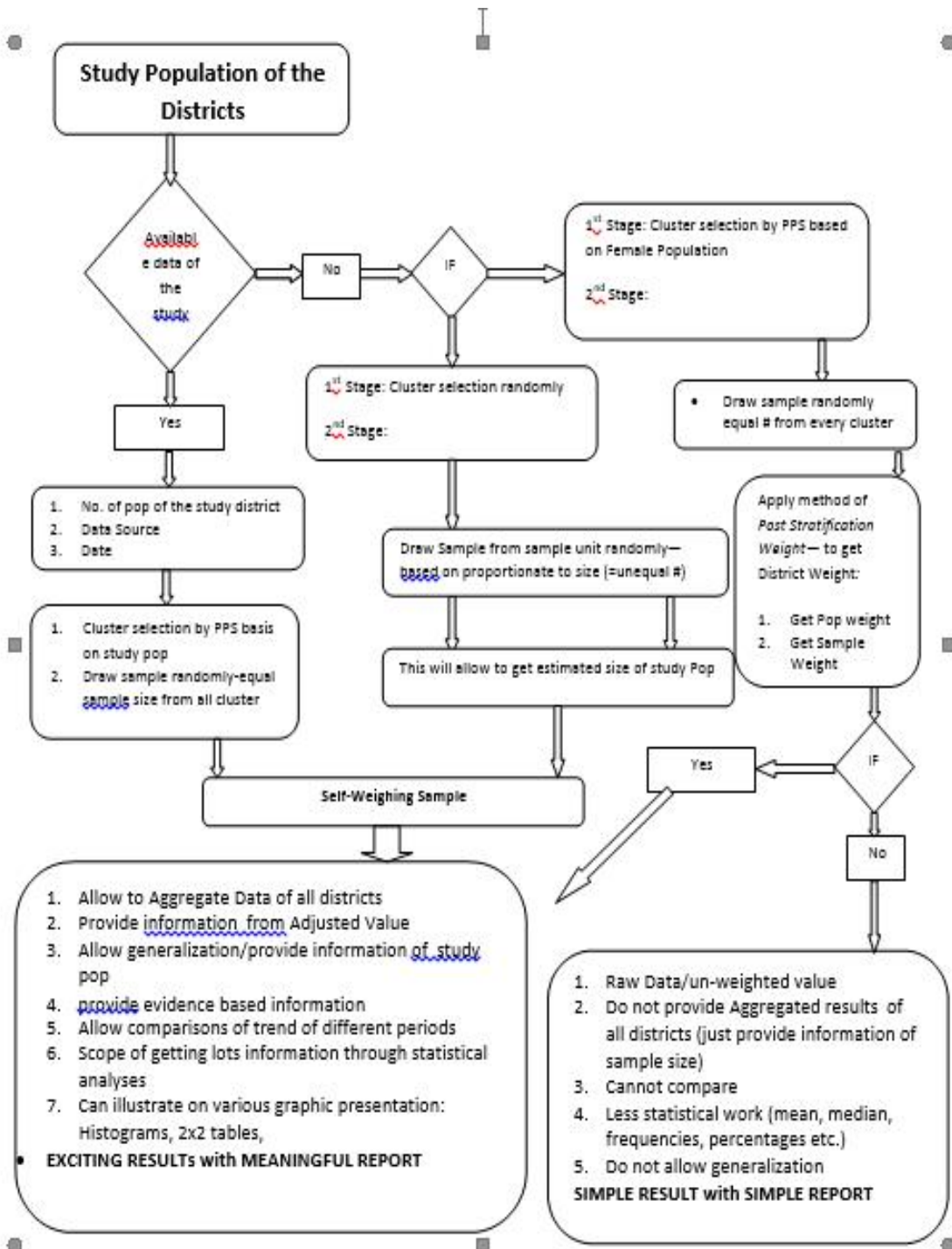
3- Interviewer explained the data confidentiality to respondent properly: Yes      No

4- Interviewer took notice of the respondents' body language: Yes      No

5- Interviewer kept ethical considerations in view while interviewing: Yes      No

6- The subjects were properly referred to VCT: Yes      No

## Annex 5: Flow Diagram of Sample Selection from Study Population of the Study Districts



## Annex 6: Survey Questionnaires

National Centre for AID and STD Control (NCASC)  
Success Search Option P. Ltd

# Integrated Biological and Behavioural Survey among Female Sex Workers in 22 Terai Highway Districts of Nepal

## Survey Questionnaires

Namaste! My name is ....., I am here from SSO Pvt. Ltd. to collect data for a research study. This survey is being conducted by SSO Pvt. Ltd. for National Centre for AIDS and STD Control (NCASC), Ministry of Health and Population. As explained in the consent taking process during this data collection, I will ask you some questions that will be about sexual behavior, use and promotion of condoms, STI/HIV, drugs and migration pattern. I believe that you will provide correct information. We will also draw a few drops of blood for HIV testing. If you have any STI symptoms, we will provide treatment for free of charge. The information given by you will be strictly treated as confidential. Nobody will know whatever we talk because your name will not be mentioned in this form and blood sample. It will take about 60 minutes to complete the interview and blood sample collection.

It depends on your willingness to participate in this survey or not. You are free to quit the survey any time you want to. You do not have to answer questions that you do not want to answer. But I hope, you will participate in this survey and make it success by providing correct answers of all the questions.

Would you be willing to participate?

1. Yes 2. No

Signature of Interviewer: ..... Date: /\_\_\_/\_\_\_/2069 DD/ MM

### Definition of Respondent

"Women aged 16 years and above reporting having been paid in cash or kind for sex with a male within the last 6 months."

Has someone interviewed you from SSO Pvt. Ltd. with a questionnaire in last few weeks?

1. Yes 2. No (Continue Interview)



When?

\_\_\_\_\_Days ago (**STOP INTERVIEW**)

Name of interviewer: \_\_\_\_\_ Code No. of Interviewer: .....

Checked by the supervisor: Signature: \_\_\_\_\_ Date: /\_\_\_/\_\_\_/2069

Data Entry # 1: Clerk's name: \_\_\_\_\_ Date: /\_\_\_/\_\_\_/2069

Data Entry # 2: Clerk's name: \_\_\_\_\_ Date: /\_\_\_/\_\_\_/2069

## 1.0 GENERAL INFORMATION

Q. N.	Questions and Filters	Coding Categories	Skip to
101	Respondent ID No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
101.1	Write down how you contacted the respondent?	Met personally ..... 1 Through known FSW ..... 2 Through PE..... 3 Through ORE from Red Cross ..... 4 Other (Specify)_ ..... 96	
1.02	Where is the respondent (sex worker) based?	Disco ..... 1 Dance Restaurant ..... 2 Cabin Restaurant..... 3 Call Girl ..... 4 Massage Parlor..... 5 House Settlement ..... 6 Bhatti Pasal ..... 7 Street ..... 8 Garment/Carpet Factory ..... 9 Squatter/Refugee..... 10 Restaurant/Tea shop..... 11 Dohori Restaurant ..... 12 Hotel/Lodge ..... 13 Other (Specify)_ ..... 96	
103	Interview Starting Time Interview Completion Time (fill at the end of interview)	_____	
104	Where were you born?	District _____ VDC/Municipality _____ Ward No. .... Village/Tole _____	
105	Where do you live now?  (Name of Current Place of Residence)	District ..... VDC/Municipality ..... Ward No. .... Village/Tole.....	
106	How long have you been living continuously at this location?	Month ..... Always (since birth) ..... 0 Since less than a month..... 995	201
107	Before you moved here, where did you live?	District ..... VDC/Municipality ..... Ward No. .... Village/Tole .....	

## 2.0 PERSONAL INFORMATION

<i>Q. N.</i>	<i>Questions and Filters</i>	<i>Coding Categories</i>	<i>Skip to</i>
201	How old are you?	Age .....  <b>(Write the completed years)</b>	
202	What is your caste?  <i>(Specify Ethnic Group/Caste)</i>	Ethnicity/Caste _____ (Specify) Code No .....	
203	What is your educational status? <u>Code:</u> Passed class 1-9 = 01-09 Test Passed = 9 S.L.C. passed = 10 Passed certificate/12 class = 11 Passed B.A and above =12	Illiterate..... 0 Literate ..... 19 Grade ..... <b>(Write the completed grade)</b>	
204	What is your present marital status?	Married ..... 1 Divorced/Permanently Separated ..... 2 Widow ..... 3 Never married ..... 4	204.2  204.3
204.1	How old were you when you got divorced/separated/widowed?	Age .....  <b>(Write the completed years)</b>	204.3
204.2	Are you presently living with your husband?	Yes ..... 1 No ..... 2	204.3.1
204.3	Who are you living with now?  <i>(Multiple answers. DO NOT READ the possible answers)</i>	Male friend ..... 1 Relatives ..... 2 Other females ..... 3 Children..... 4 Alone ..... 5  Others (Specify).....96	
204.3.1	Which of the following best describes your current living situation? (Select only one option)	Homeless on the street.....1 Living in own home.....2 Living in a residential hotel.....3 Rented apartment/room.....4 Other (specify).....96	205
204.3.2	How often your landlord or male partner forced you to vacate the rented room or apartment in the last 5 years?	Never.....1 Once/twice.....2 Three to five times.....3 More than five times.....4 Do not remember .....98	
205	At what age were you married for the first time?	Years old .....  <b>(Write Complete Years)</b>	

205.1	Have you ever given birth to children? (Include all live births even those who	Yes ..... 1 No ..... 2	205.5
205.2	If yes, how many were live births? (Include all live births even those who died after <del>some time but don't include still births</del> )	Sons ..... Daughters .....	
205.3	Have you had miscarriage during your any	Yes ..... 1 No ..... 2	205.5
205.4	If yes, total number of miscarriage	# Terminations .....	
205.5	Have you done termination/abortion of your	Yes ..... 1 No ..... 2	205.8
205.6	If yes, total number of pregnancy terminated/aborted	# Terminations .....	
205.7	Who assisted you at last abortion	Doctor..... Nurse.....2	
205.8	Do you want to have a child in the next two	Yes ..... 1 No ..... 2	205.9
205.8.1	Do you want to have a child in the next 6 months?	Yes ..... 1 No ..... 2	
205.9	Were you pregnant in the last 12 months? (Include currently pregnant women too)	Yes ..... 1 No ..... 2	205.14
205.10	(Don't ask 205.10, 205.11 and 205.12 to those who are currently pregnant and skip to 205.13 ) If Yes, What was the outcome of the last pregnancy? If the response is 3 or 4 check Q.N.205.6 or 205.7)	Live Birth..... 1 Still Birth ..... 2 Spontaneous abortion..... 3 Forced Abortion ..... 4	205.14 205.14
205.11	Who assisted your last delivery?	Doctor .....1 Nurse.....2 Midwife .....3 TBA .....4 Traditional healer .....5 Friend.....6 Nobody .....7 Others (Specify) .....96	
205.12	Where did you deliver your last child?	Home ..... 1 Health Post (HP) ..... 2 Sub Health Post (SHP)..... 3 Primary Health Center (PHC)..... 4 District Hospital..... 5 Other (Specify)_ 96	
205.13	Now I would like to talk about family planning – the various ways or methods that a couple can use to delay or avoid a pregnancy  Which ways or methods have you heard about? <i>(Lead the each Questions, Multiple answers Possible)</i>		
01	FEMALE STERILIZATION- women can have an operation to avoid having any more children	Yes ..... 1 No ..... 2	
02	MALE STERILIZATION- men can have an operation to avoid having any more children	Yes ..... 1 No ..... 2	



03	PILL- women can take a pill every day to avoid becoming pregnant	Yes ..... 1 No ..... 2	
04	IUD – women can have a loop or coil placed inside tem by a doctor or a nurse	Yes ..... 1 No ..... 2	
05	INJECTABLES – women can have an injection by a health provider that stops them from becoming pregnant for one or more months	Yes ..... 1 No ..... 2	
06	IMPLANTS- women can have several small rods placed in their upper arm by a doctor or a nurse which can prevent pregnancy for one or more years Implants:	Yes ..... 1 No ..... 2	
07	CONDOM – men can put a rubber sheath on their penis before sexual intercourse	Yes ..... 1 No ..... 2	
08	RHYTHM METHOD – Every month that a woman is sexually active she can avoid pregnancy by not having sexual intercourse on the days of the month she is not likely to get pregnant Rhythm Method:	Yes ..... 1 No ..... 2	
09	WITHDRAWAL – Men can be careful and pull out before climax	Yes ..... 1 No ..... 2	
10	Have you heard any other ways or method that women or men can use to avoid pregnancy?	Yes ..... 1 (Specify) No ..... 2	
205.14	Are you currently doing something or using any method to delay or avoid getting pregnant?	Yes ..... 1 No ..... 2	206
205.15	If yes, which method are you using currently? <b>(Multiple answers possible, Do NOT READ the Possible answers)</b>		
01	FEMALE STERILIZATION- women can have an operation to avoid having any more children	Yes ..... 1 No ..... 2	
02	MALE STERILIZATION- men can have an operation to avoid having any more children	Yes ..... 1 No ..... 2	
03	PILL- women can take a pill every day to avoid becoming pregnant	Yes ..... 1 No ..... 2	
04	IUD – women can have a loop or coil placed inside tem by a doctor or a nurse	Yes ..... 1 No ..... 2	
05	INJECTABLES – women can have an injection by a health provider that stops them from becoming pregnant for one or more months	Yes ..... 1 No ..... 2	
06	IMPLANTS- women can have several small rods placed in their upper arm by a doctor or a nurse which can prevent pregnancy for one or	Yes ..... 1 No ..... 2	
07	CONDOM – men can put a rubber sheath on their penis before sexual intercourse	Yes ..... 1 No ..... 2	

08	RHYTHM METHOD – Every month that a woman is sexually active she can avoid pregnancy by not having sexual intercourse on	Yes ..... 1 No ..... 2	
09	WITHDRAWAL – Men can be careful and pull out before climax	Yes ..... 1 No ..... 2	
10	Are you currently using any method that women or men can use to avoid pregnancy?	Yes ..... 1 (Specify) (Specify) No ..... 2	
<i>Check Q. N. 204, if it is divorced/permanently/separated (2), widow (3) or never married (4), skip to Q.N. 207</i>			
206	Does your husband have co-wife now?	Yes ..... 1 No ..... 2	
207	Are there people who are dependent on your income?	Yes ..... 1 No ..... 2	208
207.1	How many are dependent on your income? <b>(Adults are those who have completed 18 years)</b>	Adults ..... Children .....	
208	How long have you been exchanging sexual intercourse for money or other things? <b>(If answer is less than 6 months stop interview)</b>	Months ..... Don't know..... 98	
208.1	Did you have any sexual intercourse during past 12 months?	Yes ..... 1 No ..... 2	<b>Stop Interview</b>
209	How many months have you been working here as a sex worker at this place?	.....	
210	Where else have you worked as a sex worker? <b>(For example: Bhatti shop, Cabin Restaurant, Discotheques etc.) Mention location in the space provided</b> <b>(Multiple answers. DO NOT READ the possible answers)</b>	Discothèque ..... 1 Dance restaurant ..... 2 Cabin restaurant ..... 3 Call girl ..... 4 Massage parlor..... 5 House ..... 6 Bhatti pasal ..... 7 Road ..... 8 Garment/carpet factory ..... 9 Squatter settlement/refugee..... 10 Restaurant ..... 11 Dohori restaurant ..... 12 Hotel/lodge ..... 13 Did not work anywhere else ..... 0 Others (Specify).....96	
211	Have you ever been engaged in this profession in other locations too?	Yes..... 1 No..... 2	213
211.1	Where did you work? <b>(List all the places mentioned by the respondent)</b>	<b>District VDC/Municipality</b> <b>Village/Toles</b> 1 _____ 2 _____ 3 _____	
212	In the past one-year have you followed this profession in other locations also?	Yes ..... 1 No ..... 2	213

212.1	Where did you follow such profession?  (List all the places)	<b>District VDC/Municipality Village/Tole</b> 1 _____ 2 _____ 3 _____ 4 _____	
213	Have you ever followed this profession even in India?	Yes..... 1 No..... 2	216
213.1	Where did you work in India?  (List all the locations worked in India)	<b>Name of Places Name of Nearby City</b> 1 _____ 2 _____ 3 _____ 4 _____	
214	In total, for how many months did you work as a sex worker in India?		
215	Have you ever been trafficked (tricked or forced) into a job as an entertainer?	Months .....1 Yes ..... No.....2	
216	What is your average weekly income from commercial sex?	Cash _____Rs.	
	[Note: If there is '0' in both cash and gift equivalent, probe for the reasons]	Gift equivalent to _____Rs. Others (Specify)..... 96	
217	Do you have any other work besides sex work?	Yes ..... 1 No ..... 2	218

### 3.0 INFORMATION ON SEXUAL INTERCOURSE

Q. N.	Questions and Filters	Coding Categories	Skip to
301	How old were you at your first sexual intercourse?	Year's old ..... Don't know/Can't recall .....98	
301.1	Your first sexual intercourse (vaginal/anal) is forced or consensual one?	Forced..... 1 Consensual.....2 Don't know/Can't recall .....98	
302	Among all of your partners, how many of them had sex with you in exchange for money in the past week?	Number ..... Don't know..... 98	
303	Among all of your partners, how many of them had sex with you without paying any money in the past week? (Include sexual contacts with spouse and live-in sexual partners)	Number ..... Don't know..... 98	
304	With how many different sexual partners in total have you had sex during the past week? (Note: Check total number of partners in Q. 302 + Q. 303 to match with Q 304)	Number ..... Don't know..... 98	

305	Usually, how many clients visit you in a day?	Number .....	
305.1	With how many clients did you have sexual intercourse yesterday?	Number .....	
306	In the past month, with which profession's client did you mostly have sex?  <b>(Encircle three most reported types of client. DO NOT READ the possible answers)</b>	Bus, truck or tanker worker..... 1 Taxi, jeep, microbus or minibus worker ..... 2 Industrial/wage worker ..... 3 Police..... 4 Soldier/Army ..... 5 Student ..... 6 Rickshawala ..... 7 Service holder..... 8 Businessmen..... 9 Mobile Businessmen..... 10 Migrant worker/lahurey ..... 11 Contractor ..... 12 Foreigner (Indian and other Nationals) ..... 14 Farmer..... 15 Others (Specify) ..... 96 Don't know ..... 98	
306.1	What was the professional background of your last client?	Bus, truck or tanker worker..... 1 Taxi, jeep, microbus or minibus worker ..... 2 Industrial/wage worker ..... 3 Police..... 4 Soldier/Army ..... 5 Student ..... 6 Rickshawala ..... 7 Service holder..... 8 Businessmen..... 9 Mobile Businessmen..... 10 Migrant worker/lahurey ..... 11 Contractor ..... 12 Foreigner (Indian and other Nationals)..... 14 Farmer..... 15 Others (Specify) ..... 96 Don't know..... 98	
307	How many days in a week (on an average) do you work as a sex worker?	Days .....	
308	When did you have the last sexual intercourse with a client? <b>(Write '00' if Today)</b>	Days before.....	
309	How many partners did you have sexual intercourse with on that day?	Number .....	
310	How much rupees or other items did the last client pay you?  (Note: If there is '00' in both cash and gift equivalent, mention the reasons)	Cash Rs. Gift equivalent to Rs. Others (Specify)_ ..... 96 Total Rs.	

#### 4.0 USE OF CONDOM AND INFORMATION ON SEX PARTNERS

##### *Condom use with Clients*

Q. N.	Questions and Filters	Coding Categories	Skip to
401	The last time you had sex with your client, did he use a condom?	Yes ..... 1 No ..... 2	401.2
401.1	Who suggested condom use at that time?	Myself ..... 1 My Partner ..... 2 Don't know ..... 98	402
401.2	Why didn't your client use a condom at that time?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Not available..... 1 Too expensive..... 2 Partner objected ..... 3 I didn't like to use it..... 4 Used other contraceptive..... 5 Didn't think it was necessary ..... 6 Didn't think of it..... 7 Client offered more money ..... 8 Didn't know / not aware about condom..... 9 Other (Specify) ..... 96 Don't know ..... 98	
402	How often did your clients use condom over the past 12 months?	All of the time..... 1 Most of the time..... 2 Some of the time ..... 3 Rarely ..... 4 Never ..... 5	403
402.1	Why didn't your client use condom always?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Not available..... 1 Too expensive..... 2 Partner objected ..... 3 I didn't like to use it..... 4 Used other contraceptive..... 5 Didn't think it was necessary ..... 6 Didn't think of it..... 7 Client offered more money ..... 8 Didn't know / not aware about Condom ..... 9 Other (Specify) ..... 96 Don't know ..... 98	

##### *Condom use with Regular Client*

Q. N.	Questions and Filters	Coding Categories	Skip to
403	Do you have any client who visits you on regular basis?	Yes ..... 1 No ..... 2	406
404	Did your regular client use condom in the last sexual contact with you?	Yes ..... 1 No ..... 2	404.2
404.1	Who suggested condom use at that time?	Myself ..... 1 My Partner ..... 2 Don't know ..... 98	405
404.2	Why didn't your regular client use a condom at that time?	Not available..... 1 Too expensive..... 2 Partner objected ..... 3	
405	How often did your regular clients use condom with you over the past 12 months?	All of the time..... 1 Most of the time ..... 2 Some of the time ..... 3	406

405.1	Why didn't they use condom always?	Not available..... 1 Too expensive..... 2 Partner objected ..... 3	
405.1.1	If a client (regular or casual) refuses to use a condom, what do you usually do?	Refuses to have sex with the client....1 Forces the client to use a condom....2 Explains the advantages of condoms..3 Still has sex with the client.....4 Only takes medication/treatment after sex.....5 Other (Specify) ..... 96 Don't know.....98	
405.1.2	How often do you have sex with regular and casual clients without condoms to make more money within 6 months?	Always.....1 Most of the time.....2 Sometimes.....3 Never.....4 Don't know.....98 No response.....99	

*Condom use with Non-paying regular Cohabiting Partner (Husband or Male Friend)*

Q. N.	Questions and Filters	Coding Categories	Skip to
406	Did you have sexual intercourse with your husband or a male friend in past six months?	Yes ..... 1 No ..... 2	409
407	Think about your most recent sexual intercourse with your husband or male partner. How many times did you have sexual intercourse with this person over the last 30 days? <b>(Write '00' for none intercourse in past one month)</b>	Number of times ..... Don't know..... 98	
408	The last time you had sex with your husband or male friend staying to gather, did your sex partner use a condom?	Yes ..... 1 No ..... 2	408.2
408.1	Who suggested condom use that time?	Myself ..... 1 My Partner ..... 2 Don't know..... 98	409
408.2	Why didn't your partner use a condom that time?	Not available..... 1 Too expensive..... 2 Partner objected ..... 3 I didn't like to use it..... 4 Used other contraceptive..... 5 Didn't think it was necessary ..... 6 Didn't think of it..... 7 Trust partner ..... 8 Wish to have child ..... 9 Other (Specify) ..... 96 Don't know ..... 98	

409	How often did all of your non-paying regular partners use condoms over the last 12 months?	All of the time ..... 1 Most of the time ..... 2 Some of the time ..... 3 Rarely ..... 4 Never..... 5 Did not have sexual intercourse in the last 12 months ..... 6	410     410 →
409.1	Why didn't they use condom always?  (Multiple answers. DO NOT READ the possible answers)	Not available..... 1 Too expensive..... 2 Partner objected ..... 3 I didn't like to use it..... 4 Used other contraceptive..... 5 Didn't think it was necessary ..... 6	→

*Condom use with sex partners other than clients, husbands and male friends living together*

Q. N.	Questions and Filters	Coding Categories	Skip to
410	During the past one year, did you have sexual intercourse with a person other than your client, husband/ male friend?	Yes ..... → No ..... 2	412.2
411	Did he use condom when he had last sexual contact with you?	Yes ..... → No ..... 2	411.2
411.1	Who suggested condom use at that time?	Myself ..... 1 My Partner ..... 2 Don't know ..... 98	412
411.2	Why didn't he use condom at that time?	Not available..... 1 Too expensive..... 2 Partner objected ..... 3 I didn't like to use..... 4 Used other contraceptive..... 5 Didn't think it was necessary ..... 6 Didn't think of it..... 7 Other (Specify) ..... 96 Don't know ..... 98	
412	How often did your other partners use condom with you over the past 12 months?	All of the time..... 1 Most of the time ..... 2 Some of the time ..... 3 Rarely ..... 4 Never ..... 5	412.2
412.1	Why did your other partners not use condom regularly?  (Multiple answers. DO NOT READ the possible answers)	Not available..... 1 Too expensive..... 2 Partner objected ..... 3 I didn't like to use..... 4 Used other contraceptive..... 5	

*Knowledge and use of female condom*

Q. N.	Questions and Filters	Coding Categories	Skip to
412.2	Have you heard about condoms that can be used by women?  (If the respondent has not heard about female condom, explain what they are before asking questions)	Yes ..... 1 No ..... 2	412.7

412.3	If yes, from where did you know about this?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Radio ..... 1 TV ..... 2 Pharmacy ..... 3 Health Post/Health Center ..... 4 Hospital ..... 5 Health Workers/Volunteers ..... 6 Friends/Relatives/Neighbors..... 7 NGO staff ..... 8 Newspapers/Posters ..... 9 Video Van ..... 10 Street Drama ..... 11 Cinema Hall ..... 12 Community interaction/training..... 13 Bill Board/Sign Board ..... 14 Comic Book ..... 15 Community Workers ..... 16 Other (Specify) ..... 96	
412.4	Have you ever used female condoms?	Yes ..... 1 No ..... 2	412.7
412.5	When was the last time you used female condom?	Within a month ..... 1 1-5 months before ..... 2 6-11 months before ..... 3 More than 12 months before ..... 4 Don't remember/know ..... 98	
412.6	Who was your sex partner when you used female condom last time?	Regular partner ..... 1 Client ..... 2 Regular client..... 3 Others (Specify)..... 4 Don't know..... 98	
412.7	In your opinion are female condoms useful for women like you?	Yes ..... 1 No ..... 2	
413	With whom did you have your last sexual intercourse in the past one year?	Client..... 1 Husband/male friend..... 2	
413.1	Did you use condom at that time?	Yes ..... 1 No ..... 2	

*Condom Accessibility*

Q. N.	Questions and Filters	Coding Categories	Skip to
414	Do you usually carry condoms with you?	Yes ..... 1 No ..... 2	415
414.1	At this moment, how many condoms do you have at-hand with you? <b>(Observe and write)</b>	Number .....	



415	Which places or persons do you know from where/whom you can obtain condoms?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Health Post/ health center..... 1 Pharmacy..... 2 General retail store (Kirana Pasal)..... 3 Private clinic ..... 4 Paan shop ..... 5 Hospital ..... 6 FPAN clinic..... 7 Peer/friends..... 8 NGO/health workers/volunteers..... 9 Hotel/lodge ..... 10 Client/other sex partner..... 11 Massage parlor..... 12 Bhatti pasal ..... 13 Other (Specify)_____96 Don't know ..... 98	
415.1	How long does it take for you to obtain a condom from the nearest spot from your house or your working place?	Minutes ..... No knowledge/not aware of condom..... 95	
416	How do you usually obtain condoms?  <b>(Buy, obtain free of cost or both ways)</b>	Always free of cost ..... 1 Purchase ..... 2 Obtain both ways ..... 3 Condom never used ..... 4	417  418
416.1	From where do you often obtain free condoms?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Health Post/Health Center ..... 1 Hospital..... 2 FPAN clinics..... 3 Peers/friends.. ..... 4 Community events ..... 5 NGO/Health Workers/Volunteers..... 6 Client/other sex partner..... 7 Massage parlor..... 8 Hotel/lodge/restaurant..... 9 Bhatti pasal ..... 10 Others (Specify)_____ 96	
416.2	Which would be the most convenient place/s for you to obtain free condoms?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Health Post/Health Center ..... 1 Hospital..... 2 FPAN clinics..... 3 Peers/friends.. ..... 4 Community events ..... 5 NGO/Health Workers/Volunteers..... 6 Client/other sex partner ..... 7 Massage parlor..... 8 Hotel/lodge/restaurant..... 9 Bhatti pasal ..... 10 Others (Specify)_ ..... 96	
416.3	In the last 12 months, have you been given condoms by any organizations?	Yes - free ..... 1 Yes – on cash ..... 2 No ..... 3	
<b>Note: If response is '1' in Q416 Go to Q418 after 416.3</b>			

417	From where do you often purchase condoms?  (Multiple answers. DO NOT READ the possible answers)	Pharmacy ..... 1  General retail store (Kirana Pasal).....2 Private clinic ..... 3 Pan Shop ..... 4 Hotel/lodge/restaurant..... 5	
417.1	Which would be the most convenient place/s for you to purchase condoms?  (Multiple answers. DO NOT READ the possible answers)	Pharmacy ..... 1  General retail store (Kirana Pasal).....2 Private clinic ..... 3 Pan Shop ..... 4 Hotel/lodge/restaurant..... 5	

*Type of Sex Practice, Abuse*

Q. N.	Questions and Filters	Coding Categories	Skip to
418	During the past one-year, did any of your sexual partners force you to have sex with them against your wish?	Yes ..... 1 No ..... 2	
419	Did any person physically assault you (for any reason) in the past year?	Yes ..... 1 No ..... 2	
419.1	Did you being stopped, searched or detained by the police in the past 6 months ?	Yes ..... 1 No ..... 2	
420	In the past year, did any of your clients perform such act/s that you did not like?	Yes ..... → 1 No ..... 2	422
421	If yes, what were they?	Oral sex ..... 1 Masturbation ..... 2 Anal/Vaginal sex ..... 3 Beaten up ..... 4 Snatched /stole money ..... 5 Used abusive language (bhalu etc.) ..... 6 Ran away without paying..... 7 Burnt with cigarette ..... 8 Forced to have sex after drinking alcohol ..... 9 Other (Specify) .....96	
422	In the past year, did you have other type of sexual intercourse other than vaginal? (INSTRUCTION TO INTERVIEWER: Explain the other types of sexual intercourse besides vaginal (such as oral, anal)	Yes ..... 1 No ..... 2	501
422.1	If yes, what type of sexual act/s were they? (Multiple answers. DO NOT READ the possible answers)	Oral ..... 1 Anal ..... 2 Masturbation ..... 3 Other (Specify) 96	
422.2	What type of sexual contact did you have with your last client?  (Multiple answers. DO NOT READ the possible answers)	Oral ..... 1 Anal ..... 2 Masturbation ..... 3 Vaginal..... 4 Other (Specify) ..... 96	

## 5.0 AWARENESS OF HIV/AIDS

Q. N.	Questions and Filters	Coding Categories	Skip to
501	Have you ever heard of HIV/AIDS?	Yes ..... 1 No .....2	601
502	Of the following sources of information, from which sources have you collected information on HIV/AIDS within the past one-year?		
	<b>Source of Information</b>	<b>Y</b>	<b>No</b>
	1. Radio	1	2
	2. Television	1	2
	3. Newspapers/Magazines	1	2
	4. Pamphlets/Posters	1	2
	5. Health Workers	1	2
	6. School/Teachers	1	2
	7. Friends/Relatives	1	2
	8. Work Place	1	2
	9. People from NGO	1	2
	10. Video Van	1	2
	11. Street Drama	1	2
	12. Cinema Hall	1	2
	13. Community Event/Training	1	2
	14. Bill Board/Sign Board	1	2
	15. Comic Book	1	2
16. Community Workers	1	2	
96. Others (Specify) _____	1	2	

### *Knowledge, Opinion and Misconception about HIV/AIDS*

Q. N.	Questions and Filters	Coding Categories	Skip to
503	Do you know anyone who is infected with HIV or who has died of AIDS?	Yes ..... → 1 No ..... 2	505
504	Do you have a close relative or close friend who is infected with HIV or has died of AIDS?	Yes, a close relative ..... 1 Yes, a close friend..... 2 No ..... 3	
505	Can people protect themselves from HIV by keeping sexual contact with only one uninfected faithful sex partner?	Yes ..... 1 No ..... 2 Don't know..... 98	
506	Can people protect themselves from HIV, virus-causing AIDS, by using condom correctly in each sexual contact?	Yes ..... 1 No ..... 2 Don't know..... 98	
507	Do you think a healthy-looking person can be infected with HIV?	Yes ..... 1 No ..... 2 Don't know..... 98	
508	Can a person get the HIV virus from mosquito bite?	Yes ..... 1 No ..... 2 Don't know..... 98	
509	Can a person get HIV by sharing a meal with an HIV infected person?	Yes ..... 1 No ..... 2 Don't know..... 98	

510	Can a pregnant woman infected with HIV/AIDS transmit the virus to her unborn child?	Yes ..... 1 No ..... 2 Don't know..... 98	512
511	What can a pregnant woman do to protect her child from HIV transmission?	Cannot do anything/cannot protect the child ..... 0 Take Medication ..... 1 Abort the child ..... 2 Other (Specify)..... 96 Don't know..... 98	
512	Can a woman with HIV/AIDS transmit the virus to her new-born child through breastfeeding?	Yes ..... 1 No ..... 2 Don't know..... 98	
513	Can people protect themselves from HIV virus by abstaining from sexual intercourse?	Yes ..... 1 No ..... 2 Don't know..... 98	
514	Can a person get HIV by holding an HIV infected person's hand?	Yes ..... 1 No ..... 2 Don't know..... 98	
515	Can a person get HIV, by using previously used needle/syringe?	Yes ..... 1 No ..... 2 Don't know..... 98	
516	Can blood transfusion from an infected person to the other transmit HIV?	Yes ..... 1 No ..... 2 Don't know..... 98	
517	Is it possible in your community for someone to have a confidential HIV test?	Yes ..... 1 No ..... 2 Don't know..... 98	
517.1	Do you know where can you go for HIV testing?	Yes ..... 1 No ..... 2	
518	<b>I don't want to know the result</b> , but have you ever had an HIV test?	Yes ..... 1 No ..... 2	601
519	Did you voluntarily undergo the HIV test or because it was required?	Voluntarily ..... 1 Required..... 2	
520	<b>Please do not tell me the result</b> , but did you find out the result of your test?	Yes ..... 1 No ..... 2	522
521	Why did you not receive the test result?	Sure of not being infected..... 1 Afraid of result..... 2 Felt unnecessary..... 3 Forgot it ..... 4 Other (Specify)..... 96	
522	When did you have your most recent HIV test?	Within last 12 months ..... 1 Between 1-2 years..... 2 Between 2-4 years..... 3 More than 4 years ago..... 4	
523	Have you taken up HIV testing in the past 12 months?	Yes ..... 1 No ..... 2	601
524	<b>I don't want to know the results</b> , but did you receive the results of that test?	Yes ..... 1 No ..... 2	

**6.0 PROMOTION OF CONDOM**

Q. N.	Questions and Filters	Coding Categories	
601	In the past one-year have you seen, read or heard any advertisements about condoms from the following sources? <b>(READ THE FOLLOWING LIST)</b>		
	<b>Sources of Information</b>	<b>Y</b>	<b>N</b>
	1. Radio	1	2
	2. TV	1	2
	3. Pharmacy	1	2
	4. Health Post/ Health Center	1	2
	5. Hospital	1	2
	6. Health Workers/Volunteers	1	2
	7. Friends/Neighbors	1	2
	8. NGOs	1	2
	9. Newspapers/Posters	1	2
	10. Video Van	1	2
	11. Street Drama	1	2
	12. Cinema Hall	1	2
	13. Community Event/Training	1	2
	14. Bill Board/Sign Board	1	2
	15. Comic Book	1	2
16. Community Workers	1	2	
96. Others (Specify) _____	1	2	
602	<p>What message did you get from the advertisement?</p> <p><b>(Multiple answers. DO NOT READ the possible answers)</b></p>	<p>Condoms should be used to avoid HIV/AIDS..... 1</p> <p>Condoms should be used to avoid STI..... 2</p> <p>Condoms should be used for family planning, other family planning messages ..... 3</p> <p>Other (Specify) ..... 96</p>	
603	<b>In the past one-year, have you ever seen, heard or read following messages?</b>		
	<b>Messages/Characters</b>	<b>Yes</b>	<b>No</b>
	1. Jhilke Dai Chha Chhaina Condom	1	2
	2. Condom Kina Ma Bhaya Hunna Ra	1	2
	3. Youn Rog Ra AIDS Bata Bachnalai Rakhnu Parchha Sarbatra Paine Condom	1	2
	4. Ramro Sanga Prayog Gare Jokhim Huna Dinna Bharpardo Chhu Santosh Dinchhu Jhanjhat	1	2
	5. Condom Bata Surakchhya, Youn Swasthya Ko Rakchhya AIDS Ra Younrog Bata Bachna Sadhai Condom Ko Prayog Garau	1	2
	6. HIV/AIDS Bare Aajai Dekhee Kura Garau	1	2
	7. Ek Apas Ka Kura	1	2
	8. Maya Garaun Sadbhav Badaun	1	2
9. Des Pardes	1	2	

603.1	Besides above messages have you seen, heard or read any other messages relating to STI/HIV/AIDS?	Yes ..... 1 No ..... 2	604
603.2	What are they?	Advertisement on No.1 condom..... 1 Condom lagaun, AIDS bhagaun..... 2 Others (specify).....96	
604	During the past one-year what brand of condoms did you use most of the time?  (Record first three)	Never used condom ..... 0 Number One..... 1 Dhaal..... 2 Panther ..... 3 Kamasutra ..... 4 Jodi..... 5 Black cobra ..... 6 Condom with no brand name (MOH white, red) ..... 7 Lilly ..... 8 Vega..... 9 Skin less ..... 10 Play Vet ..... 11 Did not use in the past 12 months... 95	

*Knowledge of and Participation in STI and HIV/AIDS Programs*

Q. N.	Questions and Filters	Coding Categories	Skip to
605	Have you met or discussed or interacted with peer educators (PE) or outreach educators (OE) in the last 12 months?	Yes ..... 1 → No ..... 2 No response ..... 99	609
606	When you met/discussed/interacted with PE or OE, what activities did they involve you in?  (Multiple answers. DO NOT READ the possible answers)	Discussion on how HIV/AIDS is/isn't transmitted ..... 1 Discussion on how STI is/isn't transmitted ..... 2 Regular/non-regular use of condom . 3 Demonstration on using condom correctly ..... 4 STI treatment/cure after treatment ..... 5 Counseling on reducing number of sex partner..... 6 Training on HIV and STI, Condom day, AIDS day, participation in discussions and interaction programs ..... 7 Others (Specify)..... 96	

607	<p>Do you know from which organization were they?</p> <p><b>(Multiple answers. DONOT READ the possible answers)</b></p>	<p>AMDA ..... 1  GWP ..... 2  Trinetra ..... 3  WATCH..... 4  ICH ..... 5  NSARC ..... 6  NRCS ..... 7  INF/Paluwa ..... 8  Siddhartha Club ..... 9  CAC ..... 10  SACTS ..... 11  NFCC ..... 12  NAPN ..... 13  SPARSHA ..... 14  Change Nepal..... 15  PSI ..... 16  Sathi Sanstha..... 17  Indreni Sewa Samaj ..... 18  Step Nepal..... 19  Swan Nepal ..... 20  Others (Specify) _____ 96  Don't know ..... 98</p>	
608	<p>How many times have you been visited by PE and/or OE in the last 12 months?</p>	<p>Once ..... 1  2-3 times ..... 2  4-6 times ..... 3  7-12 times ..... 4  More than 12 times ..... 5</p>	
609	<p>Have you visited or been to any drop in center (DIC) in the last 12 months?</p>	<p>Yes ..... 1  No ..... 2</p>	613
610	<p>What did you do at DIC?</p> <p><b>(Multiple answers. do not read the possible answers)</b></p>	<p>Went to collect condoms ..... 1  Went to learn the correct way of using condom. .... 2  Went to watch film on HIV/AIDS... 3  Participated in discussion on HIV transmission... 4  Participated in discussion on STI transmission... 5  Participated in training, interaction and discussion programs on HIV/AIDS and STI..... 6  Went to collect IEC materials ..... 7  Went for STI treatment ..... 8  Took friend with me..... 9  Other (Specify)_ ..... 96</p>	

611	<p>Do you know which organizations run those DICs ?</p> <p><b>(Multiple answers. DO NOT READ the possible answers)</b></p>	<p>AMDA ..... 1</p> <p>GWP ..... 2</p> <p>Trinetra ..... 3</p> <p>WATCH..... 4</p> <p>ICH ..... 5</p> <p>NSARC ..... 6</p> <p>NRCS ..... 7</p> <p>INF/Paluwa ..... 8</p> <p>Siddhartha Club ..... 9</p> <p>CAC ..... 10</p> <p>SACTS ..... 11</p> <p>NFCC ..... 12</p> <p>NAPN ..... 13</p> <p>SPARSHA ..... 14</p> <p>Change Nepal..... 15</p> <p>Indreni Sewa Samaj ..... 16</p> <p>PSI ..... 17</p> <p>Sathi Sanstha..... 18</p> <p>Step Nepal..... 19</p> <p>Swan Nepal ..... 20</p> <p>Others (Specify) ..... 96</p> <p>Don't know ..... 98</p>	
612	<p>How many times have you visited such DICs in the last 12 months?</p>	<p>Once..... 1</p> <p>2-3 times ..... 2</p> <p>4-6 times ..... 3</p> <p>7-12 times ..... 4</p> <p>More than 12 times ..... 5</p>	
613	<p>Have you visited any STI clinic in the last 12 months?</p>	<p>Yes ..... 1</p> <p>No ..... 2</p>	617
614	<p>What did you do at such STI clinics?</p> <p><b>(Multiple answers. do not read the possible answers given below)</b></p>	<p>Blood tested for STI..... 1</p> <p>Physical examination conducted for STI identification ..... 2</p> <p>Was advised to use condom in each sexual intercourse ..... 3</p> <p>Was advised to take complete and regular medicine..... 4</p> <p>Was suggested to reduce number of sexual partners ..... 5</p> <p>Took friend with me ..... 6</p> <p>Other (Specify)_ ..... 96</p>	



615	Do you know which organizations run those STI clinics?  <b>(Multiple answers. do not read the possible answers)</b>	AMDA ..... 1 NSARC ..... 2 NRCS ..... 3 INF Paluwa ..... 4 Siddhartha Club ..... 5 SACTS ..... 6 NFCC ..... 7 WATCH ..... 8 GWP ..... 9 Private clinic ..... 10 Hospital ..... 11 Pharmacy ..... 12 CAC ..... 13 Indreni Sewa Samaj ..... 14 Trinetra ..... 15 Others (Specify) ..... 96 Don't know ..... 98	
616	How many times have you visited such STI clinic in the last 12 months?	Once ..... 1 2-3 times ..... 2 4-6 times ..... 3 7-12 times ..... 4 More than 12 times ..... 5	
617	Have you visited any voluntary counseling and testing (VCT) centers in the last 12 months?	Yes ..... 1 No ..... 2	620.1
618	What did you do at such VCT centers?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Received pre-HIV/AIDS test counseling ..... 1 Blood sample taken for HIV/AIDS test ..... 2 Received post HIV/AIDS test counseling ..... 3 Got information on HIV/AIDS window period ..... 4 Received HIV/AIDS test result ..... 5 Received counseling on using Condom correctly in each sexual intercourse ..... 6 Took a friend with me ..... 7 Other (Specify) ..... 96	
619	Do you know which organizations run those VCT centers?	AMDA ..... 1 NSARC ..... 2 NRCS ..... 3 INF/Paluwa ..... 4 Siddhartha Club ..... 5 SACTS ..... 6 NFCC ..... 7 WATCH ..... 8 CAC ..... 9 NNSWA ..... 10 GWP ..... 11 Indreni sewa samaj ..... 12 Trinetra ..... 13 Others (Specify) ..... 96 Don't know ..... 98	

620	For how many times have you visited VCT center in the last 12 months?	Once..... 1 2-3 times ..... 2 4-6 times ..... 3 7-12 times ..... 4 More than 12 times ..... 5	620.2
620.1	If not visited VCT in the last 12 months, what is the reason for this?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Do not know about VCT center ..... 1 I do not think I need to be tested ..... 2 I have no symptoms of HIV ..... 3 No VCT near by..... 4 I have already tested and know my status ..... 5 No money to go to VCT center ..... 6 Fear that people will see me visiting VCT ..... 7 Fear that family members/friend/clients will know it..... 8 Others (Specify) ..... 96	
620.2	Have you ever been approached by HIV/AIDS related health workers/ outreach workers to explain you about the need of VCT?	Yes ..... 1 No ..... 2	621
620.3	If you were approached by health workers/outreach workers, what did they advise you?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Talked about my sex partners ..... 1 Advised to visit VCT if I have some problems ..... 2 Advised me to visit VCT once in a month in any case ..... 3 Did not talk about HIV testing..... 4 Others (Specify) ..... 96	
621	Have you ever participated in HIV/AIDS awareness raising program or community events in the last 12 months?	Yes .....1 No .....2	701
622	What were the activities that you participated in?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	Street drama.....1 AIDS Day .....2 Condom Day .....3 Video Shows .....4 Group discussions .....5 Talk programs .....6 HIV/AIDS related training .....7 HIV/AIDS related Workshops.....8 Condom use demonstrations .....9 Others (Specify) .....96	

623	Do you know which organizations organized those activities?  <b>(Multiple answers. DO NOT READ the possible answers given below)</b>	AMDA .....1 GWP .....2 TRINETRA .....3 WATCH .....4 ICH .....5 NSARC.....6 NRCS.....7 INF/Paluwa.....8 Siddhartha Club.....9 CAC ..... 10 SACTS ..... 11 NFCC ..... 12 NAPN .....13 Sparsa ..... 14 Naulo ghumti..... 15 Mahila Uddhar Samuha ..... 16 Maiti Nepal ..... 17 Indreni Sewa Samaj..... 18 Others (specify) ..... 96	
624	How many times have you participated in such activities in the last 12 months?	Not participated .....0 Once.....1 2-3 times .....2 4-6 times .....3 7-12 times .....4 More than 12 times.....5	

**7.0 STI (SEXUALLY TRANSMITTED INFECTION)**

Q. N.	Questions and Filters	Coding Categories		Skip to	
701	Which diseases do you understand by STI?  <b>(Multiple answers. DO NOT READ the possible answers)</b>	White discharge/discharge of Pus/dhatu flow ..... 1 Itching around vagina ..... 2 Lower abdominal pain ..... 3 Syphilis (Bhiringi)/gonorrhea ..... 4 HIV/AIDS..... 5 Painful urination..... 6 Swelling of vagina ..... 7 Pain in vagina ..... 8 Unusual bleeding from vagina..... 9 Ulcer or sore around vagina..... 10 Fever ..... 11 Burning during urination ..... 12 Weight loss/ get thinner ..... 13 Don't know ..... 98 Other (Specify) .. 96			
702	Do you currently have any of the following symptoms?				
		<b>Symptoms</b>	<b>Yes</b>	<b>No</b>	
1. Pain in the lower abdomen		1	2		
2. Pain during urination		1	2		
3. Frequent urination		1	2		
4. Pain during sex		1	2		
5. Ulcer or sore in the genital area		1	2		
6. Itching in or around the vagina		1	2		

	7. Vaginal odor or smell	1	2	
	8. Vaginal bleeding (unusual)	1	2	
	9. Unusual heavy, foul smelling vaginal discharge	1	2	
	10. Genital Warts	1	2	
	96. Others (Specify) _____	1	2	
	<b>(If answer is 'No' to all in the Q. No. 702 Go to Q. 710)</b>			
703	Have you gone through medical treatment for any of these symptoms?	Yes ..... 1 No ..... 2		710
703.1	If yes, for how long did you wait to go for the treatment? <b>(Write '00' if less than a week)</b>	Week .....		
704	Where did you go for the treatment? <b>(Multiple answers. DO NOT READ the possible answers)</b>	Private Clinic ..... 1 AMDA Clinic ..... 2 NFCC ..... 3 SACTS ..... 4 FPAN Clinic ..... 5 Health Post/ Health Center ..... 6 Hospital ..... 7 Pharmacy ..... 8 Self Treatment (Specify) ..... 9 Others (Specify) ..... 96		
705	<b>For which symptoms did you get treatment? Specify the treatment.</b>			
	<b>Symptoms</b>	<b>Treatment</b>		
	1. Pain in the lower abdomen			
	2. Pain during urination			
	3. Frequent urination			
	4. Pain during sex			
	5. Ulcer or sore in the genital area			
	6. Itching in or around the vagina			
	7. Vaginal odor or smell			
	8. Vaginal bleeding (unusual)			
	9. Unusual heavy, foul smelling vaginal discharge			
	10. Genital Warts			
	96. Others (Specify) _____			
706	Did you receive a prescription for medicine?	Yes .....1 No .....2		710
707	Did you obtain all the medicine prescribed?	Yes I obtained all of it .....1 I obtained some but not all .....2 I obtained none .....3		710
708	Did you take all of the medicine prescribed?	Yes .....1 No .....2		709
708.1	If not, why did you not take all of the medicine prescribed?	Forgot to take .....1 Felt cured .....2 Medicine did not help .....3 Others (Specify) ..... 96		
709	How much did you pay for the medicine that you took? <b>[If not paid mention the reasons]</b>	Rs. _____ Reason _____		
710	Did you have any of the following symptoms in the past year?			
	<b>Symptoms</b>	<b>Yes</b>	<b>No</b>	
	1. Pain in the lower abdomen	1	2	
	2. Pain during urination	1	2	

	3. Frequent urination	1	2	
	4. Pain during sex	1	2	
	5. Ulcer or sore in the genital area	1	2	
	6. Itching in or around the vagina	1	2	
	7. Vaginal odor or smell	1	2	
	8. Vaginal bleeding (unusual)	1	2	
	9. Unusual heavy, foul smelling vaginal discharge	1	2	
	10. Genital Warts	1	2	
	96. Others (Specify)	1	2	
	<b>(If answer is 'No' to all in Q. No. 710, Go to Q. No. 801)</b>			
11	Have you gone through medical treatment for any of these symptoms in the past year?			
	<b>Symptoms</b>		<b>No</b>	
	1. Pain in the lower abdomen		2	
	2. Pain during urination		2	
	3. Frequent urination		2	
	4. Pain during sex		2	
	5. Ulcer or sore in the genital area		2	
	6. Itching in or around the vagina		2	
	7. Vaginal odor or smell		2	
	8. Vaginal bleeding (unusual)		2	
	9. Unusual heavy vaginal discharge and foul vaginal discharge		2	
	10. Genital Warts		2	
	96. Others (Specify)		2	
	<b>(If answer is 'No' to all in Q. No. 711, Go to Q. No. 801)</b>			
712	Where did you go for the treatment?  <b>(Multiple answers. Do not read the possible answers).</b>	Private clinic ..... 1 AMDA clinic ..... 2 NFCC ..... 3 SACTS ..... 4 FPAN clinic ..... 5 Health post/ health center ..... 6 Hospital ..... 7 Pharmacy ..... 8 Self treatment (Specify) ..... 9 GWP ..... 10 Siddhartha club clinic ..... 11 WATCH clinic ..... 12 CAC ..... 13 NSARC ..... 14 Trinetra ..... 15 Indreni sewa samaj ..... 16 Others (Specify) ..... 96		801
713	Did anyone from the place where you went for treatment counsel you about how to avoid the problem?	Yes ..... 1 No ..... 2		801



804.1	Have you injected drugs in the past one month?	Yes ..... 1 No ..... 2	809
804.2	Have you injected drugs in the past one week?	Yes ..... 1 No ..... 2	809
805	Are you currently injecting drugs?	Yes ..... 1 No ..... 2	809
806	Think about the last time you injected drugs. Did you use a needle or syringe that had previously been used by someone else?	Yes ..... 1 No ..... 2 Don't know..... 98	
807	Think about the time you injected drugs during the past one month. How often was it with a needle or syringe that had previously been used by someone else?	Every Time ..... 1 Almost Every Time ..... 2 Sometimes ..... 3 Never ..... 4 Don't Know ..... 98	
808	Usually how do you obtain a syringe/needle?	My friend/relative give it to me after use..... 1 Unknown person give it to me..... 2 I pick it up from a public place used and left by others ..... 3 I pick it up from a public place where I leave my syringes ..... 4 I use a new needle/syringe given by NGO/volunteer ..... 5 I purchase a new needle/syringe ..... 6 Sex partner give it to me..... 7 Others (Specify) ..... 96	
809	Have you ever exchanged sex for drugs?	Yes ..... 1 No ..... 2	
810	Have you ever exchanged sex for money so that you can buy drug?	Yes ..... 1 No ..... 2	
811	To your knowledge, have any of your sex partners injected drugs?	Yes ..... 1 No ..... 2	812
811.1	<b>(For Married SW only)</b> Does your husband inject drug? <b>(Check with Q. 204)</b>	Yes ..... 1 No ..... 2 Don't know ..... 98	
811.2	<b>(For female having regular client)</b> Did your regular client inject drug? <b>(Check with Q. 403)</b>	Yes ..... 1 No ..... 2 Don't know ..... 98	
811.3	<b>(For all)</b> Do you know any of your client ever injecting drugs?	Yes ..... 1 No ..... 2 Don't know ..... 98	
812	Do you know anyone who injects drugs?	Yes ..... 1 No ..... 2	901
812.1	If yes, how are you related to her/him? (Multiple answers, Do NOT READ the Possible answers)	Client ..... 1 Friend..... 2 Family..... 3 Relative ..... 4 Neighbor/male from village/ someone not related to ..... 5 Other (Specify)_ ..... 96	

**9.0 STIGMA AND DISCRIMINATION**

Q. N.	Questions and Filters	Coding Categories	Skip to
901	If a male relative of yours gets HIV, would you be willing to take care of him in your household?	Yes ..... 1 No ..... 2 Don't know..... 98	
902	If a female relative of yours gets HIV, would you be willing to take care of her in your household?	Yes ..... 1 No ..... 2 Don't know..... 98	
903	If a member of your family gets HIV, would you want it to remain a secret?	Yes ..... 1 No ..... 2 Don't know..... 98	
904	<b>DEPRESSION AND SOCIAL SUPPORT</b>		
904.1	Below is a list of the ways you might have felt or behaved. Please tell me how often you have felt this way during the past week		

<b>SCORING:</b> zero for answers in the first column, 1 for answers in the second column, 2 for answers in the third column, 3 for answers in the fourth column.	<b>Rarely or none of the time (less than 1 day)</b>	<b>Some or a little of the time (1-2 days)</b>	<b>Occasionally or moderate of the time (3-4 days)</b>	<b>Most or all the time (5-7 days)</b>
I1. I was bothered by things that usually don't bother me				
I2. I did not feel like eating; my appetite was poor.				
I3. I felt that I could not shake off the blues even with help from my family or friends.				
I4. I felt I was just as good as other people				
I5. I had trouble keeping my mind on what I was doing.				
I6. I felt depressed				
I7. I felt that everything I did was an effort.				
I8. I felt hopeful about the future.				
I9. I thought my life had been a failure.				
I10. I felt fearful.				
I11. My sleep was restless				
I12. I was happy				
I13. I talked less than usual				
I14. I felt lonely.				
I15. People were unfriendly				
I16. I enjoyed life.				
I17. I had crying spells.				
I18. I felt sad.				
I19. I felt that people dislike me.				
I20. I could not get "going."				

905.1 How often did you have any thoughts about ending your own life during the last 12 months?  
 No ..... 2  
 No response.. ..... 99  
 Many times.....1  
 A few times.....2  
 Once or twice.....3  
 No response.....99



- 906 Did you ever make a suicide plan? Yes ..... 1  
 No ..... 2  
 No response.. ..... 99
- 907 Did you ever attempt suicide? Yes ..... 1  
 No ..... 2  
 No response..... 99

**10.0 DRUG USE**

Q.N.	Questions	Coding Categories	Skip to
	<b>Ask this section to those respondent who have injected</b>		
1001	Have you used non-sterile injecting equipment at any time in the last month?	Yes..... .. 1	
1002	In the last month, did you switch from injecting to oral drugs?	Yes..... .. 1	
1003	How many times would you say you injected drugs yesterday?	Times..... Not injected	1007
1004	Would you like to tell me why you did not inject yesterday?	1. _____ 2. _____ 3. _____	
1005	How many days ago did you get injected?	Days ago.....	
1006	How many times would you say you injected drugs on	Times.....	
1007	During the past one-week how often would you say you injected drugs?	Once a week ..... 1 2-3 times a week ..... 2 4-6 times a week ..... 3 Once a day..... 4 2-3 times a day ..... 5 4 or more times a day..... 6 Not injected in the last week..... 7 Don't know ..... 98 No response..... 99	

**11.0 NEEDLE SHARING BEHAVIORS**

Q.N.	Q	Coding Categories	Skip
1101	Think about the times, you have injected drugs yesterday/last day. How many times did you inject drugs on that day? <b>(Fill the number from answer to Q. 1003 or 1006 and verify by asking the respondent)</b>	Times..... <input type="text"/>	



1102.1	1102	The last time you injected, how did you get it? (If you were in a group the last time that you injected, how many different people in your group do you think used the same syringe/needle?)	Nos. .... My friend/relative gave it to me after I injected ..... 95 I found it in my house ..... 1 Unknown person gave it to me after I injected ..... 1		
1103		(Public place means places other than the IDU's home that are used to hide syringe/needle) How often was it with a syringe/needle that had previously been used by someone else?	Every time I use ..... 1 Almost every time I picked it up from a public place ..... 2 Sometimes which was left there by others ..... 3 Never I used ..... 4 Not injected in the last week ..... 5 Don't know myself ..... 98	111	1
1103.1		How often did you use a syringe/needle that had been left in public place? (Public place means places other than the IDU's home that are used to hide syringe/needle)	Every time I used a new needle/syringe given by NGO staff/vo ..... 5 Almost every time (write the name of Organization) ..... 3 Sometimes I used a needle/syringe which I ..... 4 Never Purchased ..... 6 Don't know ..... 98 No response I reused my own needle/syringe ..... 99 My friend gave new needle/syringe ..... 8		
1104		In the past one-week, did you ever share needles and syringes with any of the following?			
		<b>Read out list. Multiple answers possible</b>		<i>No</i>	<i>DK</i>
		Your usual sexual partner		2	98
		A sexual partner who you did not know		2	98
		A friend		2	98
		A drugs seller		2	98
		Unknown Person		2	98
		96. Other (Specify) _____		2	
1105		With how many different injecting partners did you share needles or syringes in the past one-week? (Count everyone who injected from the same syringe)	Number of partners ..... Don't know ..... 98 No response ..... 99		
1106		In the past one-week, how often did you give a needle or syringe to someone else, after you had already used it?	Every times ..... 1 Almost every-times ..... 2 Sometimes ..... 3 Never ..... 4 Don't know ..... 98 No response ..... 99		
1107		In the past-week, did you ever inject with a pre-filled syringe? (By that I mean a syringe that was filled without you witnessing it)	Yes ..... 1 No ..... 2 Don't know ..... 98 No response ..... 99		
1108		In the past one-week, how often did you inject drugs using a syringe after someone else had squirted drugs into it from his/her used syringe? (Front-loading/back-loading/splitting)	Every times ..... 1 Almost every-times ..... 2 Sometimes ..... 3 Never ..... 4 Don't know ..... 98 No response ..... 99		
1109		In the past one-week, when you injected drugs, how often did you share a cooker/vial/container, cotton/filter, or rinse water?	Every times ..... 1 Almost every-times ..... 2 Sometimes ..... 3 Never ..... 4 Don't know ..... 98		
1110		In the past one-week, how often you drew up your drug solution from a common container used by others?	Every times ..... 1 Almost every-times ..... 2 Sometimes ..... 3 Never ..... 4 Don't know ..... 98 No response ..... 99		
			115		
1111		In the past one year have you switched from sharing to non-sharing practice?	Yes ..... 1 No ..... 2		

1112	Can you obtain new, unused needles and syringes when you need them?	Yes..... 1 No..... 2 Don't know..... 98 No response..... 99	1114
1113	Where can you obtain new unused needles and syringes?  <b>(Do not read out list. Multiple answers possible. Probe only with "Anywhere Else?")</b>	Drugstore..... 1 Other shop..... 2 Health worker..... 3 Hospital..... 4 Drug wholesaler/drug agency..... 5 Family/relatives..... 6 Sexual partner..... 7 Friends..... 8 Other drugs users..... 9 Drugs seller..... 10 Needle exchange program of _____ 11 Steal from legitimate source (hospital/pharmacy)..... 12 Buy on streets..... 13	
1114	In the past one-year, did you ever inject drug in another city/district (or another country)?	Yes..... 1 No..... 2 Don't remember..... 98 No response..... 99	
1114.1	In the last 12 months, have any of outreach workers, a peer educator or a staff from a needle exchange program given you a new needle/syringe?	Yes..... 1 No..... 2 Don't remember..... 98 No response..... 99	
1115	Are you currently under treatment (or receiving help) or have you ever received treatment (or help) because of your drug use?	Currently under treatment..... 1 Was in treatment but not now..... 2 Have never received treatment... 3 No response..... 99	<i>End the interview</i>
1116	How many months ago did you last receive treatment or help for your drug use?	Months..... Don't know..... 98	
1117	What kind of treatment or help you received? (Do not read out the responses, probe asking, "Are there any other kinds of treatment that you've received?") <b>(Multiple Answers Possible)</b>		
	<b>Types of Treatments</b>	<b>Name of Institutions</b>	
	1. Outpatient counseling		
	2. Self-help groups		
	3. Detoxification w/methadone		
	4. Maintenance w/methadone		
	5. Detoxification w/other drugs		
	6. Detoxification with no drug		
	7. Residential rehabilitation		
	8. Helped for <i>cold turkey</i> without medicine		
	9. Forced for <i>cold turkey</i> by others without treatment		
	96. Others (Specify)		
	99. No response		

	<b>Ask this section to those respondent who have injected drugs at least once in the past1month, Check question no 804.1 = 1</b>		
1001	Have you used non-sterile injecting equipment at any time in the last month?	Yes..... 1 No ..... 2	
1002	In the last month, did you switch from injecting to oral drugs?	Yes..... 1 No ..... 2	
1003	How many times would you say you injected drugs yesterday?	Times..... Not injected 0	1007
1004	Would you like to tell me why you did not inject yesterday?	1. _____ 2. _____ 3. _____	
1005	How many days ago did you get injected?	Days ago.....	
1006	How many times would you say you injected drugs on	Times.....	
1007	During the past one-week how often would you say you injected drugs?	Once a week ..... 1 2-3 times a week ..... 2 4-6 times a week ..... 3 Once a day..... 4 2-3 times a day ..... 5 4 or more times a day..... 6 Not injected in the last week..... 7 Don't know ..... 98 No response..... 99	

## Annex 7: Clinical Information

### CLINICAL CARD

#### A. Lab Checklist Respondent ID Number: Date and Time

Name of Cluster:            Name of District:-

Name of Lab Technician

Name of STI Technician

Clinical Information (Clinic)    Yes    1            No            2

Specimen collection (Lab)      Yes    1            No            2

#### B. Clinical Information (Clinic)

Weight:                            Kg

Blood Pressure

STI Symptom    Yes    1            No            2

Temperature

Pulse

#### C. Syndromic Treatment Information

Had any of the following symptoms now or in the past			
a. Pain in the lower abdomen	YES { }	NO { }	Don't Know { }
b. Pain during urination	YES { }	NO { }	Don't Know { }
c. Frequent urination	YES { }	NO { }	Don't Know { }
d. Pain during sex	YES { }	NO { }	Don't Know { }
e. Ulcer or sore in the genital area	YES { }	NO { }	Don't Know { }
f. Itching in or around the vagina	YES { }	NO { }	Don't Know { }
g. Vaginal odor or smell	YES { }	NO { }	Don't Know { }
h. Vaginal bleeding (unusual)	YES { }	NO { }	Don't Know { }
i. Unusual heavy vaginal discharge and foul vaginal discharge	YES { }	NO { }	Don't Know { }
j. Genital Warts	YES { }	NO { }	Don't Know { }
Name of the Medicines Provided:			

Physical Examination Done    Yes    1            No            2

Refer to VCT Center            Yes    1            No            2

**ANNEX – 8 Respondent ID Card and Biological Information Card**

**Biological Component Card**

ID:
Date:
Consented for Laboratory Tests: Yes    No
Respondent wants consultation with STI Technician: Yes    No
Interviewer Name:
<b>To be filled in by Lab &amp; STI Technician</b>
To be filled by Lab Technician: (Please select appropriate category)
<input type="checkbox"/> Respondent gave only blood sample    Respondent gave only urine sample    Respondent gave blood and urine sample    Respondent did not give any sample
<input type="checkbox"/> To be filled by STI Technician: (Please select appropriate category)
<input type="checkbox"/> Physical Examination undertaken
<input type="checkbox"/> Physical examination NOT undertaken

**Respondent ID Card**

ID Number:  
Needs to collect test result                      Yes    No  
Test Result will be available:                      from    to  
On any working days

Provisional diagnosis:  
Treatment:  
Signature of STI Technician:

Date:

Report Collection Centers  
SNo    Name of Report  
Collection Center  
Address  
Contact Number

### Annex 9: Selected Cluster with Clinic Sites

Clinic location	District	Cluster Name	No of Sample
<i>Mahendranagar</i>	<b>Kanchanpur</b>	Bhimdatta NP – Haldukha, Bazar, Salghari, Bhagatpur, Bhansi	<b>7</b>
<i>Mahendranagar</i>		Pipadi – Kaluwapur, Kishanpur – Bani, Bank	<b>7</b>
		<b>Total</b>	<b>14</b>
<i>Dhanagadi</i>	<b>Kailali</b>	Chaumala- Kuchainu, Daidwari	<b>7</b>
<i>Dhanagadi</i>		Dhangadhi – Dhuiyghat, Jugeda	<b>7</b>
<i>Dhanagadi</i>		Pahalmanpur – Masuriya, Lathiya, Balar, Daukaliya, Chaumala	<b>7</b>
<i>Dhanagadi</i>		Attariya - Malakheti	<b>7</b>
<i>Dhanagadi</i>		Attariya – Sripur Siulebazar, Geta eye hospital area	<b>7</b>
<i>Dhanagadi</i>		Dhangadhi – Basantapur, Bella	<b>7</b>
<i>Dhanagadi</i>		Pahalmanpur – Dipnagar, Bailkot	<b>7</b>
<i>Dhanagadi</i>		Karnali - Chisapani, Motipur, Balchaur, Amuri	<b>7</b>
		<b>Total</b>	<b>56</b>
<i>Nepalgunj</i>	<b>Bardiya</b>	Gulariya – Traffic Chowk, Buspark, Bhansar road, Sitalabazar	<b>7</b>
<i>Nepalgunj</i>		Gulariya – Taratal, Dodari	<b>7</b>
<i>Nepalgunj</i>		Bhurigaun – Busgadhi, Deudakala	<b>7</b>
<i>Nepalgunj</i>		Bhurigaun - Baghnaha	<b>7</b>
	<b>Total</b>		<b>28</b>
<i>Nepalgunj</i>	<b>Banke</b>	Bhansar Road	<b>7</b>
<i>Nepalgunj</i>		Dhakari – Park Area, Shamshergunj, Army Camp, Agaiya - Bazar, Kushum Minimarket	<b>7</b>
<i>Nepalgunj</i>		Nepalgunj NP – Buspark, Puspala Chowk	<b>7</b>
<i>Nepalgunj</i>		Nepalgunj - BP Gharbari tole, Bageswori temple, Khajura road	<b>7</b>
<i>Nepalgunj</i>		Nepalgunj - Balaspur	<b>7</b>
		<b>Total</b>	<b>35</b>
<i>Nepalgunj</i>	<b>Dang</b>	Lamahi – Arjunkhola, Kaptangunj	<b>7</b>
<i>Nepalgunj</i>		Ghorahi – Hospital road, Saudiyar, Narayanpur, New Buspark	<b>7</b>
<i>Nepalgunj</i>		Tulsipur – Rakshya Chowk	<b>7</b>
		<b>Total</b>	<b>21</b>
<i>Gourusinghe</i>	<b>Kapilvastu</b>	Gajeda Eastline	<b>7</b>
<i>Gourusinghe</i>		Birpur - Chandrauta	<b>7</b>



<b>Clinic location</b>	<b>District</b>	<b>Cluster Name</b>	<b>No of Sample</b>
<i>Gourusinghe</i>		Miglihawa	7
<i>Gourusinghe</i>		Tilaurakot	7
<i>Gourusinghe</i>		Dumara	7
<i>Gourusinghe</i>		Taulihawa NP – Chotkitaulihawa, Jammwartole, Maltole	7
<i>Gourusinghe</i>		Gauri, Basantapur	7
<i>Gourusinghe</i>		Jamunabari, Krishnanagar	7
		<b>Total</b>	<b>56</b>
<i>Butwal</i>	<b>Rupandehi</b>	Butwal NP - Base Camp, Devinagar, Kalikanagar, Deepnagar	10
<i>Butwal</i>		Butwal N - Hospitalline	10
<i>Butwal</i>		Siddhartha NP – Devkota Chowk	10
<i>Butwal</i>		Bhairwa – Burmeli Tole, Haat Bazar	10
		<b>Total</b>	<b>40</b>
<i>Bardaghat</i>	<b>Nawalparasi</b>	Sunuwal	10
<i>Bardaghat</i>		Paklihawa- Swati-Panchanagar Paschimline	10
<i>Bardaghat</i>		Dunnidevi – Dunnidevi plain area	10
<i>Bardaghat</i>		Bardaghat Makar – Bardaghat bazar	10
<i>Bardaghat</i>		Argauli	10
<i>Bardaghat</i>		Kawasoti, Pithauli	10
		<b>Total</b>	<b>60</b>
<i>Gajuri</i>	<b>Dhading</b>	Gajuri	10
<i>Narayanghat</i>	<b>Chitwan</b>	Bharatpur NP – Lions Chowk	10
<i>Narayanghat</i>		Bharatpur NP – Lila chowk	10
<i>Narayanghat</i>		Bharatpur NP – Paras Buspark	10
<i>Narayanghat</i>		Pithuwa – Pithuwa, Kharaini - Roadside	10
<i>Narayanghat</i>		Piple – Piple Gaun	10
		<b>Total</b>	<b>50</b>
<i>Hetauda</i>	<b>Makwanpur</b>	Hetauda NP – Newarni, Lewot, Bastipur	10
<i>Hetauda</i>		Lother, Manhari (Eastline)	10
		<b>Total</b>	<b>20</b>
Birgunj	<b>Parsa</b>	Birgunj NP – Nagwa	10
Birgunj		Birgunj NP – Subhlav Petrolpump, Resham kothi, Ghadiarwa	10
		<b>Total</b>	<b>20</b>
Pathalaiya	<b>Bara</b>	Dumarwana WN 1-3	10
Pathalaiya		Pathlaiya	10
	<b>Total</b>	<b>Total</b>	<b>20</b>
Chandranighapur	<b>Rautahat</b>	Bagmati – Mangalpur	10
		Chapur – Durgamandir, Tankitole,Sukumbasitole, Kaptantole	10
	<b>Total</b>	<b>20</b>	
<i>Lahan</i>	<b>Sarlahi</b>	Sarshapur – Sarshapur, Dhukauli Highway Northside	10
Lalbandi		Lalbandi – Highway northside	10
	<b>Total</b>	<b>Total</b>	<b>20</b>

<b>Clinic location</b>	<b>District</b>	<b>Cluster Name</b>	<b>No of Sample</b>
Bardibas	Mahottari	Bardibas- Main Chowk	10
	<b>Total</b>	<b>Total</b>	<b>10</b>
Janakpur	Dhanusha	Janakpur NP – Railway station, Bhanu chowk,	10
Janakpur		Omaprempur, Chaukitole, Maadbasa, Pusbalpur, Magartule, Marladhar, Hariharpur, Nuktajhija	10
	<b>Total</b>	<b>Total</b>	<b>20</b>
Lahan	Siraha	Lahan NP – Highway Purbaline, Paschimline	10
	<b>Total</b>	<b>Total</b>	<b>10</b>
Lahan	Saptari	Rajbiraj NP – Tribhuvan Chowk, Buspark	10
	<b>Total</b>	<b>Total</b>	<b>10</b>
<i>Itahari</i>	Sunsari	Duhabi – Itahari Line	10
<i>Itahari</i>		Itahari – Pakali (Northside of Highway)	10
<i>Itahari</i>		Dharan – Chatra line	10
	<b>Total</b>	<b>Total</b>	<b>30</b>
<i>Itahari</i>	Morang	Biratnagar NP – Matarwa, Jatuwa	10
<i>Itahari</i>		Biratnagar – Rainbow galli, Shanti Chowk	10
<i>Itahari</i>		Belbari, Biratchowk, Kanepokhari, Letang, Pathari, Urlabari	10
	<b>Total</b>	<b>Total</b>	<b>30</b>
<i>Birtamod</i>	Jhapa	Damak NP – Purba bus Stand Chowk,	10
<i>Birtamod</i>		Birtamod - Paschim line	10
<i>Birtamod</i>		Kakarvitta – Buspark, Bahundangi road, Hotelline behid buspark area, Border area	10
	<b>Total</b>	<b>Total</b>	<b>30</b>

Janakpur	<b>Dhanusha</b>	Janakpur NP – Railway station, Bhanu chowk,	<b>10</b>
Janakpur		Omaprempur, Chaukitole, Maadbasa, Pusbalpur, Magartule, Marladhar, Hariharpur, Nuktajhija	<b>10</b>
	<b>Total</b>	<b>Total</b>	<b>20</b>
Lahan	<b>Siraha</b>	Lahan NP – Highway Purbaline, Paschimline	<b>10</b>
	<b>Total</b>	<b>Total</b>	<b>10</b>
Lahan	<b>Saptari</b>	Rajbiraj NP – Tribhuvan Chowk, Buspark	<b>10</b>
	<b>Total</b>	<b>Total</b>	<b>10</b>
<i>Itahari</i>	<b>Sunsari</b>	Duhabi – Itahari Line	<b>10</b>
<i>Itahari</i>		Itahari – Pakali (Northside of Highway)	<b>10</b>
<i>Itahari</i>		Dharan – Chatra line	<b>10</b>
	<b>Total</b>	<b>Total</b>	<b>30</b>
<i>Itahari</i>	<b>Morang</b>	Biratnagar NP – Matarwa, Jatuwa	<b>10</b>
<i>Itahari</i>		Biratnagar – Rainbow galli, Shanti Chowk	<b>10</b>
<i>Itahari</i>		Belbari, Biratchowk, Kanepokhari, Letang, Pathari, Urlabari	<b>10</b>
	<b>Total</b>	<b>Total</b>	<b>30</b>
<i>Birtamod</i>	<b>Jhapa</b>	Damak NP – Purba bus Stand Chowk,	<b>10</b>
<i>Birtamod</i>		Birtamod - Paschim line	<b>10</b>
<i>Birtamod</i>		Kakarvitta – Buspark, Bahundangi road, Hotelline behind buspark area, Border area	<b>10</b>
	<b>Total</b>	<b>Total</b>	<b>30</b>

### Annex 10: Survey Planning and Management Process (Key Activities and Time line)

SN	Key Activities	Time line (2012) we are still working so update it																								
		June(12-30)			July(1-31)				August(1-31)				September(1-30)				October(1-31)				November(1-30)				Dec(1-7)	
		W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2
1	Receiving final contract Sign	■																								
2	Preliminary Workout/information collection	■	■	■	■																					
	Meeting with stake holders					■																				
	Submission inception report						■																			
3	Finalization of survey tool, Checklist							■																		
4	Orientation to survey team								■																	
5.1	Departure to districts & Preparation of field activities									■																
5.2	Coordination meeting/Rapport building									■																
5.3	Listing of Respondents									■																
5.4	Cluster identification										■															
5.5	Clinic Set up										■															
5.7	Data Collection										■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
6.1	Data entry													■	■	■	■	■	■	■	■	■	■	■	■	■
6.2	Data cleaning& Editing																			■	■	■	■	■	■	■
6.3	Data analysis																				■	■	■	■	■	■
7	Report writing & preparing factsheets																					■	■	■	■	■
8	Dissemination of survey findings in Coordination with NCASC																							■	■	■
8.1	To local community																								■	■
8.2	To National & Central Stakeholders																								■	■
8.3	Regional level																								■	■
8.4	Final Report to NCASC																								■	■