Family Health International/Nepal

INTEGRATED BIOLOGICAL AND BEHAVIORAL SURVEILLANCE SURVEY (IBBS) AMONG FEMALE SEX WORKERS IN 22 TERAI HIGHWAY DISTRICTS OF NEPAL

In Collaboration with

STD/AIDS Counseling and Training Services
Pyukha, Kathmandu, Nepal

And

National Reference Laboratory
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Acronyms

AIDS	Acquired Immuno-Deficiency Syndrome
DIC	Drop-in Center
CT	Chlamydia trachomatis
FSW	Female Sex Worker
GC	Neisseria gonorrhoeae
HIV	Human Immuno-Deficiency Virus
IBBS	Integrated Bio-Behavioral Survey
IDU	Injecting Drug User
MOH	Ministry of Health
NCASC	National Center for AIDS and STD Control
NGO	Non-Governmental Organizations
NHRC	Nepal Health Research Council
NRL	National Reference Laboratory
NSARC	Nepal STD and AIDS Research Center
OE	Outreach
PE	Peer Educators
PHSC	Protection of Human Subject Committee
RPR	Rapid Plasma Regain
SACTS	STD/AIDS Counseling and Training Services
SLC	School Leaving Certificate
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infections
VCT	Voluntary Counseling and Testing
WHO	World Health Organization

Executive Summary

Background

The Integrated Biological and Behavioral Surveillance Survey among Female Sex Workers (IBBS 2009) was launched on February 20, 2009. A total of 600 female sex workers (FSW) were recruited for the study, out of whom 400 were recruited from six study sites representing 16 districts between Jhapa in the eastern region and Rupandehi in the western region along the highway in the terai. Another 200 were recruited from three sites representing six districts between Kapilvastu in the western region and Kanchanpur in the far western region. Data for the study were collected from February 28, 2009 to April 25, 2009. The survey measured the prevalence of HIV and sexually transmitted infections (STI) among the FSWs as well as variables which are associated with the risk of HIV infection, such as condom use, sexual behaviors, knowledge of HIV/AIDS, reported cases of sexually transmitted infections, STI treatment behaviors, exposure to HIV/AIDS messages, and alcohol and drug habits. A section on family planning and the female condom, which was not part of the earlier rounds of the IBBS, was one of the vital components of the 2009 round. One of the major purposes of the study was also to compare differences in behavior between 2003, 2006 and 2009.

Study Objective

The primary objective of the study was to determine the prevalence of HIV and sexually transmitted infections in the 22 terai highway districts among the female sex workers and to assess their HIV/STI-related knowledge and risk behaviors.

Study Methodology

The eligibility criterion for recruiting the FSWs in the study was “women reporting having been paid in cash or kind for sex within the last six months”.

The first process in the sampling was a mapping exercise conducted in the study area prior to the main survey by a team of qualified and trained research staff of ACNielsen Nepal. The main purpose of the mapping exercise was to visit the study sites, and in consultation with local key informants - NGOs running HIV programs targeting FSWs and their clients, local authorities directly or indirectly involved with the HIV programs and the local police - develop a list of locations where the sex workers gather and solicit clients. Moreover, estimate the tentative size of the FSWs in those locations. Later, this information was used for defining 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. Separate sampling frames were prepared for the ‘16-district domain’ and ‘6-district domain’. A two-stage cluster sampling was followed in the sampling design, i.e., Stage 1 - Selection of clusters and Stage 2 - Selection of respondents. Locations with at least 30 sex workers were defined as a cluster. Locations with less than 30 FSWs were merged with the neighboring locations to form a cluster. At least 30 clusters were selected in each domain to ensure proper representation of the survey population. The FSWs were selected randomly for the interview from the selected clusters.

Biological Component

For collecting blood and urine samples, clinics were set up at nine different locations to cover the area as prescribed by the sampling procedure. After obtaining informed consent, blood and urine samples were collected, and syndromic treatment was provided for the STI problems after examination by a staff nurse. All study participants were also provided pre-test counseling for HIV. Lab analysis included testing for HIV, Neisseria gonorrhoeae, Chlamydia trachomatis and syphilis among the FSWs. The sex workers, who returned with the proper ID card provided to them, were given the test results, and treatment was given to those who tested positive for STIs.

Key Findings

- ✓ The mean age of the FSWs within a range of 16 to 50 years was 27.7 years in the six districts and 25.8 years in the 16 districts.

- ✓ About 52 percent of the FSWs were illiterate or had no formal schooling, and only 6 percent had completed their education up to SLC or above.

- ✓ More than half (57.8%) of the FSWs were married, 23.8 percent were never married, 12.8 percent were separated and 6.2 percent were widowed.

- ✓ The average age at their first sexual experience was 15.5 years.

- ✓ The number of paying clients that a FSW serves per day in general ranges from one to four or more, with a mean of 1.9 clients per day. Majority of the FSWs (96.8 %) reported that they entertained one to four clients per day.

- ✓ It was reported that 33.5 percent of the sex workers in the 6 districts and 19.5 percent in the 16 districts had been subjected to forced sex by their clients in the past year.

- ✓ Some of the sex workers reported performing sex other than vaginal with their different partners in the year preceding the survey. A total of 158 (26.2%) sex workers replied positively. It was also revealed that masturbation (44.3% or 70/158) followed by oral sex (24.1% or 38/158) and anal sex (23.4% or 37/158) were reported as types of sexual acts that they were forced to perform, despite their unwillingness to do so, in the past one year.

- ✓ An overriding majority (84.8%) of the respondents said condoms were used in their last sexual encounter with a client. Three-quarters (77.8%) of them had themselves suggested the use of condoms during sex.

- ✓ Majority (67.3%) of the respondents mentioned that they could get condoms within five minutes from their place of work. Almost 19 percent from the 6 districts and 3.5 percent from the 16 districts reported that they had to spend more than 15 minutes to get a condom from where they worked.

- ✓ The survey results revealed that almost half (49.8%) of the FSWs had heard about the female condom. The proportion of sex workers who had heard about the female condom in the 6-district domain and 16-district domain was 49 percent and 50.3 percent respectively. It was also observed that the sources of knowledge about the female condom in the 6-district domain and 16-district domain were almost the same. Majority of the respondents (77.9%)

who had heard about the female condom reported NGO staff as the major source of their knowledge. Among the FSWs who had heard about the female condom, only 4.1 percent in the 6 districts and 5.5 percent in the 16 districts had ever used one.

- ✓ When the sex workers were asked about the methods of family planning adopted, almost all respondents across the board (99.2 percent) reported condoms and injectables.

- ✓ Among the FSWs who were currently using a family planning method, 50.9 percent (36% in the 6 districts and 61.5% in the 16 districts) were using condoms, 22 percent (21.1% in the 6 districts and 22.6% in the 16 districts) injections while 22 percent (24.8% in the 6 districts and 19.9% in the 16 districts) had undergone a laparoscopy operation.

- ✓ Nearly all (99.7%) of the sex workers had heard about HIV/AIDS. The radio was the major source of information about HIV/AIDS for 92 percent of the sex workers. A large proportion of them (87.1%) also stated their friends/relatives, people from the NGOs (87.1%) and television (78.9%) as their sources of information about HIV/AIDS.

- ✓ In total, only 26.7 percent of the respondents had comprehensive knowledge about HIV (that means were aware of UNGASS indicators of HIV transmission). No major differences were observed in the knowledge of major ways to avoid HIV/AIDS in the 6 vs 16-district samples.

- ✓ Altogether 2.3 percent of the respondents had been experiencing at least one STI symptom during the survey.

- ✓ In total, 69.4 percent of the respondents had not sought treatment for the STI symptom/s that they were experiencing.

- ✓ Majority (87.2%) of the respondents had at least once met or interacted with the OEs/PEs from the HIV/AIDS-related programs, and 50.5 percent had visited the DICs (Drop-in centers). The proportion of respondents paying a visit to a STI clinic and Voluntary Counseling and Testing (VCT) center during the past year was 45.3 percent and 65.2 percent respectively.

- ✓ Only 33.7 percent of the sex workers reported participating in awareness raising programs on HIV/AIDS in the 12 months preceding the survey. Thagali had conducted most of these activities in the 6 districts while in the 16 districts, GWP had done so.

- ✓ In total, 2.3 percent (14/600) of the respondents were found to be HIV positive.

- ✓ The prevalence of HIV was significantly higher (6.3% or 4/14) at the Dhangadhi site, one of the nine sites included in the study.

- ✓ The prevalence rate of syphilis, gonorrhea and Chlamydia has decreased to 3.5 percent, 1.5 percent and 8.3 percent from 4.7 percent, 7.7 percent and 14.0 percent respectively reported in the IBBS study of 2006.

Recommendations

- ✓ Many young girls are entering the sex trade every year. So the HIV/AIDS awareness campaigns should target the youth and adolescent groups. Programs might include visits by peer educators and outreach workers to raise awareness about HIV and STI and to promote condom use. Sex education at the school level would also help to a great extent in creating general awareness.

- ✓ The sex workers do not use condoms consistently with their non-paying partners such as husbands and boyfriends. Prevention programs should focus more on the need for consistent condom use with all kinds of partners because in spite of the many efforts by the Ministry of Health and donor agencies, HIV prevalence has gone up in this round of survey.

- ✓ To enable the sex workers to access condoms easily, free condom distribution programs through NGOs/health workers/volunteers should be expanded to cover a larger group of the target population.

- ✓ The mobilization of peer and outreach educators to educate the target groups has been quite successful in meeting its objectives. This should be continued on a larger scale to cover more sex workers. However, comparatively fewer sex workers had ever visited the existing DICs, STI clinics and VCT centers. Such facilities should be extended to facilitate convenient access to the sex workers.

Chapter 1: Introduction

1.1 Background

In Nepal, the HIV epidemic is related to behaviors that expose individuals to the virus, thus increasing the risk of infection. Information on knowledge about HIV and the level and frequency of risk behaviors related to the transmission of HIV is important in identifying and better understanding populations most at risk of HIV.

Recent estimation shows that 70,000 people in Nepal are living with HIV *(UNAIDS/WHO, 2008)*. This factsheet also further indicates that 17,000 women in the age group 15 years and above are living with HIV in Nepal.

The first ever HIV and STI prevalence survey, which covered 16 districts in the terai along the East-West Highway, was conducted in 1999 by Family Health International (FHI). The survey showed that 3.9 percent of the FSWs and 1.5 percent of the truckers were HIV-positive. Behavioral surveillance surveys conducted among the FSWs and their clients on the terai highway and in the Kathmandu Valley revealed that the sex trade was on an increasing trend and that a greater number of younger FSWs were entering the business *(New ERA/SACTS/FHI2005).* Interventions targeting the FSWs and their clients have been intensified over the years, primarily by different INGOs and NGOs. These programs basically aim at bringing about behavioral change among the sex workers and their clients. Promotion of condom use as a safer sex practice is one of the chief components of these activities. The integrated bio-behavioral survey (IBBS) conducted in 2003 by FHI among the FSWs in the 22 terai highway districts revealed that 22.7 percent of the sex workers had used condoms consistently with their clients in the past year. The third round of the IBBS was undertaken in 2006 to compare condom use practices and other knowledge and risk behaviors of the sex workers in the 22 terai highway districts with those of previous study findings. Altogether 600 female sex workers participated in both rounds of the IBBS study. Among them, 12 (or 3.0%) FSWs in 2003 and 6 (or 1.5%) FSWs in 2006 were found to be HIV positive.

Previous studies carried out by FHI on the main highway of the terai in Nepal have shown that majority of the clients of the sex workers are transport workers, migrant workers, policemen/army personnel and businessmen. Most of these people are mobile and frequently come in contact with the sex workers, and they could carry the HIV virus to their unsuspecting families.

Many studies have identified sexual transmission as the predominant route of HIV transmission in Nepal. Sex workers, their clients, labour migrants, IDUs and MSM are identified as the primary sub-populations driving the epidemic *(NCASC, 2007)*.

In January 2009, FHI commissioned the fourth round of the IBBS among the FSWs in the same 22 terai highway districts for ACNielsen Nepal in collaboration with STD/AIDS Counseling and Training Services (SACTS) and the National Reference Laboratory (NRL).

1.2 Objectives of the Study

The primary objective of the study is to determine the prevalence of HIV and sexually transmitted infections in the 22 terai highway districts among the FSWs and to assess their HIV/STI-related knowledge and risk behaviors.

The specific objectives of the study were to collect information related to the socio-demographic characteristics, sexual behaviors, knowledge of HIV/AIDS and STIs, treatment of STI problems, knowledge about family planning and the use of condoms, exposure to available HIV/STI services for female sex workers and to relate them with HIV and STIs.

The data obtained from this fourth round have been compared with those of the second and third rounds of the survey to understand whether there has been any improvement in the key variables between the two rounds of surveys.

Chapter 2: Methodology

2.1 Study Population

This IBBS study was conducted among female sex workers. The eligibility criterion for recruiting female sex workers in the study was: "women reporting having been paid in cash or kind for sex within the last 6 months". Such sex workers residing in the 22 terai highway districts between Jhapa in the eastern region to Kanchanpur in the far western region (i.e., Jhapa, Morang, Sunsari, Saptari, Siraha, Dhanusha, Mahottari, Sarlahi, Dhading, Makwanpur, Rautahat, Bara, Parsa, Chitwan, Nawalparasi, Rupandehi, Kapilvastu, Dang, Banke, Bardiya, Kailali and Kanchanpur) were eligible for the sample.

2.2 Sample Design

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. Separate sampling frames were prepared for the '16-district domain' and '6-district domain'. A two-stage cluster sampling was followed in the sampling design, i.e., Stage 1 - Selection of clusters and Stage 2 - Selection of respondents.

Locations with at least 30 sex workers were defined as a cluster. Locations with less than 30 FSWs were merged with the neighboring locations to form a cluster. At least 30 clusters were selected in each domain to ensure proper representation of the survey population. As evinced in the ToR, 30 clusters were selected from the '6-district domain' and 40 clusters from the '16-district domain'.

To make the sampling smooth, a mapping of the study area was done prior to the survey by a team of qualified and trained research staff of ACNielsen. The main purpose of the mapping was to visit the study 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 - develop a list of locations where sex workers gather and solicit clients. Moreover, estimate the tentative size of the FSWs in those locations. Later, this information was used for defining the clusters and drawing a two-stage cluster sampling.

During the selection of the clusters, Primary Sampling Units (PSUs) were arranged in geographical order with the corresponding measure of size (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 were selected using the probability proportional to size (PPS) method.

The required number of respondents in the clusters selected in the first stage were selected through a systematic random sampling technique. A list of respondents was prepared using their personal characteristic codes as their ID (for example, FSW in this place/shop and with such and such a physical look, etc). All the eligible respondents selected randomly were approached for consent and were recruited. Screening was carried out among the respondents based on the eligibility criteria with respect to age and frequency of having had sex within the last six months prior to the survey.

Randomly selected FSWs were approached up to three times if they were not available at their place during the first visit. If not available or if the randomly selected FSWs refused to give consent, they were replaced by the next FSW in the list.

2.3 Sample Size

The sample size was as in the previous rounds. To make the results comparable to the previous rounds of the IBBS, two separate samples of 400 and 200 FSWs were drawn from the 16 districts in the east and six in the west and far west terai respectively. Sample size for each study population and biological sample to be collected from them are shown in the table below. STD/AIDS Counseling and Training Services (SACTS) and National Reference Laboratory (NRL) in coordination with ACNielsen collected the biological samples.

Study Area - Districts	Sample Size	Biological Samples	Lab Tests
16 Terai highway districts (Jhapa, Morang, Sunsari, Saptari, Siraha, Dhanusha, Mahottari, Sarlahi, Dhading, Makwanpur, Rautahat, Bara, Parsa, Chitwan, Nawalparasi and Rupandehi)	400	Blood and Urine	HIV, Syphilis, GC and CT
6 Terai highway districts (Kapilvastu, Dang, Banke, Bardiya, Kailali and Kanchanpur)	200	Blood and Urine	HIV, Syphilis, GC and CT
Total	**600**		

2.4 Implementation of the Study

This study was planned in the second-generation surveillance work plan of the National Center for AIDS and STD Control (NCASC). The NCASC was the lead organization conducting the study with technical assistance from FHI and USAID/Nepal. Study implementation was monitored by the NCASC staff as well.

The study protocol for the FSWs was approved by the Protection of Human Subject Committee (PHSC), an ethical committee of FHI. The proposal was approved by the Nepal Health Research Council (NHRC) also. Field work began only after obtaining ethical approval from both the NHRC and PHSC.

ACNielsen was responsible for carrying out the overall study in close coordination with SACTS and the National Reference Laboratory. ACNielsen finalized the research methodology including the sampling plan, reviewed and updated the study tools developed for the previous rounds of the IBBS studies and distributed syphilis

and HIV test results to the study participants with pre/ post test counseling and managed the entire study. ACNielsen was also responsible for disseminating the study results to the target population as well as to a wider audience in meetings organized by FHI under the leadership of the NCASC.

SACTS was responsible for the laboratory work (setting up mobile labs in the field sites), providing training to the lab technicians, supervising, collecting blood samples and conducting HIV and syphilis tests at their Kathmandu-based laboratory. NRL was responsible for providing training to the staff nurses, supervising the collection of urine samples and conducting Chlamydia trachomatis (CT) and Neisseria gonorrhoeae (GC) testing at the Kathmandu lab.

Using the list of local partner NGOs provided by FHI, ACNielsen's field team contacted those NGOs in the study districts. Peer Educators (PEs), Outreach Educators (OEs) and Community Immobilizers (CMs) from the local NGOs provided the support needed to the field research team during the mapping exercise prior to the main survey and during the recruitment of the FSWs in the sample.

2.5 Identification and Recruitment of Study Participants

As per the requirement, the study sites were set up at nine different locations (i.e., at Birgunj, Birtamod, Butwal, Dhangadhi, Itahari, Lahan, Mahendranagar, Narayanghat and Nepalgunj). As evinced in the ToR, the sampling frame included the number of clusters (sites where FSWs solicit or practice sex) along with the measure of size for each of the clusters. Separate sampling frames were prepared for the '16-district domain' and '6-district domain'.

Commercial sex work has no legal support in the country and carries a huge social stigma, therefore, it is carried out secretly. It was difficult identifying the sex workers randomly selected in the different clusters and to convince them to participate in this study. However, field team members of ACNielsen were pre informed about the working place and behavior of the sex workers during the training before conducting these interviews. This helped them to build relations with the local people and key informants and then approach and find out the randomly selected FSWs. Experience of the team members in other similar studies also helped develop good rapport with the study population community.

Before initiating the actual fieldwork, the study team visited different local organizations and apprised the different stakeholders about the study objectives and methodology. Meetings were also conducted with the staff of different organizations that had been mobilizing their peer educators, drop-in center (DIC) operators and outreach educators among the sex workers in the selected study sites. These meetings were conducted to acquaint themselves with the working areas of the different organizations and also to know the names of the staff members interacting with the target groups. It was considered necessary to collect such information since the study also sought to find out the exposure of the study participants to various HIV/AIDS-related programs, including peer/outreach education and their visit to the DICs, VCT centers and STI clinics located in the district.

In order to achieve the desired sample size for the study and to facilitate their participation, the study team was mobilized along the major terai highway districts. The study team used their established contacts with the pimps (dalals), outreach and peer educators of various organizations and FSWs (past and current) in the proposed study areas to facilitate the recruitment of the study population. The sex workers were recruited from various locations within the selected clusters such as

streets, hotels, restaurants, cabin restaurants, tea shops and other settlements. After careful observation of these establishments/sites, team members started approaching the study population using various techniques like building good rapport with their employers, visiting the site, taking the help of brokers and key informants, observing the activities of women at major gathering areas for the FSWs, chatting with other staff of the establishments and approaching familiar sex workers.

In order to confirm the identity of the study participants, the sex workers were asked several screening questions. The questions were related to their sexual experience and behavior; the type of sex partners they had; their involvement in the sex trade; the number of clients; the period of their involvement in the profession; their knowledge about family planning methods; and their knowledge about HIV/AIDS awareness/prevention activities. They were interviewed only after the interviewers found their answers convincing enough to establish their identity as sex workers. The respondents were screened at least twice (at the first contact in the field and at the study centre) and sometimes thrice during the process.

Respondents giving satisfying answers to all the screening questions were briefed about the purposes, objectives and methodology of the study and how they had been randomly selected for the study. Only those sex workers who agreed to participate in the study were taken to the clinic.

An informed consent form was administered by the interviewers in a private setting and witnessed by another staff to ensure that the study participants understood the questions well and knew about the services that would be provided to them and that they were participating in the study on their own will. Both the interviewer and the witness were required to sign the consent form and date it. The interviewer administered the standard questionnaire in a private room.

A laminated ID card with a unique number was also issued to each respondent. The same number was used in the questionnaire, medical records, and blood and urine specimens of the particular respondent. The names and detailed addresses of the respondents were not recorded anywhere. A clinician did pre-test counseling on HIV/AIDS and STIs and asked them if they were currently suffering from any STI symptom. A urine specimen was also collected from each respondent to test for Chlamydia trachomatis and Neisseria gonorrhoeae. They were also examined physically for any evidence of STI symptoms, and in case of any such sign, they were treated and counseled accordingly. They were provided free medicines for the syndromic treatment of STIs in accordance with the “National STI Case Management Guidelines 2007”. A lab technician drew a venous blood sample for HIV and syphilis testing. Additionally, a one-month supply of vitamins and iron capsules and Rs. 100 in cash for their transportation expenses were also provided to the FSWs.

Fieldwork for the study started on February 28, 2009 and lasted till April 25, 2009

Refusal

All the respondents participated voluntarily in the study. Their refusal to participate in the survey was carefully documented. Refusals were recorded at two stages: (1) at the time of approaching the sex workers at different locations and (2) after arriving at the study site, i.e., during the final stage of recruitment. Altogether 212 sex workers refused to take part in the study, and 41 were considered clinically unfit for participation as they were menstruating/bleeding. Among the sex workers who refused to take part in the study, 171 expressed their unwillingness to take part in the survey when they were approached by the study team members themselves or through pimps and peer educators.

As only randomly selected FSWs were approached for their consent to take part in the study, the participants who refused had to be replaced. Those who refused at the time of approaching the sex workers at different locations were replaced by another FSW from the same location. Those who refused to participate after arriving at the study site were replaced by another FSW, first from the same location, and if this was not forthcoming, then from the same cluster. The replacing FSWs were also selected from the same list used in randomly selecting FSWs in the second stage.

2.6 Research Instrument

A structured questionnaire, similar to the previous rounds of the IBBS, was used with some additional questions. New sections were added to draw information on issues like awareness of family planning and female condoms. Inputs received from the researchers during the mock interview sessions conducted prior to the survey were also duly considered for giving final shape to the questionnaire. The questionnaire included questions on demographic characteristics and sexual behaviors - sexual history, use of condoms, risk perception, awareness of HIV/AIDS/STIs, incidence of STI symptoms, participation in HIV/AIDS awareness programs and alcohol/drug use. Individual interviews were conducted with each sex worker using the structured questionnaire. Apart from the structured questionnaire, questions related to STI symptoms were asked to the sex workers by a staff nurse to check for the presence of such symptoms in the past or during the survey. The study participants were provided syndromic treatment for STI problems. Blood samples for HIV and syphilis testing and urine sample for Chlamydia trachomatis and Neisseria gonorrhoeae testing were also collected by the clinician and lab technician. Strict confidentiality was maintained throughout the process.

2.7 Study Personnel

The study team comprised of a study advisor, a research coordinator, two core team members, one data analyst, two senior operations executives and field teams.

Three field teams were formed to complete the survey in nine different locations, each team comprising of one supervisor, five interviewers, one staff nurse, one lab technician and one runner.

2.8 Recruitment and Training of Research Team

ACNielsen's research professionals, in association with the field executives, were responsible for the recruitment of supervisors and interviewers. The recruitment was made from the existing panel of supervisors and interviewers. Candidates having prior experience in similar issues were given preference. A total of three supervisors, 15 interviewers, three staff nurses, three lab technicians and three runners were hired for

the survey. Altogether three field teams were formed, each comprised of one supervisor, five interviewers, one staff nurse, one lab technician and one runner.

A week-long training was organized for all the field researchers/staff. The training focused on introduction to the study, administration of the questionnaire including characteristics of the target groups, methods of approaching the study population, rapport-building techniques and sharing of previous experiences (problems and solutions). Field teams were briefed on the sampling design used in the study and were trained in randomly selecting the FSWs from the selected first stage clusters and ways to replace them should they refuse to participate in the study. In addition, the training session also involved mock interviews, role-plays and class lectures. Role-play practices were carried out to assume the actual field situation. Possible problems that could be faced while approaching the sex workers and ways to overcome such problems were discussed. The training also focused on providing to the research team a clear concept about informed consent, how and whose consent to take, what is a witness and his role in the consent-taking process, pre-test counseling and basic knowledge of HIV/AIDS and STIs.

2.9 Field Operation Procedures

Clinic Set-up

Clinics were set up at nine different locations at Itahari, Lahan, Birtamod, Birgunj, Narayanghat, Butwal, Nepalgunj, Dhangadhi and Mahendranagar in order to cover those areas as outlined by the sampling procedure. These nine centrally located sites were purposely selected, considering the convenience in meeting the study population selected randomly in the sample and in bringing them to the study clinic. Moreover, to assess the changes over the years, seven study clinics were set up at the same sites as in the previous round of the study (2006), while Birtamod and Birgunj sites were added in this round. 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. There were refrigerators at all the sites to maintain the cold chain. It was also ensured that all the sites had power backup facility. However, in case there were still power problems, the samples were transported to the local VCT for storage. The ACNielsen field staff had already built a relationship with all the concerned VCTs and had communicated to them about the help and support solicited from their side while carrying out the study.

Clinical Procedures

All the participants were offered clinical examination as an incentive to participate in the study. 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 were given syndromic treatment according to the national guidelines. Other over-the-counter medicines such as para-cetamol, alkalizing agents and vitamins were given as required. Urine specimens were collected to test for Chlamydia trachomatis and Neisseria gonorrhoeae. Furthermore, external genital examination was complemented with a speculum examination.

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 was 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 was positive, the test result was recorded as positive, and if negative, it was recorded as negative. The testing protocol is based on the National VCT Guidelines of Nepal revised by the NCASC in 2007.

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 were 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 were categorized as “current syphilis” requiring immediate treatment.

PCR was performed for the detection of Neisseria gonorrhoeae and Chlamydia trachomatis among the study population. The urine specimen was tested at the National Reference Laboratory in Kathmandu.

Storage and Transportation of Samples

Blood samples for the HIV/syphilis test were collected from each of the study participants using a 5ml disposable syringe. Serum samples were separated from the collected blood samples and stored in a fridge in the field. The specimens were handed over to the SACTS lab in Kathmandu twice a week in a cold box. The serum samples were stored in the SACTS laboratory at a temperature of -12 to -20°C. The urine samples were handed over to the National Reference Laboratory in Kathmandu twice a week where they were stored at room temperature. Two separate cold boxes were used to transport blood and urine samples from the field to Kathmandu.

2.10 Quality Control

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, 10 percent 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. The quality control samples were given a separate code number to ensure that the person who performed the quality control had no access to the test results.

2.11 Coordination and Monitoring

This IBBS was conducted under the National HIV Surveillance Plan of the National Center for AIDS and STD Control. The study was approved by the NCASC as a surveillance study. ACNielsen was responsible for the overall coordination in implementing the study. SACTS was responsible for setting up the field clinic and performing the laboratory and clinical part of the study, including collecting, storing and testing samples for HIV and syphilis. Similarly, NRL conducted tests for GC and CT from the urine samples collected from the study participants.

The key research team member did the monitoring and supervision of the field activities. ACNielsen study team members visited the field at least once a week to monitor the fieldwork and coordinated with various concerned organizations. Research assistants and field supervisors were responsible on a day-to-day basis to ensure that the study was implemented according to the protocol in the field. Team meetings were held every week to plan ahead and solve any problems in the field. The field supervisors reported to the field executives, core team members or the project coordinator in Kathmandu by telephone whenever necessary. ACNielsen coordinated with FHI to send an appropriate person to the field to deal with any problems reported from the field as and when necessary. In addition, the key research team member made periodic site visits throughout the fieldwork. The key research team members, in conjunction with the regional social research team in Delhi, India were responsible for the overall monitoring. Occasional field visits were made by FHI as well.

2.12 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. Additionally the Protection of Human Subject Committee (PHSC) of Family Health International also reviewed the protocol and consent forms and approved the study.

The participants involved in the in-depth interviews and sample surveys were fully informed about the nature of the study. They knew that their participation was voluntary and that they were free to refuse to answer any question or to withdraw from the interview at any time they wanted. Further, they were also briefed that such withdrawal or refusal would not affect the services they would normally receive from the study sites and other service delivery points. A consent format describing the objectives of the study, the nature of the participant's involvement, the benefits and confidentiality issues was clearly read out to them.

Since names and addresses of the study participants were not mentioned in any document, form and questionnaire, only the ID cards that were provided to the study participants with a unique/specific number identified them. HIV test results were provided to the individual participants in strict confidence if they approached personally with the proper ID issued at the time of study. The study team also maintained the confidentiality of the data collected through the survey.

2.13 HIV/STI Pre- and Post-Test Counseling and Follow-up

After the blood samples were collected, all the study participants were informed about the date, location and place where they could collect the test results. They were also informed that they would be able to collect their test results only after showing the ID card bearing their study number. Pre- and post-HIV/STI test

counseling was provided to the study participants when they returned for the test results. They were briefed about the importance of having the test results for HIV and STI and when and where they could get them with post-test counseling. For follow-up services, the study participants were referred to the Nepal National Social Welfare Association (Mahendranagar), IHS (Dhangadhi), Nepal STD and AIDS Research Center (Nepalgunj), General Welfare Pratisthan (Birgunj), Indreni Sewa Samaj (Lahan), Dang Plus (Dang), Rural Development Foundation (Janakpur), Sahara Nepal (Birtamod), Social Improvement Development Center (Itahari), Women Acting Together for Change (Butwal) and Sahabhagi (Narayanghat) counseling centers. Trained HIV/STI counselors distributed the test results.

The study participants had the choice of receiving either the HIV result or the syphilis result or both in written report format. They were well informed about their option during the pre-test counseling.

Post-test counseling and individual report dissemination were completed between March 22, 2009 and May 20, 2009. The respondents were requested to collect their test results within the specified period. Test results were provided by trained counselors at different VCT centers and the study centers at the study sites. Test results were provided by the same organizations assigned for follow-up service.

2.14 Control of Duplication

As the respondents were selected randomly from the clusters selected in the first stage, principally there was little chance of duplication in the sample. However, to avoid repeated interviews, if any, with the same respondent, several questions were asked to the participant to see if it was the first time she was participating in the study. Such questions included 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 study number.

2.15 Data Processing and Analysis

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

The entire data management and analysis operations were conducted using ACNielsen's in-house hardware and software facilities. A data entry program was prepared using CSPro with built-in checks (range checks, consistency checks and validation checks). There was also a double data entry system for each schedule to oversee correct data entry.

Statistical package, SPSS, was used to generate the univariate and bivariate tables. Appropriate analysis and tables were generated after finalizing with FHI. Confidence intervals were also generated with frequency distribution.

Chapter 3: Findings

Altogether 600 female sex workers (FSWs) participated in the study. Among them, 400 were recruited from six sites representing 16 districts between Jhapa in the eastern region and Rupandehi in the western region along the highway in the terai, while 200 were recruited from three sites representing six districts between Kapilvastu in the western and Kanchanpur in the far western regions.

Of the 600 FSWs randomly selected for the sample, 79.4% were approached/contacted directly by the research team members, 3% through known FSWs of the locality, 17.1% through Peer Educators of various organizations and 0.5% through the outreach educator from the Red Cross.

This chapter describes the background characteristics, sexual behavior of the FSWs and condom use behavior among them. Moreover, knowledge about HIV and STI, symptoms of STIs and exposure to the HIV programs are also analyzed. For all the key study parameters, the analysis is presented separately for the FSWs in the 16 districts between Jhapa and Rupandehi and six districts between Kapilvastu and Kanchanpur.

3.1 Socio-Demographic Characteristics

The FSWs recruited for the study are from the terai belt spanning all the five development regions of Nepal (Eastern, Central, Western, Mid-Western and Far-Western). Out of the 600 FSWs in the sample, 30.8 percent were from eastern terai, 24.2 percent from central terai, 16 percent from western terai, 17.2 percent from mid-western terai and 13.8 percent from far western terai (Table 1).

Table 1: Distribution of Female Sex Workers by Development Region

Current Places of Residence of Female Sex Workers	Percentage (N=600)
Eastern Terai	30.8
Central Terai	24.2
Western Terai	14
Mid-western Terai	17.2
Far-western Terai	13.8
Total	**100.0**

The mean age of the FSWs, within a range of 16 to 50 years, was 27.7 years in the 6 districts and 25.8 years in the 16 districts, whereas the mean age of the FSWs was 26.5 years in all the 22 districts. Almost 22 percent of the FSWs reported to be less than 20 years. About 52 percent of the FSWs were illiterate or had no formal schooling and only 6 percent had completed their education up to SLC or above. More than half (57.8%) of the FSWs were married, 23.8 percent were never married, 12.8 percent were separated and 6.2 percent were widowed. Among the married ones, 28.9 percent said that their husbands had a co-wife (second wife), whereas 63.2 percent were currently living with their husbands or male friends (Table 2).

More than half (58.8%) of the FSWs reported having economically dependent members in the family, with the mean number of dependents being 2.5.

In terms of ethnic/caste group, all major ethnic/caste groups were found to be engaged in this profession. As unveiled by the study population, ethnicity/caste of the sex workers in the 6 districts were as follows: Damai/Sarki/Kami/Sunar:27.5, Chhetri/Thakuri 22.0 percent and Tharu 21.5 percent. Likewise, ethnicity/caste of the FSWs in the 16 districts were as follows: Chhetri/Thakuri 18.3 percent, Magar 12.3 percent and Brahmin 9.3 percent. Other ethnicities/castes of the FSWs are mentioned in Table 2.

Table 2: Socio-Demographic Characteristics of Female Sex Workers

Demographic Characteristics	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Age of respondent						
15-19 yrs	33	16.5	98	24.5	131	21.8
20-24 yrs	44	22.0	86	21.5	130	21.7
25-29 yrs	43	21.5	101	25.3	144	24.0
30-34 yrs	41	20.5	49	12.3	90	15.0
35-39 yrs	19	9.5	45	11.3	64	10.7
40 yrs and above	20	10.0	21	5.3	41	6.8
Mean Age	-	27.7	-	25.8	-	26.5
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Education						
Illiterate	79	39.5	147	36.8	226	37.7
Literate, no schooling	32	16.0	52	13.0	84	14.0
Grade 1-5	38	19.0	85	21.3	123	20.5
Grade 6-9	43	21.5	88	22.0	131	21.8
SLC and Above	8	4.0	28	7.0	36	6.0
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Ethnic/Caste Group						
Chhetri/Thakuri	44	22.0	73	18.3	117	19.5
Tharu	43	21.5	16	4.0	59	9.8
Terai Castes	4	2.0	31	7.8	35	5.8
Damai/Sarki/Kami/Sunar	55	27.5	30	7.5	85	14.2
Magar	12	6.0	49	12.3	61	10.2
Brahmin	17	8.5	37	9.3	54	9.0
Tamang	1	0.5	27	6.8	28	4.7
Newar	1	0.5	26	6.5	27	4.5
Rai/Limbu	0	0.0	32	8.0	32	5.3
Gurung	4	2.0	13	3.3	17	2.8
Others*(Dalit, Teli, Majhi, Sunuwar, etc.)	6	3.0	33	8.3	39	6.5
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Marital Status						
Married	109	54.5	231	57.8	340	56.7
Divorced/Separated	51	25.5	51	12.8	102	17.0
Widowed	14	7.0	23	5.8	37	6.2
Never Married	26	13.0	95	23.8	121	20.2
Husband Has Co-wife						
Yes	16	14.7	62	26.8	78	22.9
No	93	85.3	169	73.2	262	77.1
Total	**109**	**100.0**	**231**	**100.0**	**340**	**100.0**

Table 2: Con'td…

Demographic Characteristics	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Living Status of FSW						
Currently married FSWs living with husband/male friend	82	67	161	63.2	230	64.4
Unmarried sex workers living with male friend	7	7.1	15	5.8	24	6.3
Dependents on Sex Workers' Income						
Yes	160	80.0	235	58.8	395	65.8
No	40	20.0	165	41.3	205	34.2
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Total Number of Dependents (Adults + Children)						
One	28	17.5	55	23.4	83	21.0
2 - 3	93	58.1	133	56.6	226	57.2
4 and more	39	24.4	47	20.0	86	21.8
Total	**160**	**100.0**	**235**	**100.0**	**395**	**100.0**

More than half (56.7%) of the study population was married (Table 2). The proportion of divorced/separated FSWs was high in the 6 districts as compared to the 16 districts. Altogether 25.5 percent of the sex workers in the 6 districts were divorced/separated, whereas only 12.8 percent of the sex workers were divorced/separated in the 16 districts (Table 2).

The average age at which the FSWs were married for the first time was 16 years while majority of the female sex workers (91.6 percent) were married before the age of 20. Almost 32 percent of the sex workers were married when they were less than 14 years.

Sex at an early age is the prevalent practice among the FSWs. In the study population, 94.5 percent had sex for the first time before they had reached 20 years. Among them, 31.7 percent reported having their first sexual intercourse at age 9-14. The average age of their first sexual experience was 15.5 years.

The study population has been engaged in selling sex for money or other things for a period ranging from four months to four or more years. The average number of months for which they were exchanging sex for money or other things was 40 months, with 25.7 percent of them carrying out sex work for less than a year, indicating a high turnover of sex workers in this profession. Among the respondents, 21 percent from the 6 districts and 28 percent from the 16 districts had joined the profession in the last six to 12 months only (Table 3). As per the study criteria set for the study population, those sex workers involved in the profession for less than six months were not interviewed.

The study revealed that the FSWs moved from one place to another in the course of their work. They moved for various reasons, such as to hide their identity as sex

workers, to find a better sex market and to avoid being apprehended by the police during raids. Slightly less than one-fourth of the sex workers said that they had been living there for four or more years. Among the respondents, 25.2 percent had been working as sex workers in and around the interview sites since the last 7-12 months (Table 3).

Almost 18 percent of the sex workers said that they had worked as sex workers elsewhere while 4.2 percent of the sex workers (25/600) reported having worked for some time in India as sex workers (Table 3). Out of the 25 who had worked as sex workers in India, three reported being coerced into going there. Eighty-eight percent of them had worked there for less than a year while the rest had worked longer (Table 3).

Table 3: Sexual Behavior of Female Sex Workers

Sexual Behavior	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Age at First Marriage						
6 - 14	66	37.9	87	28.5	153	31.9
15 - 19	97	55.7	189	62.0	286	59.7
20 - 24	9	5.2	23	7.5	32	6.7
25 - 33	2	1.1	5	1.6	7	1.5
33 +	-	-	1	0.3	1	0.2
Mean/median age at first marriage	-	15.4	-	16.3	-	16
Total	**174**	**100.0**	**305**	**100.0**	**479**	**100.0**
Age at First Sexual Intercourse						
9 - 14	73	36.5	117	29.3	190	31.7
15 - 19	116	58.0	261	65.3	377	62.8
20 - 24	10	5.0	19	4.8	29	4.8
25 - 28	1	0.5	3	0.8	4	0.7
Mean/median age at first sex	-	15.3	-	15.6	-	15.5
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Duration of Sexual Exchange for Money						
6 - 12 months	42	21.0	112	28.0	154	25.7
13 - 24 months	43	21.5	114	28.5	157	26.2
25 - 36 months	37	18.5	64	16.0	101	16.8
37- 48 months	20	10.0	21	5.3	41	6.8
More than 48 months	58	29.0	89	22.3	147	24.5
Mean months	-	48.46	-	36.33	-	40.36
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Working as a Sex Worker from the Interview Location						
Up to 6 months	5	2.5	26	6.5	31	5.2
7 - 12 months	43	21.5	108	27.0	151	25.2
13 - 24 months	44	22.0	111	27.8	155	25.8
25 - 36 months	36	18.0	56	14.0	92	15.3
37 - 48 months	17	8.5	15	3.8	32	5.3
More than 48 months	55	27.5	84	21.0	139	23.2
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**

Table 3: Cont'd…

Sexual Behavior	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Ever Worked as a Sex Worker in Other Places						
Yes	45	22.5	62	15.5	107	17.8
No	155	77.5	338	84.5	493	82.2
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Worked in India as a Sex Worker						
Yes	18	9.0	7	1.8	25	4.2
No	182	91.0	393	98.3	575	95.8
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Coerced or Voluntarily Went to India						
Coerced	1	0.5	2	0.5	3	0.5
Went on one's own	17	8.5	5	1.3	22	3.7
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Duration of Sexual Exchange for Money in India						
Up to 6 months	12	66.7	4	57.1	16	64.0
7-12 months	4	22.2	2	28.6	6	24.0
13-24 months	2	11.1	-	-	2	8.0
More than 24 months	-	-	1	14.3	1	4.0
Total	**18**	**100.0**	**7**	**100.0**	**25**	**100.0**

3.2 HIV/STI Prevalence among Female Sex Workers

Among the 600 FSWs who participated in the study by providing blood and urine samples, 2.3 percent (14/600) were found to be HIV positive. They comprised 3 percent (6/400) of the respondents in the 6 districts and 2 percent (8/400) in the 16 districts. Overall, 3.5 percent (22/600) of the FSWs were found to be currently infected with syphilis. There is also no statistical difference in the current prevalence of syphilis between the FSWs in the 16- and 6-district samples. Altogether 1.8 percent of the respondents had a history of syphilis. The prevalence of gonorrhea among the FSWs was 1.5 percent (9/600) and a slightly higher percentage (8.3% or 50/600) had chlamydia. The prevalence of gonorrhea and chlamydia in the 6 districts was 1 percent and 5.5 percent respectively, whereas in the 16 districts, the figures were 1.8 percent and 9.8 percent respectively.

Table 4: HIV and STI Prevalence among Female Sex Workers

HIV/STI Prevalence	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
HIV	6	3.0	8	2.0	14	2.3
Current syphilis	6	3.0	15	3.8	21	3.5
Syphilis history	3	1.5	11	2.8	14	2.3
Gonorrhea	2	1.0	7	1.8	9	1.5
Chlamydia	11	5.5	39	9.8	50	8.3
Any of the above STI	24	12.0	65	16.3	89	14.8

Note: Syphilis history is not included in any of the above STIs
**** denotes the significant difference (p < .05) between the values of the 6 districts and the 16 districts.***

3.3 Sex Workers, their Clients and Other Sex Partners

3.2.1 Sex Workers and their Clients

The number of paying clients that a FSW serves per day in general ranges from one to four or more, with a mean of 1.9 clients per day. Majority of the FSWs (96.8 %) reported that they entertained 1 to 4 clients per day (Table 5).

The FSWs were also asked about the number of clients they served on the previous day of the interview, during the one week preceding the survey and on the last day that they had sexual contact. The number of clients served by them on the previous day of the interview ranged from zero to more than four. It was found that majority (53.2%) of the study population had provided services to one or two clients, and 10 percent had sexual contact with three or more clients on the previous day of the interview. It was also reported that almost 37 percent of the FSWs had not seen any client on the previous day of the interview. The mean number of clients served on the previous day of the interview was 1.7.

Altogether 33.7 percent of the sex workers had provided sexual services to 3-4 clients in the past one week of this study, while 29.3 percent had entertained 5-10 clients in the week preceding the survey. The mean number of clients entertained by the sex workers in the past one week was 6.4 (Table 5).

An overwhelming majority of the FSWs (81.8) reported that they worked four to seven days a week as a sex worker (table 5). The FSWs carried out their profession for 5.3 days on average a week.

Table 5: Number of Clients Reported by Female Sex Workers

Number of Clients of Sex Workers	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Average Number of Clients Per Day						
1 - 2	161	80.5	300	75.0	461	76.8
3 - 4	34	17.0	86	21.5	120	20.0
More than 4	5	2.5	14	3.5	19	3.2
Mean clients per day		1.8		2.0		1.9
Number of Clients on the Previous Day						
None	113	56.5	108	27.0	221	36.8
1 - 2	68	34.0	251	62.8	319	53.2
3 - 4	16	8.0	33	8.3	49	8.2
More than 4	3	1.5	8	2.0	11	1.8
Mean number of clients on the previous day		2.0		1.6		1.7
Number of Clients in the Past Week						
None	11	5.5	-	-	11	1.8
1 - 2	61	30.5	70	17.5	131	21.8
3 - 4	36	18.0	166	41.5	202	33.7
5 -10	66	33.0	110	27.5	176	29.3
More than 10	26	13.0	54	13.5	80	13.3
Mean number of clients in the past week		6.2		6.4		6.4

Table 5: Con'td…

Number of Clients of Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Time of Last Sexual Contact						
On the day of interview	7	3.5	19	4.8	26	4.3
1 - 2 days before	121	60.5	343	85.8	464	77.3
3 - 5 days before	56	28.0	38	9.5	94	15.7
6 and more days before	16	8.0	-		16	2.7
Number of Clients on the Day of Last Sexual Contact						
1	118	59.0	302	75.5	420	70.0
2	58	29.0	59	14.8	117	19.5
3	17	8.5	24	6.0	41	6.8
4 and more	7	3.5	15	3.8	22	3.7
Mean number of clients on that day		1.6		1.4		1.5
Average Number of Days Worked in a Week						
1	16		1		17	2.8
2	25		17		42	7.0
3	18		32		50	8.3
4 - 7 days	141		350		491	81.8
Mean number of days worked in a week		4.5		5.6		5.3

3.2.2 Types of Clients

Professionwise, the six most cited clients of the sex workers were transport workers/drivers, businessmen, service holders, policemen, industrial/wage workers and soldiers/army personnel. Among them, transport workers were reported to be the most frequent clients - 57.7 percent. Likewise, businessmen, service holders, policemen, industrial/wage workers and soldiers/army men were reported to be 33%, 29.3%, 27%, 22% and 21.5% of the total clientele, respectively.

When asked about the occupation of the last client, the FSWs named the familiar list of frequenting clients, although their ranking varied slightly. For instance, “transport workers/drivers” topped their list of last client, but the position of the other occupations differed (Table 6).

Table 6: Types of Clients Reported by Female Sex Workers

Types of Clients	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Occupation of Most Frequent Clients*						
Transport worker	84	42	262	65.5	346	57.7
Businessman	53	26.5	145	36.3	198	33
Service holder	66	33	110	27.5	176	29.3
Police	50	25	111	27.8	161	27
Industrial/wage worker	48	24	84	21	132	22
Soldier/army personnel	53	26.5	76	19	129	21.5
Contractor	24	12	68	17	92	15.3
Foreigner (Indian and other nationals)	19	9.5	73	18.3	92	15.3
Rickshawala	12	6	64	16	76	12.7
Farmer	25	12.5	21	5.3	46	7.7
Mobile businessman	10	5	31	7.8	41	6.8
Student	13	6.5	22	5.5	35	5.8
Others	9	4.5	34	8.5	43	7.2
Occupation of Last Client						
Transport worker	31	15.5	103	25.8	134	22.3
Businessman	27	13.5	65	16.3	92	15.3
Service holder	23	11.5	40	10	63	10.5
Soldier/army personnel	19	9.5	21	5.3	40	6.7
Police	15	7.5	24	6	39	6.5
Industrial/wage worker	13	6.5	26	6.5	39	6.5
Foreigner (Indian and other nationals)	7	3.5	26	6.5	33	5.5
Rickshawala	3	1.5	27	6.8	30	5
Contractor	10	5	18	4.5	28	4.7
Mobile businessman	11	5.5	13	3.3	24	4
Farmer	13	6.5	10	2.5	23	3.8
Student	8	4	6	1.5	14	2.3
Others	7	3.5	13	3.3	20	3.3
Don't know	13	6.5	8	2	21	3.5

Note: The percentages add up to more than 100 because of multiple responses.

3.2.3 Sex Workers and their Paying/Non-paying Sex Partners

The risk of transmission of sexual infection depends largely on the number of sex partners. This section provides additional information on the number of paying and non-paying partners of the FSWs. Non-paying partners included the husband, boyfriends and regular partners who did not pay them for sex. Some 32.8 percent of the sex workers had 3-4 paying sex partners in the week preceding the survey. About 13 percent of the sex workers had more than 10 paying sex partners during the week preceding the survey. The mean number of paying partners in the past week was 5.82.

About 49 percent of the sex workers had non-paying sex partners with a minimum of one to a maximum of five or more. The mean number of non-paying partners entertained by the sex workers in the week preceding the survey was 1.24 (Table 7).

The mean number of both paying and non-paying sex partners in the previous week was 6.35 with 36.2 percent of the sex workers serving 3-4 clients during the period.

Table 7: Sex Partners of Female Sex Workers

Sex Partners of Sex Workers	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
No. of Paying Sex Partners in the Past Week						
None	15	7.5	-	-	15	2.5
1 - 2	64	32	76	19	140	23.3
3 - 4	34	17	163	40.8	197	32.8
5 - 6	33	16.5	63	15.8	96	16
7 -10	30	15	46	11.5	76	12.7
More than 10	24	12	52	13	76	12.7
Mean (paying partners in the past week)		5.8		5.8		5.8
No. of Non-paying Sex Partners in the Past Week						
None	103	51.5	203	50.8	306	51.0
1 - 2	88	44	190	47.5	278	46.3
3 - 4	8	4	6	1.5	14	2.3
More than five	1	0.5	1	0.3	2	0.3
Mean (non-paying partners in the past week):		1.39		1.17		1.24
No. of Paying and Non-paying Sex Partners in the Past Week						
None	6	3.0	-	-	6	1
1 – 2	57	28.5	31	7.8	88	14.7
3 - 4	41	20.5	176	44.0	217	36.2
5 – 10	66	33.0	131	32.8	197	32.8
More than 10	30	15.0	62	15.5	92	15.3
Mean (paying and non-paying sex partners in the past week)	-	6.21	-	6.42	-	6.35

3.4 Types of Sex Practiced by Sex Workers

Different types of violence against sex workers are common in the society. Such violence, including forced sex, puts sex workers at higher risk of contracting STIs/HIV. In this study, the sex workers were asked if they ever faced situations such as forced sex or demand for sexual acts in which they were unwilling to participate. It was reported that 33.5 percent of the sex workers in the 6 districts and 19.5 percent in the 16 districts had been subjected to forced sex by their clients in the past year. Some of the sex workers reported having performed sex other than vaginal with the different partners in the year preceding the survey. One-fourth (26.3%) of the respondents also reported that they had encountered clients who refused to pay for sexual services on at least one occasion (Table 7). Such cases were reported to be higher in the 6 districts (37.5 %) as compared to the other 16 districts (20.8%). The mean number of such incidents in the past six months for the entire survey group was 4.8.

The sex workers were further asked if they had been forced by their clients to perform any sexual acts that they disliked in the past one year. A total of 158 (26.2%) sex workers replied positively. It was also revealed that masturbation (44.3% or 70/158) followed by oral sex (24.1% or 38/158) and anal sex (23.4% or 37/158) were reported as types of sexual acts that they were forced to perform despite their unwillingness to do so in the past one year. Also, 42.4 percent of the sex workers reported that their clients ran away without paying in the past one year. Majority of the sex workers (62.3%) in the 6 districts reported clients running away without paying as the activity they disliked most. Almost 28 percent of the entire survey group had also been subjected to physical assault in the past one year (Table 8).

Table 8: Types of Sex Practiced by Female Sex Workers

Type of Sex	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Any Partner Forcibly Demanded Sex in the Past Year						
Yes	67	33.5	78	19.5	145	24.2
No	133	66.5	322	80.5	455	75.8
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Types of Sex Acts in the Past Year						
Oral Sex	30	15.0	41	10.3	71	11.8
Anal Sex	22	11.0	44	11.0	66	11.0
Masturbation	54	27.0	177	44.3	231	38.5
Only Vaginal	138	69.0	211	52.8	349	58.2
Total	**200**	*****	**400**	*****	**600**	*****
Clients Refusing to Pay for Sexual Services						
Yes	75	37.5	83	20.8	158	26.3
No	125	62.5	317	79.3	442	73.7
Mean No. of such incidences in past six months		3.8		5.7		4.8
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Clients Performing Activities that FSWs Disliked in the Past Year						
Yes	69	34.5	89	22.3	158	26.3
No	131	65.5	311	77.8	442	73.7
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Types of Activities Performed by Clients Which FSWs Disliked						
Masturbation	25	36.2	45	50.6	70	44.3
Ran away without paying	43	62.3	24	27.0	67	42.4
Forced to have sex after drinking alcohol	21	30.4	35	39.3	56	35.4
Beaten up	15	21.7	29	32.6	44	27.8
Used abusive language (bhalu etc.)	15	21.7	26	29.2	41	25.9
Oral sex	15	21.7	23	25.8	38	24.1
Anal sex	14	20.3	23	25.8	37	23.4
Snatched /stole money	3	4.3	11	12.4	14	8.9
Others	1	1.4	1	1.1	2	1.3
Total	**69**	*****	**89**	*****	**158**	*****

Table 8: Cont'd…

Type of Sex	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Types of Sex with Last Client						
Masturbation	61	30.5	185	46.3	246	41.0
Anal Sex	27	13.5	140	35.0	169	28.2
Oral Sex	8	4.0	20	5.0	28	4.7
Vaginal Sex	200	100.0	400	100.0	600	100.0
Total	**200**	*	**400**	*	**600**	*
Physically Assaulted by any Person for any Reason in the Past Year						
Yes	36	18.0	61	15.3	97	13.1
No	164	82.0	339	84.8	503	
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**

Note: The percentages add up to more than 100 because of multiple responses.

3.5 Income of Sex Workers

The mean income of the sex workers from the last sex with a client was Rs. 482 (among all sex workers) with a minimum of less than Rs. 100 per sex act to a maximum of above Rs. 2000 (Table 9). For the 6 districts, this mean income was reported to be significantly higher as compared to the 16 districts. Such variations in their income could be due to the varying rates of the sex acts charged by the different categories of sex workers (such as street based, restaurant based, disco based, etc.) in the study population. Other reasons could be different rates for married and uneducated sex workers compared to their educated and unmarried counterparts. Both cash and gifts received by the sex workers have been taken into account when calculating the total income from sex work. However, the weekly mean income was reportedly similar for the FSWs in both the 6 and 16-district samples, with an average of Rs. 2534.

The sex workers were also asked if they were engaged in any other job besides sex work. Majority of the sex workers (63.4 %) reported being involved in other jobs as well. Among them, 48 percent in the 6 districts and 71 percent in the 16 districts had other jobs. Among the sex workers, majority of the respondents (27.3%) were working as wage laborers. Although most of the respondents (33.8 %) were working as waitresses in different hotels/restaurants in the 16 districts, only one respondent in the 6 districts was reported to be working as a waitress (Table 9). Other types of jobs performed by the respondents are shown in the table below. The sex workers were earning substantial income from such jobs. The weekly income of the respondents from jobs other than sex work ranged from Rs. 50 to above Rs. 2000 with an average of Rs. 766. Average weekly income from other works is also much higher among the FSWs in the 6 districts compared to the 16-district sample (Rs. 1136 vs Rs. 640).

Table 9: Income from Sex Work and Other Jobs

Income from Sex Work and Other Jobs	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Income from Last Sex with Client						
Up to Rs. 100	46	23.0	29	7.3	75	12.5
Rs. 101 - Rs. 500	89	44.5	239	59.8	328	54.7
Rs. 501 - Rs. 1,000	31	15.5	91	22.8	122	20.3
Rs. 1001 - Rs. 1,500	14	7.0	28	7.0	42	7.0
Rs. 1501 - Rs. 2,000	8	4.0	11	2.8	19	3.2
Rs. 2000 and above	12	6.0	2	0.5	14	2.3
Mean income from last client: Rs.	-	649	-	398	-	482.0
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Weekly Income from Sex Work						
Up to Rs. 100	1	0.5	1	0.3	2	0.3
Rs. 101 - Rs. 500	32	16.0	43	10.8	75	12.5
Rs. 501 - Rs. 1,000	29	14.5	84	21.0	113	18.8
Rs. 1001 - Rs. 1,500	22	11.0	56	14.0	78	13.0
Rs. 1501 - Rs. 2,000	31	15.5	59	14.8	90	15.0
Rs. 2000 and above	85	42.5	157	39.3	242	40.3
Mean weekly income from sex work (Cash): Rs.	-	2998	-	2302	-	2534
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Have Other Jobs besides Sex Work						
Yes	96	48.0	284	71.0	381	63.4
No	104	52.0	116	29.0	220	36.6
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Wage laborer	32	33.3	72	25.4	104	27.3
Waitress	1	1.0	96	33.8	97	25.5
Owner of Bhatti Pasal/restaurant	15	15.6	38	13.4	53	13.9
Retail shops/business	21	21.9	25	8.8	46	12.1
Housemaid/restaurant employee (dish cleaner, cook, washerwoman, etc.)	4	4.2	41	14.4	45	11.8
Peer educator	12	12.5	3	1.1	15	3.9
Knitting/tailoring	6	6.3	5	1.8	11	2.9
Job (teacher, peon, etc.)	5	5.2	4	1.4	9	2.4
Others	6	6.3	3	1.1	9	2.4
Total	**96**	*	**284**	*	**381**	*
Average Weekly Income from Other Sources Besides Sex Work						
0 (No Other Source)	104	52.0	116	29.0	220	36.7
Up to Rs. 500	52	26.0	169	42.3	221	36.8
Rs. 501- Rs. 1,000	24	12.0	88	22.0	112	18.7
Rs. 1001 - Rs. 1,500	7	3.5	16	4.0	23	3.8
Rs. 1501 - Rs. 2,000	4	2.0	6	1.5	10	1.7
Rs. 2000 and above	9	4.5	5	1.3	14	2.3
Mean weekly income Rs.	-	1136.0	-	640	-	766
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**

Note: The percentages add up to more than 100 because of multiple responses.

3.6 Knowledge of Condoms among Sex Workers

The study result revealed that the radio, friends/neighbors, NGOs, TV and pharmacy were the top five sources of information on condoms among the sex workers. Some other important sources of information were the Health Post/Health Center, hospital, bill board/sign board and newspapers/posters. A significant proportion of the

respondents from both the 6-district (69.5%) and 16-district (74 %) samples reported that they had heard about condoms from the health workers/volunteers.

Table 10: Sources of Knowledge of Condoms Reported by Female Sex Workers

Source of Knowledge of Condoms	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Sources of Knowledge of Condoms						
Radio	192	96.0	371	92.8	564	94.0
Friends/neighbors	182	91.0	366	91.5	548	91.3
NGOs	168	84.0	369	92.3	538	89.7
TV	145	72.5	342	85.5	487	81.2
Pharmacy	154	77.0	330	82.5	484	80.7
Health Post/Health Center	148	74.0	310	77.5	458	76.3
Health workers/volunteers	139	69.5	296	74.0	435	72.5
Hospital	130	65.0	292	73.0	422	70.3
Newspapers/posters	161	80.5	226	56.5	387	64.5
Bill board/sign board	151	75.5	221	55.3	373	62.2
Community workers	99	49.5	180	45.0	279	46.5
Community event/training	116	58.0	144	36.0	260	43.3
Street drama	107	53.5	115	28.8	222	37.0
Cinema hall	52	26.0	117	29.3	169	28.2
Video van	25	12.5	58	14.5	83	13.8
Comic book	41	20.5	38	9.5	79	13.2
Others	3	1.5	-	-	3	0.5

Note: The percentages add up to more than 100 because of multiple responses.

3.7 Condom Use with Different Sex Partners

As mentioned earlier, the FSWs reported having two different types of sex partners: (i) paying partners, i.e., clients, both regular and occasional, and (ii) non-paying partners, i.e., husband, boyfriends and cohabiting male friends. It was also revealed that the consistent use of condoms with non-paying partners was much lower than with regular partners and clients. The sex workers also reported that in most of the cases they had suggested their partners to use a condom during sex.

3.7.1 Condom use with Client

An overriding majority (84.8%) of the respondents said a condom had been used in their last sexual encounter with a client. Of them, three-quarters (77.8%) had themselves suggested the use of a condom in these sexual encounters. A significantly higher proportion of the respondents (69.8%) mentioned the use of condoms during sex with their clients in the past year (Table 11).

3.7.2 Condom use with Regular Client

Altogether 74 percent of the sex workers reported having regular clients in the past year. More than three-fourths (77.9%) said a condom had been used in the last sexual contact with a regular client. Condom use was mostly (80.3%) suggested by the respondents themselves (Table 11). More than three-fourths of the sex workers mentioned the use of a condom during each sexual act with their regular clients in the past year.

3.7.3 Condom use with Non-paying Partners

Near about half (47.2%) of the sex workers had non-paying sex partners in the past year. These non-paying partners were mostly known persons, such as a boyfriend, a husband or cohabiting sex partner. The infrequent use of condoms during sex with a non-paying partner is the prevalent practice among the sex workers as only 9.3 percent said a condom was consistently used in the past year during sex with their non-paying partners.

Table 11: Condom Use with Clients, Regular Clients and Non-paying Sex Partners

Condom Use by Female Sex Workers	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Use of Condom with Client in the Last Sex						
Yes	161	80.5	348	87.0	509	84.8
No	39	19.5	52	13.0	91	15.2
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Condom Use Suggested in the Last Sex by						
Myself	100	62.1	296	85.1	396	77.8
My partner	61	37.9	52	14.9	113	22.2
Total	**161**	**100.0**	**348**	**100.0**	**509**	**100.0**
Consistent Use of Condom with the Client in the Past Year						
All of the time*	131	65.5	288	72.0	419	69.8
Most of the time	35	17.5	51	12.8	86	14.3
Sometimes	16	8.0	41	10.3	57	9.5
Rarely	3	1.5	17	4.3	20	3.3
Never	15	7.5	3	0.8	18	3.0
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Have Regular Client in the Past Year						
Yes	134	67.0	310	77.5	444	74.0
No	66	33.0	90	22.5	156	26.0
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Use of Condom with Regular Client in the Last Sex						
Yes	97	72.4	249	80.3	346	77.9
No	37	27.6	61	19.7	98	22.1
Total	**135**	**100.0**	**310**	**100.0**	**444**	**100.0**
Condom Use Suggested By						
Myself	67	69.1	212	85.1	279	80.6
My partner	30	30.9	37	14.9	67	19.4
Total	**97**	**100.0**	**249**	**100.0**	**346**	**100.0**

Table 11: Con'td..

Condom Use by Female Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Consistent Use of Condom with Regular Clients in the Past Year						
All of the time *	75	56.0	216	69.7	291	65.5
Most of the time	20	14.9	46	14.8	66	14.9
Sometimes	14	10.4	28	9.0	42	9.5
Rarely	4	3.0	8	2.6	12	2.7
Never	21	15.7	12	3.9	33	7.4
Total	**134**	**100.0**	**310**	**100.0**	**444**	**100.0**
Have Non-paying Partner during Past Year						
Yes	89	44.5	194	48.5	283	47.2
No	111	55.5	206	51.5	317	52.8
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Use of Condom with Non-paying Partner in the Last Sex						
Yes	20	22.5	53	27.3	73	25.8
No	69	77.5	141	72.7	210	74.2
Total	**89**	**100.0**	**194**	**100.0**	**283**	**100.0**
Consistent Use of Condom with Non-paying Partner in the Past Year						
All of the time*	15	7.5	41	10.3	56	9.3
Most of the time	9	4.5	13	3.3	22	3.7
Sometimes	13	6.5	29	7.3	42	7.0
Rarely	11	5.5	40	10.0	51	8.5
Never	52	26.0	80	20.0	132	22.0
Did not have sexual intercourse with non- paying partner in the last 12 months	100	50.0	197	49.3	297	49.5
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**

3.7.4 Condom use with Partners Other Than Client, Husband and Male Friend

More than half (66%) of the respondents reportedly were engaged in sexual acts with people other than their clients, husband or male friend in the past year. However, the proportion of FSWs having sexual encounters with occasional sex partners in the past year in the 6 districts was relatively lower (23.5%) than in the 16 districts (87.3%). An overwhelming majority (90.4%) of the FSWs surveyed in this category said a condom had been used in the last sexual act with such partners, and in maximum number of cases (86%), the sex workers themselves had suggested using a condom (Table 12).

The sex workers were more likely to use condoms consistently (76%) with unknown occasional partners than with familiar partners.

Table 12: Condom Use with Partners Other than Client, Husband and Male Friend

Condom Use by Female Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Have Sex with Partners Other than Client, Husband, Male Friend in the Past Year						
Yes	47	23.5	349	87.3	396	66.0
No	153	76.5	51	12.8	204	34.0
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Use of Condom with Partners Other than Client, Husband, Male Friend in the Last Sex						
Yes	41	87.2	317	90.8	358	90.4
No	6	12.8	32	9.2	38	9.6
Total	**47**	**100.0**	**349**	**100.0**	**396**	**100.0**
Condom Use Suggested by						
Myself	38	92.7	270	85.2	308	86.0
My Partner	3	7.3	47	14.8	50	14.0
Total	**41**	**100.0**	**317**	**100.0**	**358**	**100.0**
Consistent Use of Condom with Partners Other than Client, Husband, Male Friend in the Past Year						
All of the time	36	76.6	265	75.9	301	76.0
Most of the time	6	12.8	48	13.8	54	13.6
Sometimes	1	2.1	22	6.3	23	5.8
Rarely	2	4.3	10	2.9	12	3.0
Never	2	4.3	4	1.1	6	1.5
Total	**47**	**100.0**	**349**	**100.0**	**396**	**100.0**

3.8 Availability of Condoms and Their Brand Names

Altogether 47 percent of the sex workers in the 6 districts reported they usually carried a condom with them, whereas only 9.5 percent of the sex workers in the 16 districts reported carrying the contraceptive. Overall 22 percent of the FSWs were reported to be regular condom carriers. However, majority (68.9%) of those who reported usually carrying a condom did not have one with them at the time of interview (Table 13).

An overriding majority (67.3%) of the respondents mentioned that they could get a condom within five minutes from their place of work. Almost 19 percent from the 6 districts and 3.5 percent from the 16 districts reported having to spend more than 15 minutes to get a condom from their place of work.

Majority of the FSWs (82.2%) reported that they could obtain condoms from the pharmacies. NGOs/health workers/volunteers (81%) were their second most important source of condoms. Other important places where they could reportedly get condoms were the general retail stores (58%) and the Health Post/Health Center (46.7%).

The female sex workers were also asked about the brand names of the most used condoms. Among the condoms available in the place where they worked, condoms provided by the Ministry of Health were the most used brand (76%). The FSWs and their sex partners could get these condoms free of cost from the different hospitals, Health Posts/Health Centers, health workers/volunteer, etc. So this could be the reason behind the heavy use of this brand. Among the commercial brands, “Number One” was used by 45.8 percent of the sex workers. The other most used brands mentioned by them were the Dhaal (26.3%), Panther (24%) and Jodi (25 %).

Table 13: Condom Available Places and Brand Name of Most Used Condom Reported by Female Sex Workers

Condom Acquisition	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Usually Carry Condoms						
Yes	94	47.0	38	9.5	132	22.0
No	106	53.0	362	90.5	468	78.0
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
No. of Condoms Carried						
1	1	1.1	2	5.3	3	2.3
2	4	4.3	10	26.3	14	10.6
3 - 5	5	5.3	11	28.9	16	12.1
6 -10	2	2.1	1	2.6	3	2.3
More than 10	2	2.1	3	7.9	5	3.8
Not carrying right now	80	85.1	11	28.9	91	68.9
Total	**94**	**100.0**	**38**	**100.0**	**132**	**100.0**
Time Needed to Obtain Condoms from Nearest Place						
Up to 5 minutes**	83	41.5	321	80.3	404	67.3
6 - 10 minutes	54	27.0	49	12.3	103	17.2
11 - 15 minutes	25	12.5	16	4.0	41	6.8
16 - 20 minutes	16	8.0	3	0.8	19	3.2
21 and more minutes	22	11.0	11	2.8	33	5.5
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Places Where Condoms are Available						
Pharmacy	156	78.0	337	84.3	493	82.2
NGOs/health workers/volunteers	163	81.5	323	80.8	486	81.0
General retail store (Kirana Pasal)	117	58.5	231	57.8	348	58.0
Health Post/ Health Center	101	50.5	179	44.8	280	46.7
Client/other sex partner	48	24.0	166	41.5	214	35.7
Hospital	91	45.5	114	28.5	205	34.2
Private clinic	56	28.0	132	33.0	188	31.3
Paan shop	37	18.5	137	34.3	174	29.0
Hotel/lodge	18	9.0	105	26.3	123	20.5
Peer/friends	18	9.0	82	20.5	100	16.7
FPAN clinic	38	19.0	52	13.0	90	15.0
Bhatti Pasal	1	0.5	28	7.0	29	4.8
Cabin restaurant	-	-	19	4.8	19	3.2
Mobile shop	8	4.0	-	-	8	1.3
Tea Shop	2	1.0	-		2	0.3
GWP	1	0.5	1	0.3	2	0.3
Others	3	1.5	2	0.5	5	0.8
Don’t know	1	0.5	-	-	1	0.2
Total	**200**	*	**400**	*	**600**	*

Table 13: Con'td…

Condom Acquisition	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Brand Names of Condoms Used Most in Past One Year						
Condom with no brand name (MOH white, red)	134	67.0	322	80.5	456	76.0
Number One	68	34.0	207	51.8	275	45.8
Dhaal	45	22.5	113	28.3	158	26.3
Panther	56	28.0	94	23.5	150	25.0
Jodi	52	26.0	92	23.0	144	24.0
Black Cobra	28	14.0	49	12.3	77	12.8
Skinless	21	10.5	16	4.0	37	6.2
Kamasutra	3	1.5	30	7.5	33	5.5
Never used condom	12	6.0	-	-	12	2.0
Trishna	-	-	4	1.0	4	0.7
Did not use in the past 12 months	1	0.5	2	0.5	3	0.5
Health Care	2	1.0	-	-	2	0.3
Double Mazza	1	0.5	-	-	1	0.2
Puma	-	-	1	0.3	1	0.2
Josh	-	-	1	0.3	1	0.2
Moods	-	-	1	0.3	1	0.2
Female condom	-	-	1	0.3	1	0.2
Total	**200**	*****	**400**	*****	**600**	*****

Note: The percentages add up to more than 100 because of multiple responses

The respondents were further asked about the mode of availability and the places from where they could get the condoms. More than half (58.3%) of the sex workers reported obtaining free condoms all the time while 7 percent purchased them. As shown in Table 14, a large proportion (88.7%) of the respondents said that NGOs/health workers/volunteers provided condoms free of cost to them. Nearly half of them (47.2%) reported that their clients brought condoms with them. Peers/friends were reported as the next important source by 15.1 percent of the sex workers. Other reported sources are shown in Table 14.

A clear majority of the sex workers (81.5 %) maintained that free condoms should be available with the NGOs/health workers/volunteers for easy access. Another section of the sex workers (48.9 %) said that they felt comfortable when the clients themselves brought condoms with them. Altogether 17.3 percent of the respondents said that they could comfortably approach their peers/friends for condoms (Table 14).

The respondents mentioned that they felt comfortable purchasing condoms from the pharmacies (75.2%), general stores (kirana shop) (33.8%), hotels/lodges (21.4%) and private clinics (20.9%) respectively (Table 14).

Table 14: Reported Places for Obtaining Condoms by Female Sex Workers (Those buying condoms)

Condom Acquisition	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
FSWs Obtain Condoms Usually						
Free of cost	120	60.0	230	57.5	350	58.3
Purchase	14	7.0	28	7.0	42	7.0
Obtain both ways	52	26.0	140	35.0	192	32.0
Condom never used	14	7.0	2	0.5	16	2.7
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Usually Obtain Free Condoms From						
NGO/Health Workers/Volunteers	148	86.0	333	90.0	481	88.7
Clients/other sex partners	69	40.1	187	50.5	256	47.2
Peers/friends	12	7.0	70	18.9	82	15.1
Hotel/lodge/restaurant	2	1.2	75	20.3	77	14.2
Health Post/Health Center	35	20.3	26	7.0	61	11.3
FPAN clinics	16	9.3	27	7.3	43	7.9
Community events	2	1.2	30	8.1	32	5.9
Hospital	9	5.2	8	2.2	17	3.1
Bhatti Pasal	1	0.6	9	2.4	10	1.8
GWP	-	-	3	0.8	3	0.6
Total	**172**	*****	**370**	*****	**542**	*****
Most Convenient Place to Obtain Free Condoms						
NGO/health workers/volunteers	135	78.5	307	83.0	442	81.5
Client/other sex partners	70	40.7	195	52.7	265	48.9
Hotel/lodge/restaurant	12	7.0	82	22.2	94	17.3
Peers/friends	6	3.5	88	23.8	94	17.3
Health Post/Health Center	27	15.7	42	11.4	69	12.7
Community events	2	1.2	18	4.9	20	3.7
FPAN clinics	8	4.7	11	3.0	19	3.5
Hospital	6	3.5	10	2.7	16	3.0
Bhatti Pasal	1	0.6	10	2.7	11	2.0
GWP	-	-	3	0.8	3	0.6
Beauty parlor	-	-	2	0.5	2	0.4
Massage parlor	-	-	1	0.3	1	0.2
Pan Pasal	-	-	1	0.3	1	0.2
Medical shop	-	-	1	0.3	1	0.2
Total	**172**	*****	**370**	*****	**542**	*****

Table 14: Con'td..

Condom Acquisition	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Places for Purchasing Condoms						
Pharmacy	48	72.7	137	81.5	185	79.1
General retail store (Kirana Pasal)	20	30.3	69	41.1	89	38.0
Private clinic	16	24.2	29	17.3	45	19.2
Pan Pasal	5	7.6	33	19.6	38	16.2
Hotel/lodge/restaurant	1	1.5	33	19.6	34	14.5
DIC	-	-	4	2.4	4	1.7
Mobile shop	3	4.5	-	-	3	1.3
Client themselves bring condoms	-	-	3	1.8	3	1.3
Others	3	4.5	-	-	3	1.3
Total	**66**	*	**168**	**100.0**	**234**	*
Most Convenient Place to Purchase Condom						
Pharmacy	42	63.6	134	79.8	176	75.2
General retail store (Kirana Pasal)	14	21.2	65	38.7	79	33.8
Hotel/lodge/restaurant	4	6.1	46	27.4	50	21.4
Private clinic	15	22.7	34	20.2	49	20.9
Pan shop	2	3.0	33	19.6	35	15.0
DIC	-	-	4	-	4	1.7
Mobile shop	3	4.5	-		3	1.3
Cosmetic shop	1	1.5	1	0.6	2	0.9
Bhatti Pasal	1	1.5	1	0.6	2	0.9
CRS Company	1	1.5	-	-	1	0.4
Total	**66**	*	**168**	**100.0**	**234**	*

Note: The percentages add up to more than 100 because of multiple responses

3.9 Knowledge and Use of Female Condom

The survey results revealed that almost half (49.8%) of the FSWs had heard about the female condom. The proportion of sex workers who had heard about it in the 6 districts and 16 districts was 49 percent and 50.3 percent respectively. It was also observed that the sources of knowledge about the female condom in the 6-district and 16- district samples were almost the same. Majority of the respondents (77.9%) who had heard about the female condom reported NGO staff as the major source of knowledge. Other sources of knowledge mentioned by the FSWs were friends/relatives/neighbors: 27.1 percent and health workers/volunteers: 12 percent (Table 15). Among the FSWs who had heard about the female condom, only 4.1 percent in the 6 districts and 5.5 percent in the 16 districts had ever used one. Among the FSWs who had ever used a female condom, 50 percent (2/4) in the 6

districts and 63.6 percent (7/11) in the 16 districts had used one within a month preceding this survey (Table 15).

Table 15: Knowledge and Use of Female Condom

Knowledge and Use of Female Condoms	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Have Heard About Female Condoms						
Yes	98	49.0	201	50.3	299	49.8
No	102	51.0	199	49.8	301	50.2
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Sources of Knowledge of Female Condom						
NGO staff	77	78.6	156	77.6	233	77.9
Friends/relatives/neighbors	25	25.5	56	27.9	81	27.1
Health workers/volunteers	7	7.1	29	14.4	36	12.0
Community interaction/training	7	7.1	10	5.0	17	5.7
Radio	6	6.1	9	4.5	15	5.0
Community workers	4	4.1	5	2.5	9	3.0
Newspapers/posters	-	-	7	3.5	7	2.3
Pharmacy	-	-	5	2.5	5	1.7
TV	-	-	3	1.5	3	1.0
Health Post/Health Center	2	2.0	1	0.5	3	1.0
Hospital	1	1.0	2	1.0	3	1.0
Other	6	6.1	9	4.5	15	5.0
Total	**98**	*****	**201**	*****	**299**	*****
Ever Used a Female Condom						
Yes	4	4.1	11	5.5	15	5.0
No	94	95.9	190	94.5	284	95.0
Total	**98**	*****	**201**	*****	**299**	*****
Female Condom Used the Last Time						
Within a month	2	50.0	7	63.6	9	60.0
1 - 5 months before	2	50.0	4	36.4	6	40.0
Total	**4**	**100.0**	**11**	**100.0**	**15**	**100.0**

****Note: The percentages add up to more than 100 because of multiple responses***
(Others = Client, Friends, Female Empowerment, Husband, etc.)

3.10 Knowledge and Use of Family Planning Methods

Among the married sex workers, 85.8 percent had children, and 9.6 percent of the sex workers were willing to have a child in the next two years. The proportion of FSWs willing to have a child in the next two years was higher in the 16 districts than in the 6 districts (11.1 percent vs. 6.9 percent). When the sex workers were asked about the methods of family planning adopted, almost all respondents across the board (99.2 percent) reported the condom and injection as important methods. Other reported methods of family planning heard by the FSWs are shown in Table 16. A higher number of FSWs from the 16 districts had heard about IUDs as a method of

family planning as compared to their counterparts in the 6 districts (82.3 percent against 69 percent). An overwhelming majority of the married sex workers (92.5%) in the 6 districts were currently using a family planning method to delay/avoid pregnancy, whereas only 74.1 percent of the FSWs in the 16 districts were using any family planning method. Among the FSWs who were currently adopting a family planning method, 50.9 percent (36% in the 6 districts and 61.5% in the 16 districts) were using condoms, 22 percent (21.1% in the 6 districts and 22.6% in the 16 districts) injections while 22 percent (24.8% in the 6 districts and 19.9 in the 16 districts) had undergone a laparoscopy operation (Table 16).

Table 16: Knowledge and Use of Family Planning Methods

Knowledge and Use of Family Planning Methods	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Have Given Birth to Children						
Yes	152	87.4	259	84.9	411	85.8
No	22	12.6	46	15.1	68	14.2
Total	**174**	**100.0**	**305**	**100.0**	**479**	**100.0**
Willing to Have a Child in the Next Two Years						
Yes	12	6.9	34	11.1	46	9.6
No	162	93.1	271	88.9	433	90.4
Total	**174**	**100.0**	**305**	**100.0**	**479**	**100.0**
Ways/Method of Family Planning Ever Heard						
Female sterilization	170	97.7	303	99.3	473	98.7
Male sterilization	170	97.7	300	98.4	470	98.1
Pill	171	98.3	288	94.4	459	95.8
IDU	120	69.0	251	82.3	371	77.5
Injectables	174	100.0	301	98.7	475	99.2
Implants	162	93.1	267	87.5	429	89.6
Condom	172	98.9	303	99.3	475	99.2
Rhythm method	78	44.8	174	57.0	252	52.6
Withdrawal	138	79.3	219	71.8	357	74.5
Others	6	3.4	1	0.3	7	1.5
Total	**174**	*****	**305**	*****	**479**	*****
Currently Using any Method to Delay/Avoid Getting Pregnant						
Yes	161	92.5	226	74.1	387	80.8
No	13	7.5	79	25.9	92	19.2
Total	**174**	**100.0**	**305**	**100.0**	**479**	**100.0**
Family Planning Method Currently Used						
Female sterilization	40	24.8	45	19.9	85	22.0
Male sterilization	1	0.6	5	2.2	6	1.6
Pill	15	9.3	15	6.6	30	7.8
IDU	3	1.9	2	0.9	5	1.3
Injectables	34	21.1	51	22.6	85	22.0
Implants	9	5.6	7	3.1	16	4.1
Condom	58	36.0	139	61.5	197	50.9
Rhythm method	5	3.1	16	7.1	21	5.4
Withdrawal	7	4.3	30	13.3	37	9.6
Others	1	0.6	1	0.4	2	0.5
Total	**161**	*****	**226**	*****	**387**	*****

****Note: The percentages add up to more than 100 because of multiple responses***

3.11 Knowledge of HIV/AIDS

Almost all (99.7%) of the sex workers had heard about HIV/AIDS. Only two respondents from the 6 districts were not aware of HIV/AIDS. The radio was reported as the major source of information about HIV/AIDS by 92 percent of the sex workers. A large proportion of them (87.1%) also stated that their friends/relatives, people from the NGOs (87.1%) and television (78.9%) were their sources of information about HIV/AIDS. Pamphlets and posters of the different organizations were also successful in delivering HIV/AIDS messages. Altogether 68.9 percent of the sex workers reported that they had derived information about HIV/AIDS from such sources.

Pamphlets/posters and bill boards/sign boards were reported as being a major source of information about HIV/AIDS in the 6 districts, although they were not so in the 16 districts. Some 82.5 percent of the FSWs in the 6 districts reported pamphlets/posters and 73.5 percent reported bill boards/sign boards as their source of information about HIV/AIDS. In the 16 districts, 61.8 percent of the FSWs said pamphlets/posters were their source of information about HIV/AIDS while only 47.3 percent found the bill board/sign board to be a source of information.

NGOs operating in the 16 districts were more successful in providing information about HIV/AIDS to the FSWs in comparison to those working in the 6 districts. Altogether 89.3 percent of the FSWs in the 16 districts reported NGOs as a source of information about HIV/AIDS, whereas only 82 percent of the FSWs in the 6 districts thought likewise.

Community events/trainings were reported to be a source of information about HIV/AIDS by 57.0 percent of the FSWs in the western and far western regions (6 districts), but they were considered to be a source of information by only 36.0 percent of the FSWs in the eastern region (16 districts).

Street dramas organized by different organizations were reported to be a source of information about HIV/AIDS by 54.0 percent of the sex workers in the 6 districts, but it was a source of information for only 26.0 percent of the sex workers in the 16 districts.

Table 17: Sources of Knowledge about HIV/AIDS among Female Sex Workers

Awareness about HIV/AIDS	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Ever Heard of HIV/AIDS						
Yes	198	99.0	400	100.0	598	99.7
No	2	1.0	-	-	2	0.3
HIV/ AIDS Information Sources						
Radio	188	94.0	362	90.5	550	92.0
Friends/relatives	172	86.0	349	87.3	521	87.1
People from NGO	164	82.0	357	89.3	521	87.1
Television	142	71.0	330	82.5	472	78.9
Pamphlets/posters	165	82.5	247	61.8	412	68.9
Health workers	131	65.5	265	66.3	396	66.2

Table 17: Con'td…

Awareness about HIV/AIDS	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Work place	71	35.5	265	66.3	336	56.2
Bill board/sign board	147	73.5	189	47.3	336	56.2
Community workers	100	50.0	177	44.3	277	46.3
Community event/training	114	57.0	144	36.0	258	43.1
Newspapers/magazines	67	33.5	162	40.5	229	38.3
Street drama	108	54.0	104	26.0	212	35.5
Cinema hall	54	27.0	110	27.5	164	27.4
School/teachers	48	24.0	78	19.5	126	21.1
Video van	32	16.0	62	15.5	94	15.7
Comic book	44	22.0	40	10.0	84	14.0
Total	**198**	*****	**400**	*****	**598**	*****

Note: The percentages add up to more than 100 because of multiple responses

3.11.1 Knowledge about Ways to Prevent HIV/AIDS

The FSWs were also asked about their knowledge about ways HIV was transmitted and major misconceptions about the disease. The proportion of FSWs reporting being aware of HIV preventive measures - 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 sexual contact) - was 71.5 percent, 73.7 percent and 90 percent respectively. Overall, 39.7 percent of the respondents correctly identified all three A, B and C as HIV preventive measures. Altogether 48.2 percent knew that a healthy looking person could be infected with HIV, while 84.2 percent rejected the notion that sharing a meal with an HIV-infected person would transmit the virus. Also, three-fourths (77.5 %) of the respondents rejected the common local misconception that a mosquito bite transmitted the HIV virus. In total, only 26.7 percent of the respondents had comprehensive knowledge about HIV (that means they were aware of all the five (B, C, D, E & F) major indicators of HIV transmission). No major differences were observed in the knowledge of the major ways of avoiding HIV/AIDS in the 6 vs 16-district samples.

Table 18: Percentage of FSWs Who Have Knowledge of Major Ways of Avoiding HIV/AIDS

Knowledge of Six Major Indicators on HIV/AIDS	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
A. Can protect themselves through abstinence from sexual contact	141	70.5	288	72.0	429	71.5
B. Can protect themselves through monogamous sexual contact	158	79.0	284	71.0	442	73.7
C. Can protect themselves through condom use every time during sex	182	91.0	358	89.5	540	90.0

Table 18: Con'td…

Knowledge of Six Major Indicators on HIV/AIDS	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
D. A healthy-looking person can be infected with HIV	107	53.5	182	45.5	289	48.2
E. A person cannot get the HIV virus from mosquito bite	161	80.5	304	76.0	465	77.5
F. Cannot get HIV by sharing a meal with an HIV-infected person	167	83.5	338	84.5	505	84.2
Knowledge of all three indicators - ABC	74	37.0	164	41.0	238	39.7
Knowledge of all five indicators - BCDEF	54	27	106	26.5	160	26.7

Note: The percentages add up to more than 100 because of multiple responses

The sex workers were also asked if they knew any person who was infected with HIV or who had died of AIDS. More than half of the sex workers (54.8%) replied positively. Of the 329 FSWs in the 22 districts who said yes, 44 had a close relative and 118 had a close friend who suffered or had died from HIV/AIDS (Table 19).

Table 19: FSWs' Knowledge on Ways of HIV/AIDS Transmission

Statements Related to HIV/AIDS	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Know anyone who is infected with HIV or who has died of AIDS (n=200/400/600)	111	55.5	218	54.5	329	54.8
Have a Close Relative or Close Friend Infected with HIV or has Died of AIDS						
Close relative	24	21.6	20	9.2	44	13.4
Close friend	33	29.7	85	39.0	118	35.9
No relation	54	48.6	113	51.8	167	50.8
Total	**111**	**100.0**	**218**	**100.0**	**329**	**100.0**
Awareness about HIV/AIDS (n=200/400/600)						
Blood transfusion from an infected person to the other transmit HIV	196	98.0	399	99.8	595	99.2
A person can get HIV by using previously used needle/syringe	194	97.0	386	96.5	580	96.7

Table 19: Con'td…

Statements Related to HIV/AIDS	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
A pregnant woman infected with HIV/AIDS can transmit the virus to her unborn child	167	83.5	338	84.5	505	84.2
A person cannot get HIV by holding an HIV-infected person's hand	184	92.0	353	88.3	537	89.5
A woman with HIV/AIDS can transmit the virus to her new-born child through breastfeeding	153	76.5	309	77.3	462	77.0
Ways by Which a Pregnant Woman can Reduce the Risk of Transmission of HIV to her Unborn Child						
Cannot do anything/cannot protect the child	26	15.6	51	15.1	77	15.2
Take medication	81	48.5	132	39.1	213	42.2
Abort the child	4	2.4	30	8.9	34	6.7
Others	2	1.2	8	2.4	10	2.0
Don't know	54	32.3	117	34.6	171	33.9
Total	**167**	**100.0**	**338**	**100.0**	**505**	**100.0**

Understanding of HIV and its different modes of transmission among the FSWs was also tested with the help of certain snooping questions. A large proportion of the respondents reported that HIV could be transmitted through blood transfusion from an infected person to another (99.2%), that a person could be infected with HIV by using previously used needles/syringes (96.7%), and that HIV cannot be transmitted by holding the hands of a HIV-positive person (89.5%). Additionally, 84.2 percent stated that an infected mother could transmit the virus to her unborn child and 77 percent mentioned that a woman with HIV/AIDS could transmit the virus to her new-born child through breastfeeding (Table 19).

Of the 505 respondents who had reported that the HIV virus could be transmitted from an infected mother to her unborn child, 42.2 percent said that taking medicine would be helpful and almost 40 percent expressed their unawareness of any measure to minimize such a risk (Table 19).

3.12 Perception of HIV Test

When the FSWs were questioned on the availability of a HIV test facility, 75.3 percent reported that it was possible for them to have a confidential HIV test in their community. Around 70 percent of the sex workers had undertaken the test at least once, majority (93.3%) of them had taken the test of their own free will, and the rest were either sent or advised for it. Almost 96 percent had received the test results while the others had not collected them because they forgot about it, felt it was not

necessary, were afraid to obtain the result, and were sure of not having being infected (Table 20). Majority of the sex workers (86.3%) had undertaken the test within the last 12 months preceding the survey while 19.2 percent had undergone the test 1-2 years before.

Table 20: Perception of HIV Test

Perception of HIV Test	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Confidential HIV Test Facility Available in the Community						
Yes	143	71.5	309	77.3	452	75.3
No*	34	17.0	63	15.8	97	16.2
Don't know	21	10.5	28	7.0	49	8.2
Never heard about HIV	2	1.0	-	-	2	0.3
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Ever Had an HIV Test						
Yes	141	70.5	276	69.0	417	69.5
No	57	28.5	124	31.0	181	30.2
Never heard about HIV	2		-	-	2	0.3
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Voluntarily Underwent the HIV Test or because it was Required						
Voluntarily	130	92.2	258	93.5	388	93.0
Required	11	7.8	18	6.5	29	7.0
Total	**141**	**100.0**	**276**	**100.0**	**417**	**100.0**
Received HIV Test Result						
Yes	136	96.5	264	95.7	400	95.9
No	5	3.5	12	4.3	17	4.1
Total	**141**	**100.0**	**276**	**100.0**	**417**	**100.0**
Reason For not Receiving Test Result						
Forgot about it	2	40.0	3	25.0	5	29.4
Felt unnecessary	-		3	25.0	3	17.6
Afraid of result	-		4	33.3	4	23.5
Sure of not being infected	1	20.0	-	-	1	5.9
Others	2	40.0	2	16.7	4	23.5
Total	**5**	**100.0**	**12**	**100.0**	**17**	**100.0**
Most Recent HIV Test						
Within Last 12 months	126	89.4	234	84.8	360	86.3
Between 1-2 years	11	7.8	27	9.8	38	9.1
Between 2-4 years	1	0.7	12	4.3	13	3.1
More than 4 years ago	3	2.1	3	1.1	6	1.4
Total	**141**	**100.0**	**276**	**100.0**	**417**	**100.0**

3.13 Access to FHI/Nepal Messages

Since the beginning of FHI intervention programs in Nepal to bring awareness about HIV/AIDS among the high-risk groups of people, various messages regarding the use of condoms for the prevention of HIV/AIDS and STIs were aired through radio and television. Elevated hoarding boards and posters were also put up with pictorial and rhetorical messages at different places, including health posts, highways and roadsides. In order to review the impact of such interventions, the sex workers were asked about their awareness of such information. Table 21 below illustrates the FHI messages and the responses provided by the sex workers regarding their awareness of the messages. More than 70 percent of the sex workers in the 6 districts were found to be aware of messages like *"Condom Bata Surakchhya, Youn Swasthya Ko Rakchhya AIDS Ra Younrog Bata Bachna Sadhai Condom Ko Prayog Garau", "Youn Rog Ra AIDS Bata Bachnalai Rakhnu Parchha Sarbatra Paine Condom Lai"*. Similarly more than 70 percent of the sex workers in the 16 districts were found to be aware of messages like *"Condom Bata Surakchhya, Youn Swasthya Ko Rakchhya AIDS Ra Younrog Bata Bachna Sadhai Condom Ko Prayog Garau", "Youn Rog Ra AIDS Bata Bachnalai Rakhnu Parchha Sarbatra Paine Condom Lai" and "Ramro Sanga Prayog Gare Jokhim Huna Dinna Bharpardo Chhu Santosh Dinchhu Jhanjhat Manna Hunna"*, and *"Jhilke Dai Chha Chhaina Condom"*. A large proportion of the respondents were also aware of messages like *"Condom Kina Ma Bhaya Hunna Ra"* and *"HIV/AIDS Bare Aajai Dekhee Kura Garau"* (Table 21).

"Des Pardes" was more popular among the FSWs from the western and far western regions (6 districts) compared to the 16 districts in the east (Table 21).

Table 21: Seen/Heard FHI Character/Message in the Past Year by Female Sex Workers

Heard/Seen/Read the Following Messages/Characters in Past One Year	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Condom Bata Surakchhya, Youn Swasthya Ko Rakchhya AIDS Ra Younrog Bata Bachna Sadhai Condom Ko Prayog Garau	153	76.5	324	81.0	477	79.5
Youn Rog Ra AIDS Bata Bachnalai Rakhnu Parchha Sarbatra Paine Condom Lai	151	75.5	299	74.8	450	75.0
Ramro Sanga Prayog Gare Jokhim Huna Dinna Bharpardo Chhu Santosh Dinchhu Jhanjhat Manna Hunna	140	70.0	286	71.5	426	71.0
Jhilke Dai Chha Chhaina Condom	129	64.5	295	73.8	424	70.7
Condom Kina Ma Bhaya Hunna Ra	129	64.5	283	70.8	412	68.7
HIV/AIDS Bare Aajai Dekhee Kura Garau	130	65.0	250	62.5	380	63.3
Ek Apas Ka Kura	99	49.5	169	42.3	268	44.7
Maya Garaun Sadbhav Badaun	103	51.5	165	41.3	268	44.7
Des Pardes	115	57.5	131	32.8	246	41.0

Note: The percentages add up to more than 100 because of multiple responses

When the sex workers were further asked what information they derived from the FHI/Nepal messages, majority (96.2%) of them reported that condom use prevented the transmission of HIV and AIDS. Around 86 percent also said that they were aware that condom use helped in the prevention of STIs while 83.7 percent came to realize that the condom was a family planning device (Table 22).

Table 22: Message Understood by Female Sex Workers

Information Derived From the Message	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Condoms should be used to avoid HIV/AIDS	188	94.0	389	97.3	577	96.2
Condoms should be used to avoid STI	144	72.0	370	92.5	514	85.7
Condoms should be used for family planning, other family planning messages	164	82.0	338	84.5	502	83.7
Should use quality condom	-	-	1	0.3	1	0.2
HIV is a dangerous disease	-	-	1	0.3	1	0.2

Note: The percentages add up to more than 100 because of multiple responses

3.14 Knowledge and Treatment of Sexually Transmitted Infections (STIs)

Sex workers are at high risk of sexually transmitted infections due to the nature of their work. To know the extent of the problem of STIs among the respondents and their perception about them, they were asked about their understanding of STIs and if they had experienced any STI symptom during the past year. More than 50 percent of the respondents in the 6 districts knew about some STI symptoms like genital discharges (84.5%), sores or ulcers around the vagina (61%) and itching in the vagina (53.0%) (Table 23). On the other hand, more than 50 percent of the sex workers in the 16 districts understood genital discharges (90.5%), itching in the vagina (81.8 %), lower abdominal pain (66.3%) and sores around the vagina (59%) as being some of the symptoms of STI (Table 23). Respondents in the 16 districts were more aware about the symptoms of STI than the respondents in the 6 districts.

Table 23: Reported STI and Treatment in the Past Year

Perception of STI, Reported STI Symptoms and Treatment Among the Sex Workers	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
FSWs' Understanding of STI						
White discharge/discharge of pus/Dhatu flow	169	84.5	362	90.5	531	88.5
Itching in vagina	106	53.0	327	81.8	433	72.2
Lower abdominal pain	97	48.5	265	66.3	362	60.3
Ulcer or sore around vagina	122	61.0	236	59.0	358	59.7
Painful urination	40	20.0	144	36.0	184	30.7
Syphilis (Bhiringi)/gonorrhea	59	29.5	96	24.0	155	25.8
Burning during urination	38	19.0	114	28.5	152	25.3
Swelling of vagina	37	18.5	89	22.3	126	21.0
HIV/AIDS	64	32.0	51	12.8	115	19.2
Pain in vagina	27	13.5	86	21.5	113	18.8
Weight loss/ getting thin	14	7.0	41	10.3	55	9.2
Fever	21	10.5	33	8.3	54	9.0
Unusual bleeding from vagina	12	6.0	37	9.3	49	8.2
Bad odor from vagina	4	2.0	1	0.3	5	0.8
Small moles around vagina	3	1.5	1	0.3	4	0.7
Others (weakness, become sterile, etc.)	2	1.0	2	0.5	4	0.7
Don't know	12	6.0	6	1.5	18	3.0
Total	**200**	*****	**400**	*****	**600**	*****
Types of STI Symptoms Experienced in the Past Year						
Unusual heavy, foul smelling vaginal discharge	65	32.5	193	48.3	258	43.0
Pain in the lower abdomen	49	24.5	189	47.3	238	39.7
Itching in or around the vagina	39	19.5	142	35.5	181	30.2
Vaginal odor or smell	33	16.5	142	35.5	175	29.2
Pain during urination	31	15.5	126	31.5	157	26.2
Pain during sex	30	15.0	105	26.3	135	22.5
Frequent urination	18	9.0	75	18.8	93	15.5
Ulcer or sore in the genital area	20	10.0	63	15.8	83	13.8
Genital warts	16	8.0	31	7.8	47	7.8
Vaginal bleeding (unusual)	2	1.0	26	6.5	28	4.7
Others	1	0.5	-	-	1	0.2
Any of the above symptoms	107	53.5	267	66.8	374	62.3
None of the above symptoms	93	46.5	133	33.3	226	37.7
Total	**200**	*****	**400**	*****	**600**	*****

Table 23: Con'td…

Perception of STI, Reported STI Symptoms and Treatment Among the Sex Workers	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Places Visited for Treatment of STI Symptoms in the Past Year						
GWP	2	3.8	52	28.4	54	23.0
Private clinic	9	17.3	27	14.8	36	15.3
WATCH clinic	9	17.3	21	11.5	30	12.8
Hospital	8	15.4	17	9.3	25	10.6
Sahabhagi	-	-	21	11.5	21	8.9
NSARC	20	38.5	-	-	20	8.5
Indreni Sewa Samaj	-	-	15	8.2	15	6.4
SIDC	-	-	15	8.2	15	6.4
FPAN clinic	8	15.4	2	1.1	10	4.3
AMDA clinic	-	-	9	4.9	9	3.8
RDF	-	-	8	4.4	8	3.4
Sahara Nepal	-	-	8	4.4	8	3.4
Health post/ health center	1	1.9	4	2.2	5	2.1
Pharmacy	2	3.8	2	1.1	4	1.7
SACTS	-	-	1	0.5	1	0.4
Others	4	7.7	2	1.1	6	2.6
Total	**52**	*****	**183**	*****	**235**	*****
Perception of STI, Reported STI Symptoms and Treatment among the Sex Workers						
Received Counseling to Avoid the Problem from the Place of Treatment						
Yes	47	90.4	180	98.4	227	96.6
No	5	9.6	3	1.6	8	3.4
Total	**52**	*****	**183**	*****	**235**	*****
Types of Counseling Received						
Take medicine regularly	41	87.2	151	83.9	192	84.6
Use condom	22	46.8	123	68.3	145	63.9
Regular Check-up	24	51.1	110	61.1	134	59.0
Reduce number of sexual partners	11	23.4	108	60.0	119	52.4
Not to make sexual contact while using medicine	15	31.9	82	45.6	97	42.7
Others	2	4.3	2	1.1	4	1.8
Total	**47**	*****	**180**	*****	**227**	*****

Note: The percentages add up to more than 100 because of multiple responses

When the respondents were asked about the STI symptoms they have had in the past year, 62.3 percent of them reported having experienced at least one symptom mentioned in Table 23. Other STI symptoms reported by the respondents in the past year were vaginal discharge (43.0%), lower abdominal pain (39.7%), vaginal itching (30.2%) and vaginal odor (29.2%) (Table 23). For treatment purposes, the respondents in the 16 districts had mostly visited the GWP clinic (28.4%) while in the 6 districts, 38.5 percent had visited the NSARC clinic (Table 23).

As shown in Table 23, majority of the sex workers (96.6% or 227/235) who had sought treatment had received counseling. In the 6 districts, sex workers were counseled to take medicines regularly (87.2%), undergo regular check-ups (51.1%) and use condoms during sex (46.8%). In the 16 districts, they were counseled to take medicines regularly (83.9%), get regular check-ups (68.3%), use condoms during sex (61.1%) and reduce the number of sexual partners (60.0%).

Apart from their experiences in the past year, the sex workers were further asked if they were currently experiencing any STI symptoms. Some of the symptoms that the respondents in the 6 districts were currently experiencing were vaginal discharge (22%), lower abdominal pain (16.5%) and pain during sex (13%). Respondents in the 16 districts had symptoms like lower abdominal pain (36%), vaginal discharge (35.8%), vaginal odor (26%) and pain during urination (23.8%) (Table 24).

Table 24: Reported STI Symptom/s at the Time of Survey and their Treatment

Perception of STI, Reported STI Symptoms and Treatment among Sex Workers	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Types of STI Symptoms Experienced Currently						
Unusual heavy, foul smelling vaginal discharge	44	22.0	143	35.8	187	31.2
Pain in the lower abdomen	33	16.5	144	36.0	177	29.5
Vaginal odor or smell	23	11.5	104	26.0	127	21.2
Pain during urination.	24	12.0	95	23.8	119	19.8
Pain during sex	26	13.0	88	22.0	114	19.0
Itching in or around the vagina	23	11.5	91	22.8	114	19.0
Frequent urination	19	9.5	63	15.8	82	13.7
Ulcer or sore in the genital area	4	2.0	35	8.8	39	6.5
Genital warts	7	3.5	20	5.0	27	4.5
Vaginal bleeding (unusual).	6	3.0	12	3.0	18	3.0
Others	1	0.5	-	-	1	0.2
Total	**200**	*****	**400**	*****	**600**	*****
Went for Treatment for any of above Symptoms						
Yes	11	13.9	83	36.4	94	30.6
No	68	86.1	145	63.6	213	69.4
Total	**79**	**100.0**	**228**	**100.0**	**307**	**100.0**

Table 24: Con'td…

Perception of STI, Reported STI Symptoms and Treatment among Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Place Visited for Treatment						
Private clinic	2	18.2	15	18.1	17	18.1
GWP	-	-	14	16.9	14	14.9
AMDA clinic	-	-	11	13.3	11	11.7
Sahabhagi	-	-	11	13.3	11	11.7
Hospital	-	-	8	9.6	8	8.5
WATCH	2	18.2	6	7.2	8	8.5
Indreni Sewa Samaj	-	-	7	8.4	7	7.4
SIDC	-	-	7	8.4	7	7.4
Health Post/Health Center	1	9.1	3	3.6	4	4.3
FPAN clinic	2	18.2	1	1.2	3	3.2
Pharmacy	1	9.1	2	2.4	3	3.2
NSARC	3	27.3	-	-	3	3.2
RDF	-	-	3	3.6	3	3.2
MRMG	-	-	2	2.4	2	2.1
SACTS	-	-	1	1.2	1	1.1
Self treatment	-	-	1	1.2	1	1.1
Sahara Nepal	-	-	1	1.2	1	1.1
MAPS	-	-	1	1.2	1	1.1
Total	**11**	*	**83**	*	**94**	*

Note: The percentages add up to more than 100 because of multiple responses s

3.15 Use of Alcohol and Drugs

A series of questions were asked to the sex workers regarding the use of alcohol and oral and injecting drugs. Almost three-fourths of the sex workers had consumed alcohol sometime during the past one month. Among them, 22.5 percent of the sex workers admitted taking alcohol on a daily basis. Others drank less frequently (Table 25). Close to a tenth of the respondents (9.8%) had tried some type of drug at least once.

Table 25: Use of Alcohol and Drugs among Female Sex Workers

Consumption of Alcohol and Drugs	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Consumption of Alcohol During Past One Month						
Everyday	26	13.0	109	27.3	135	22.5
2-3 times a week	56	28.0	137	34.3	193	32.2
At least once a week	13	6.5	28	7.0	41	6.8
Less than once in a week	28	14.0	48	12.0	76	12.7
Never	77	38.5	78	19.5	155	25.8
Tried Any Types of Drugs						
Yes	8	4.0	51	12.8	59	9.8
No	192	96.0	348	87.0	540	90.0

Of the 600 respondents, 187 (31.2%) reported that they knew someone who injected drugs. The IDUs were their friends, local acquaintances, relatives, clients and/or their spouses. Eighteen sex workers also admitted having sex in exchange for drugs while 12 had engaged in sexual contact for money to buy drugs at least once.

Table 26: Knowledge of IDUs and History of Injecting Drugs among Female Sex Workers

Use of Injecting Drugs	**6 Districts**		**16 Districts**		**Total 22 (Districts)**	
	N = 200	**%**	**N = 400**	**%**	**N = 600**	**%**
Know Injecting Drug Users (IDUs)						
Yes	59	29.5	128	32.0	187	31.2
No	141	70.5	272	68.0	413	68.8
Relationship with Known IDUs						
Neighbor/male from village/someone not related to	40	20.0	92	23.0	132	22.0
Friend	6	3.0	36	9.0	42	7.0
Client	9	4.5	12	3.0	21	3.5
Relative	6	3.0	6	1.5	12	2.0
Family	1	0.5	2	0.5	3	0.5
Co-workers	-	-	1	0.3	1	0.2
Injecting History of Sex Workers						
Ever exchanged sex for drugs	7	3.5	11	2.8	18	3.0
Ever exchanged sex for money to buy drugs	4	2.0	8	2.0	12	2.0

3.16 Exposure to HIV/AIDS Awareness Programs

3.16.1 Peer/Outreach Education

When the sex workers were asked if they had met any OEs (Outreach Educator) or PEs (Peer Educator) in the last 12 months, 87.2 percent reported having met or interacted with them at least once. Their interaction focused on HIV/AIDS transmission methods (90.6%), use of the condom (79.9%), STI transmission (59.1%) and demonstration of the correct use of the condom (51.6%). The respondents from the 6 districts had mostly met the OEs/PEs from Thagil (44.2%) and ICH (34.9%) while those from the 16 districts had interacted with the OEs/PEs mostly from GWP (24.2%) and SIDC (20.2%). It is evident from Table 27 that the sex workers meet the OEs/PEs quite often. Some 62.2 percent of the 523 sex workers had seen them 4-12 or more times in the last 12 months.

Table 27: Meeting/Interaction of FSWs with Peer Educator/Outreach Educator

Peer Educator/Outreach Educator Visit to Female Sex Workers	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Met or Discussed or Interacted with PEs or OEs in the Last 12 Months						
Yes	172	86.0	351	87.8	523	87.2
No	28	14.0	49	12.3	77	12.8
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Activities Involved with PEs or OEs						
Discussion on how HIV/AIDS is/isn't transmitted	160	93.0	314	89.5	474	90.6
Regular/non-regular use of condom	141	82.0	277	78.9	418	79.9
Discussion on how STI is/isn't transmitted	75	43.6	234	66.7	309	59.1
Demonstration on using condom correctly	73	42.4	197	56.1	270	51.6
STI treatment/cure after treatment	20	11.6	123	35.0	143	27.3
Counseling on reducing number of sex partner	12	7.0	90	25.6	102	19.5
Training on HIV and STI, Condom Day, AIDS Day, participation in discussions and interaction programs	32	18.6	40	11.4	72	13.8
Health check-up	1	0.6	-	-	1	0.2
Total	**172**	*****	**351**	*****	**523**	*****
Organizations Represented by PEs or OEs						
GWP	24	14.0	85	24.2	109	20.8
Thagil	76	44.2	-		76	14.5
SIDC	-	-	71	20.2	71	13.6
WATCH	14	8.1	49	14.0	63	12.0
ICH	60	34.9	-	-	60	11.5
Indreni Sewa Samaj	-	-	49	14.0	49	9.4
Sahara Nepal	-	-	35	10.0	35	6.7
NSARC	32	18.6	-	-	32	6.1
RDF	-	-	30	8.5	30	5.7
Sahabhagi	-	-	26	7.4	26	5.0
AMDA	-	-	9	2.6	9	1.7
NRCS	6	3.5	2	0.6	8	1.5
Nepal Family Planning Association	2	1.2	3	0.9	5	1.0
Asha Kiran	4	2.3	-	-	4	0.8
CRS	2	1.2	1	0.3	3	0.6
PSI	-	-	2	0.6	2	0.4
Sathi Sanstha	1	0.6	1	0.3	2	0.4
Trinetra	-	-	1	0.3	1	0.2
SACTS	-	-	1	0.3	1	0.2
Diyalo	-	-	1	0.3	1	0.2
Geruwa	1	0.6	-	-	1	0.2
LDC	1	0.6	-	-	1	0.2
Astha Plus	-	-	1		1	0.2
MRMG	-	-	1	0.3	1	0.2
Don't know	2	1.2	5	1.4	7	1.3
Total	**172**	*****	**351**	*****	**523**	*****

Table 27: Con'td…

Peer Educator/Outreach Educator Visit to Female Sex Workers	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Number of Visits/Meetings in the Last 12 months						
Once	7	4.1	37	10.5	44	8.4
2-3 times	55	32.0	99	28.2	154	29.4
4-6 times	43	25.0	87	24.8	130	24.9
7-12 times	22	12.8	77	21.9	99	18.9
More than 12 times	45	26.2	51	14.5	96	18.4
Total	**172**	**100.0**	**351**	**100.0**	**523**	**100.0**

Note: The percentages add up to more than 100 because of multiple responses

3.16.2 Drop-in Centers

Drop-in centers (DIC) are an important component of HIV prevention programs. The DICs not only provide a safe place for the target communities to socialise in but also offer educational and counseling activities. About half (50.5%) of the respondents had visited a DIC during the last year. During their visits to a DIC, the respondents had participated in discussions on HIV/AIDS transmission (66.7%), learnt the correct way of using a condom (62.7%) and collected condoms (53.1%) as well. It was also reported that only 25.3 percent of the FSWs in the 6 districts participated in the discussion on STI transmission methods in comparison to 61.8 percent in the 16 districts. In the 16 districts, the respondents had mostly visited the DICs run by SIDC (25%). In the 6 districts, the DICs were run by Thagil (44.4%) and ICH (40.4%). Almost 85 percent of the respondents had visited the different DICs twice or more times in the past year (Table 28).

Table 28: DIC Visiting Practices of Female Sex Workers

DIC Visiting Practices of Female Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
DIC Visit in the Last 12 Months						
Yes	99	49.5	204	51.0	303	50.5
No	101	50.5	196	49.0	297	49.5
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Activities Involved at DIC						
Participated in discussion on HIV transmission	65	65.7	137	67.2	202	66.7
Went to learn the correct way of using condom.	55	55.6	135	66.2	190	62.7
Went to collect condoms	65	65.7	96	47.1	161	53.1
Participated in discussion on STI transmission.	25	25.3	126	61.8	151	49.8
Went to watch film on HIV/AIDS	50	50.5	98	48.0	148	48.8
Participated in training, interaction and discussion programs on HIV/AIDS and STI	34	34.3	35	17.2	69	22.8
Took a friend with me	18	18.2	21	10.3	39	12.9
Went for STI treatment	1	1.0	19	9.3	20	6.6
Went to collect IEC materials	10	10.1	3	1.5	13	4.3
Total	**99**	*****	**204**	*****	**303**	*****

Table 28: Con'td…

DIC Visiting Practices of Female Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Name of Organizations Running DICs Visited by FSWs						
SIDC	-	-	51	25.0	51	16.8
GWP	11	11.1	33	16.2	44	14.5
Thagil	44	44.4	-		44	14.5
ICH	40	40.4	-		40	13.2
Indreni Sewa Samaj	-	-	38	18.6	38	12.5
RDF	-	-	25	12.3	25	8.3
Sahara Nepal	-	-	25	12.3	25	8.3
WATCH	6	6.1	14	6.9	20	6.6
Sahabhagi	-		16	7.8	16	5.3
NSARC	12	12.1	-		12	4.0
AMDA	-	-	6	2.9	6	2.0
Nepal Family Planning Association	3	3.0	-	-	3	1.0
NRCS	2	2.0	-	-	2	0.7
CRS	1	1.0	1	0.5	2	0.7
Others	-		7	3.4	7	2.3
Total	**99**	*****	**204**	*****	**303**	*****
Number of Visits to a DIC in the Last 12 Months						
Once	6	6.1	40	19.6	46	15.2
2-3 times	34	34.3	91	44.6	125	41.3
4-6 times	21	21.2	41	20.1	62	20.5
7-12 times	14	14.1	28	13.7	42	13.9
More than 12 times	24	24.2	4	2.0	28	9.2
Total	**99**	**100.0**	**204**	**100.0**	**303**	**100.0**

Note: The percentages add up to more than 100 because of multiple responses

3.16.3 STI Clinic

Detection and treatment of STIs in the early stages could prevent many health hazards and HIV infection as well. Several STI clinics are being run today by different organizations, including FHI, to facilitate such treatment. The sex workers were asked if they had visited any STI clinic in the past one year. Altogether 45.3 percent of them reported having visited a STI clinic in the past one year. The respondents included 39 percent from the 6 districts and 48.5 percent from the 16 districts. During their visits to a STI clinic in the past one year, the respondents in the 6 districts had undergone blood tests for STI detection (74.4%), been examined physically for STI identification (64.1%), been advised to use a condom during each sexual intercourse (35.9%) and to take all the prescribed medicines (26.9%) regularly. Whereas in the 16 districts, 80.4% of the respondents underwent a blood test for STI detection, 77.3% had a physical examination for STI identification, 61.3% were advised to use a condom during each sexual intercourse and 50.5% were counseled to take all the prescribed medicines regularly (50.5%).

Exactly 50 percent of the respondents from the 6 districts had visited a STI clinic run by NSARC and 54 percent from the 16 districts had been to a STI clinic run by GWP. Overall, 37.1 percent of the respondents had visited such a clinic once in the last 12 months (Table 29).

Table 29: STI Clinic Visiting Practices of Female Sex Workers

STI Clinic Visiting Practices of Female Sex Workers	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Visited any STI Clinic in the Last 12 months						
Yes	78	39.0	194	48.5	272	45.3
No	122	61.0	206	51.5	328	54.7
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Activities Involved in STI Clinic						
Blood tested for STI	58	74.4	156	80.4	214	78.7
Physical examination conducted for STI identification	50	64.1	150	77.3	200	73.5
Was advised to use condom in each sexual intercourse	28	35.9	119	61.3	147	54.0
Was advised to take complete and regular medicine	21	26.9	98	50.5	119	43.8
Was suggested to reduce number of sexual partners	4	5.1	42	21.6	46	16.9
Took a friend with me	6	7.7	14	7.2	20	7.4
Urine tested	-	-	2	1.0	2	0.7
Brought a sex partner for a check-up	1	1.3	-	-	1	0.4
Total	**78**	*****	**194**	*****	**272**	*****
Name of Organization that Runs STI Clinic Visited						
GWP	5	6.4	54	27.8	59	21.7
N-SARC	39	50.0	-	-	39	14.3
WATCH	10	12.8	26	13.4	36	13.2
Private clinic	8	10.3	16	8.2	24	8.8
Sahabhagi	-	-	22	11.3	22	8.1
SIDC	-	-	19	9.8	19	7.0
Indreni Sewa Samaj	-	-	17	8.8	17	6.3
Hospital	5	6.4	10	5.2	15	5.5
Nepal Family Planning Association	14	17.9	1	0.5	15	5.5
Sahara Nepal	-	-	14	7.2	14	5.1
RDF	-	-	12	6.2	12	4.4
AMDA	-	-	7	3.6	7	2.6
Others	5	6.4	9	4.6	14	5.1
Don't know	-	-	2	1.0	2	0.7
Total	**78**	*****	**194**	*****	**272**	*****

Table 29: Cont'd…

STI Clinic Visiting Practices of Female Sex Workers	2009					
	6 Districts		16 Districts		Total 22 (Districts)	
Number of Visits to a STI Clinic in the Last 12 months						
Once	36	46.2	65	33.5	101	37.1
2-3 times	31	39.7	95	49.0	126	46.3
4-6 times	9	11.5	21	10.8	30	11.0
7-12 times	2	2.6	13	6.7	15	5.5
Total	**78**	**100.0**	**194**	**100.0**	**272**	**100.0**

Note: The percentages add up to more than 100 because of multiple responses

3.16.4 VCT Centers

Among the sample population, approximately 65.2 percent had visited a Voluntary Counseling and Testing (VCT) center during the past year. Those visiting such a center included 67.3 percent of the respondents from the 16 districts and 61 percent from the 6 districts. Among them, 89.8 percent had undergone HIV testing, 67.8 percent had received post HIV/AIDS test counseling, 67.5 percent had received HIV test results and 67.3 had received pre HIV/AIDS test counseling.

In the 6 districts, 59.8 percent of the respondents had visited the VCT centers run by NSARC while in the 16 districts, the respondents had mostly visited the centers operated by GWP (27.9%). Altogether 21.2 percent of the sex workers had visited such a VCT center once in the last 12 months.

Table 30: VCT Visiting Practices of Female Sex Workers

VCT Visiting Practices of Female Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Visited VCT Center in the Last 12 months						
Yes	122	61.0	269	67.3	391	65.2
No	78	39.0	131	32.8	209	34.8
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Activities Involved at VCT Center						
Blood sample taken for HIV/AIDS test	117	95.9	234	87.0	351	89.8
Received post HIV/AIDS test counseling	78	63.9	187	69.5	265	67.8
Received HIV/AIDS test result	101	82.8	163	60.6	264	67.5
Received pre-HIV/AIDS test counseling	89	73.0	174	64.7	263	67.3
Received counseling on using condom correctly in each sexual intercourse	33	27.0	134	49.8	167	42.7
Got information on HIV/AIDS window period	18	14.8	95	35.3	113	28.9
Took a friend with me	8	6.6	24	8.9	32	8.2
Went there to remove stuck condom	-		1	0.4	1	0.3
Total	**122**	*****	**269**	*****	**391**	*****

Table 30: Con'td…

VCT Visiting Practices of Female Sex Workers	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Name of the Organization Running the VCT Visited						
GWP	6	4.9	75	27.9	81	20.7
NSARC	73	59.8	-	-	73	18.7
WATCH	13	10.7	43	16.0	56	14.3
SIDC	-	-	49	18.2	49	12.5
Indreni Sewa Samaj	-	-	32	11.9	32	8.2
Sahara Nepal	-	-	23	8.6	23	5.9
Nepal Family Planning Association	21	17.2	1	0.4	22	5.6
RDF	-	-	22	8.2	22	5.6
Sahabhagi	-	-	21	7.8	21	5.4
AMDA	-	-	11	4.1	11	2.8
NNSWA	8	6.6	-	-	8	2.0
Nepal Red cross society	1	0.8	3	1.1	4	1.0
Dang Plus	4	3.3	-	-	4	1.0
Geruwa Rural Jagaran Association	4	3.3	-	-	4	1.0
Others	2	1.6	6	2.2	8	2.0
Don't know	-	-	1	0.4	1	0.3
Total	**122**	*****	**269**	*****	**391**	*****
Number of Visits to a VCT in the Last 12 Months						
Once	36	29.5	47	17.5	83	21.2
2-3 times	63	51.6	123	45.7	186	47.6
4-6 times	16	13.1	60	22.3	76	19.4
7-12 times	7	5.7	33	12.3	40	10.2
More than 12 times	-		6	2.2	6	1.5
Total	**122**	**100.0**	**269**	**100.0**	**391**	**100.0**

Note: The percentages add up to more than 100 because of multiple responses.

3.16.5 Participation in HIV/AIDS Awareness Program

It was reported that participation of the sex workers in the different HIV/AIDS awareness raising programs was minimal, with only 33.7 percent of them participating in them in the past 12 months. There were more respondents from the 6 districts (51.5%) than from the 16 districts (24.8%) in such programs. The respondents had participated in group discussions (57.9%), HIV/AIDS-related training (51.5%) and in Condom Day celebrations (43.1%). Thagil (38.8%) had conducted most of these activities in the 6 districts while in the 16 districts, it was GWP (33.3%) that took the initiative. The sex workers also named other organizations (Table 31). Among them, 41.6 percent had participated in such programs 2-3 times while 23.3 percent had participated just once in the last 12 months.

Table 31: Participation of Female Sex Workers in STI/HIV/AIDS Awareness Program

Participations of FSWs in HIV/AIDS Awareness Programs	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Ever Participated in HIV/AIDS Awareness Raising Program or Community Events in the Last 12 Months						
Yes	103	51.5	99	24.8	202	33.7
No	97	48.5	301	75.3	398	66.3
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Activities Participated in						
Group discussions	55	53.4	62	62.6	117	57.9
HIV/AIDS-related training	61	59.2	43	43.4	104	51.5
Condom Day	43	41.7	44	44.4	87	43.1
AIDS Day	37	35.9	40	40.4	77	38.1
Condom use demonstrations	21	20.4	32	32.3	53	26.2
HIV/AIDS-related Workshops	8	7.8	33	33.3	41	20.3
Street drama	13	12.6	25	25.3	38	18.8
Video shows	6	5.8	19	19.2	25	12.4
Talk programs	1	1.0	4	4.0	5	2.5
Total	**103**	*****	**99**	*****	**202**	*****
Name of the Organization Organizing Such Activities						
GWP	13	12.6	34	34.3	47	23.3
Thagil	40	38.8	-		40	19.8
ICH	35	34.0	-		35	17.3
WATCH	10	9.7	12	12.1	22	10.9
Indreni Sewa Samaj	-		15	15.2	15	7.4
Sahabhagi	-		14	14.1	14	6.9
NSARC	12	11.7	-		12	5.9
Nepal Family Planning Association	9	8.7	3	3.0	12	5.9
RDF	-		10	10.1	10	5.0
AMDA	-		6	6.1	6	3.0
NRCS	2	1.9	1	1.0	3	1.5
Maiti Nepal	1	1.0	2	2.0	3	1.5
Female Empowerment	-		3	3.0	3	1.5
Sahara Nepal	-		3	3.0	3	1.5
SIDC	-		3	3.0	3	1.5
Others	8	7.8	10	10.1	18	8.9
Don't know	2	1.9	2	2.0	4	2.0
Total	**103**	*****	**99**	*****	**202**	*****

Table 31: Con'td…

Participations of FSWs in HIV/AIDS Awareness Programs	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Frequency of Such Participation in the Last 12 months						
Once	23	22.3	24	24.2	47	23.3
2-3 times	48	46.6	36	36.4	84	41.6
4-6 times	22	21.4	18	18.2	40	19.8
7-12 times	3	2.9	7	7.1	10	5.0
More than 12 times	1	1.0	2	2.0	3	1.5
Not participated in the last one year	6	5.8	12	12.1	18	8.9
Total	**103**	**100.0**	**99**	**100.0**	**202**	**100.0**

Note: The percentages add up to more than 100 because of multiple responses

3.17 Stigma and Discrimination

A series of questions related to attitude towards HIV positive people and their perception towards HIV/AIDS were asked to the FSWs in the survey. More than 85 percent of the sex workers were willing to take care of any of their male or female relatives with HIV if the need arose. Almost 50 percent mentioned that if they had a HIV positive member in the family, they would not mind talking about it to others.

Table 32: Attitude of FSWs towards HIV Positive People

Stigma and Discrimination	6 Districts		16 Districts		Total 22 (Districts)	
	N = 200	%	N = 400	%	N = 600	%
Willing to Take Care of HIV Positive Male Relative in the Household						
Yes	183	91.5	332	83.0	515	85.8
No	13	6.5	53	13.3	66	11.0
Don't know	4	2.0	15	3.8	19	3.2
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Willing to Take Care of HIV Positive Female Relative in the Household						
Yes	185	92.5	341	85.3	526	87.7
No	11	5.5	44	11.0	55	9.2
Don't know	4	2.0	15	3.8	19	3.2
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**
Willing to Maintain Confidentiality of a HIV Positive Family Member						
Yes	87	43.5	199	49.8	286	47.7
No	112	56.0	185	46.3	297	49.5
Don't know	1	0.5	16	4.0	17	2.8
Total	**200**	**100.0**	**400**	**100.0**	**600**	**100.0**

3.18 Association of HIV with Socio-Demographic, Behavioral and STI Variables

There is a slight association between HIV and socio-demographic or risk behavior variables such as condom use and the number of clients served by the respondents per day. HIV infection by the categories like age, educational level and marital status differ marginally but that is not statistically significant at least at 5 percent level of significance (Table 33).

3.18.1 Sex Workers in India and HIV

Similar to the 2006 IBBS study, this study in 2009 also brought about the finding that there was a slightly higher prevalence of HIV among the respondents who have worked as sex workers in India in comparison to those who had not been there. Nevertheless, as in the 2006 IBBS study, this time also, this difference was not statistically significant (at $p < 0.5$ level). There was also no association between HIV infection and variables such as condom use, practice and the number of clients entertained in the past year. The prevalence of HIV was much higher among the respondents who had been involved in this profession for more than two years (Table 33). HIV prevalence was higher (6.3% or 4/63) at the Dhangadhi site in comparison to the other sites. Table 33 also shows that HIV was prevalent among the sex workers who had worked in Mumbai than among those who reported having worked in other parts of India. There was no significant (at $p < 0.5$ level) association between HIV prevalence and STIs.

Table 33: Relationship Between HIV and Demographic, Behavioral Variables

Variables	Total (22 Districts)		
	N=600	HIV+	%
Age			
Less than 20 years	168	1	0.6
Above 21 years	432	13	3.0
Educational Level			
Illiterate and literate with no schooling	310	10	3.2
Schooling (Grades 1 to 10 and above SLC)	290	4	1.4
Marital Status			
Married	479	13	2.7
Never married	121	1	0.8
Years of Sex Work			
< 2 Years	311	3	1.0
or > 2 years	289	11	3.8
Sex Work in India			
Yes	25	5	20.0
No	575	9	1.6
Sex Work in Mumbai (n=25)			
Worked in Mumbai	1	1	100.0
Worked in India, but not in Mumbai	24	4	16.7
Coerced into Working in India (n=25)			
Yes	3	2	66.7
No, went to India of one's own free will	22	3	13.6

Table 33: Con'td…

Variables	Total (22 Districts)		
	N=600	HIV+	%
Study Sites			
Birgunj	78	2	2.6
Birtamod	44	1	2.3
Butwal	76	2	2.6
Dhangadhi	63	4	6.3
Itahari	82	1	1.2
Lahan	97	1	1.0
Mahendranagar	20	1	5.0
Narayanghat	37	1	2.7
Nepalgunj	103	1	1.0
Syphilis			
Current syphilis	21	0	0.0
Not infected with current syphilis	578	14	2.4
Gonorrhea			
Yes	9	0	0.0
No	591	14	2.4
Chlamydia			
Yes	50	1	2.0
No	550	13	2.4

3.19 Association of STIs with Socio-Demographic and Behavioral Variables

One of the measured STIs, current (or untreated) syphilis is highly associated with the marital status and the age of the sex workers. The prevalence of current syphilis among married FSWs was 4.4 percent as compared to the reported zero percent among the never married. Similarly, the incidence of current syphilis among the sex workers aged 20 years and above was 4.9 percent, as compared to the reported zero percent for sex workers aged less than 20 years. The prevalence of gonorrhea is not associated significantly (at $p < 0.5$ level) with all of the demographic variables - age, marital status, education or years of sex work. Also, it is not related to sex work in India or Mumbai. However, the prevalence of syphilis history is associated with demographic variables (Table 34). Chlamydia is significantly associated (at $p < 0.5$ level) with the marital status of the FSWs. The prevalence of Chlamydia among the never married sex workers was 16.5 percent compared to 6.3 percent among the married. The prevalence of Chlamydia was highest (20.7% or 17/50) at the Dhangadhi site. The prevalence of any of the STIs was zero percent among the sex workers with exposure to STI clinics and VCT.

Table 34: Association Between STIs and Demographic and Behavioral Variables

Variables	Total (22 Districts)								
	N=600	Current Syphilis	%	Gonorrhea	%	Chlamydia	%	Syphilis History	%
Age									
Less than 20 years	168	0	0.0	4	2.4	23	13.7	2	1.2
Above 20 years	432	21	4.9	5	1.2	27	6.3	12	2.8
Educational Level									
Illiterate and literate with no schooling	310	17	5.5	4	1.3	23	7.4	11	3.5
Schooling (Grades 1 to 10 and above SLC)	290	4	1.4	5	1.7	27	9.3	3	1.0
Marital Status									
Married	479	21	4.4	6	1.3	30	6.3	13	2.7
Never married	121	0	0.0	3	2.5	20	16.5	1	0.8
Years of Sex Work									
<2 Years	311	8	2.6	5	1.6	28	9.0	3	1.0
or > 2 years	289	13	4.5	4	1.4	22	7.6	11	3.8
Sex Work in India									
Yes	25	3	12.0	1	4.0	1	4.0	1	4.0
No	575	18	3.1	8	1.4	49	8.5	13	2.3
Sex Work in Mumbai (n=25)									
Worked in Mumbai	1	0	0.0	0	0.0	0	0.0	0	0.0
Worked in India, but not in Mumbai	24	3	12.5	1	4.2	1	4.2	1	4.2
Coerced into Working in India (n=25)									
Yes	3	0	0.0	0	0.0	0	0.0	0	0.0
No, went to India of one's own free will	22	3	13.6	1	4.5	1	4.5	1	4.5
Study Sites									
Birgunj	78	4	5.1	1	1.3	5	6.4	2	2.6
Birtamod	44	1	2.3	1	2.3	6	13.6	0	
Butwal	76	0	-	3	3.9	4	5.3	1	1.3
Dhangadhi	63	1	1.6	0	0	2	3.2	0	0
Itahari	82	2	2.4	1	1.2	17	20.7	0	0
Lahan	97	5	5.2	1	1.0	4	4.1	5	5.2
Mahendranagar	20	-	-	0	0	1	5.0	0	0
Narayanghat	37	3	8.1	0	0	3	8.1	3	8.1
Nepalgunj	103	5	4.9	2	1.9	8	7.8	3	2.9

Note: * denotes significant difference at p< .05

The following factors have no significant association/correlation with HIV or other STIs. (Please mention the correlation coefficients)

- Use of condoms
- Number of clients entertained
- Demographic characteristics such as marital status and educational level

3.20 Treatment and Care Seeking Behavior of FSWs

The percentage of those FSWs seeking treatment in the past year for genital warts was highest (70.2% or 33/72). Similarly, 68.7 percent of the FSWs (57/83) had sought treatment for genital ulcer/sore. Other reported symptoms for which more than half of the FSWs had sought treatment were vaginal discharge, vaginal itching, vaginal odor, lower abdominal pain, unusual vaginal bleeding, pain during urination and painful sex (Table 35).

Table 35: STI Symptoms and Treatment Seeking Behavior of Sex Workers

Reported STI Symptoms and Treatment Seeking Behavior	Current STI Symptoms		STI Symptoms in the Past		Treated in the Past Year	
	N =600	%	N = 600	%	n	%
Unusual heavy, foul smelling vaginal discharge	187	93.5	258	43.0	164	63.6
Pain in the lower abdomen	177	88.5	238	39.7	140	58.8
Vaginal odor or smell	127	63.5	175	29.2	96	54.9
Pain during urination.	119	59.5	157	26.2	91	58.0
Pain during sex	114	57.0	135	22.5	69	51.1
Itching in or around the vagina	114	57.0	181	30.2	109	60.2
Frequent urination	82	41.0	93	15.5	42	45.2
Ulcer or sore in the genital area	39	19.5	83	13.8	57	68.7
Genital warts	27	13.5	47	7.8	33	70.2
Vaginal bleeding (unusual)	18	9.0	28	4.7	16	57.1
Others	1	0.5	1	0.2	0	0.0

3.21 Comparison of Selected Behavioral of HIV and STI Prevalence Indicators with the 2003 and 2006 IBBS Results

This section compares the prevalence rates of HIV and STI in the 2003, 2006 and 2009 surveys. There has been a significant increase (at $p < 0.5$ level) in the HIV prevalence in 2009 (2.3% or 14/600) as compared to the years 2003 (2.0 % or 12/600) and 2006 (1.5% or 9/600). The percentage of FSWs with current syphilis has slightly decreased from 4.7 percent in 2006 to 3.5 percent in 2009. The prevalence rate of gonorrhea has decreased significantly from 13.5 percent in 2003 and 7.8 percent in 2006 to 1.2 percent in 2009. In the year 2009, the prevalence rate of chlamydia has also significantly decreased to 8.3 per cent as compared to 10.2 percent in 2003 and 14.0 percent in 2006 (Table 36).

Table 36: HIV and STI Prevalence Rates in 2003, 2006 and 2009

HIV/STI	2003		2006		2009	
	Total (22 Districts)		Total (22 Districts)		Total (22 Districts)	
	N=600	%	N=600	%	N=600	%
HIV	12	2.0	9	1.5	14	2.3
Current syphilis	23	3.8	28	4.7	21	3.5
Syphilis history	60	10.0	47	7.8	14	1.8
Gonorrhea*	81	13.5	46	7.7	9	1.2
Chlamydia*	61	10.2	84	14.0	50	8.3

Note: * Significant difference at p<.05

3.22 Comparison of HIV Prevalence among Selected Variables

This section compares the prevalence rates of HIV between the study years 2006 and 2009 for the selected variables. The prevalence rate of HIV among the FSWs was high in 2009; therefore, there is some significant increase in HIV prevalence for most of the variables (Table 37). HIV prevalence among the FSWs in 2009 (2.3%) was significantly higher than in 2006 (1.5%). HIV prevalence among the FSWs who had worked in India has increased to 20 percent in 2009 compared to 4.5 percent in 2006. The prevalence rate of HIV among the never married sex workers has slightly decreased to 0.8 percent this year compared to 1.3 percent in 2006.

Table 37: Comparison of HIV Prevalence among Selected Variables

Variables	2006			2009		
	N	HIV+	%	N=600	HIV+	%
Age						
15 - 20 years	112	0	0.0	168	1	0.6
Above 21 years	488	9	1.8	432	13	3.0
Educational Level						
Illiterate and literate with no schooling	404	7	1.7	310	10	3.2
Schooling (Grades 1 to 10 and above SLC)	196	2	1.0	290	4	1.4
Marital Status						
Married*	521	8	1.5	479	13	2.7
Never married	79	1	1.3	121	1	0.8
Years of Sex Work						
< 2 Years	263	3	1.1	311	3	1.0
or > 2 years*	337	6	1.8	289	11	3.8
Sex Work in India						
Yes	22	1	4.5	25	5	20.0
No	578	8	1.4	575	9	1.6
Sex Work in Mumbai (n=25)						
Worked in Mumbai	2	0	0.0	1	1	100.0
Worked in India, but not in Mumbai	20	1	5.0	24	4	16.7

Note: * Significant difference between 2006 and 2009 at p<.05

3.23 Change in Condom Use Practice Between 2003, 2006 and 2009

The data in Table 38 show that condom use with the client has increased in 2009. It shows that condom use with the last client increased from 53.3 percent (2003) and 63.3 percent (2006) to 84.8 percent in 2009, and with the last regular client it has increased from 56.5 percent in 2003 and 72.3 percent in 2006 to 77.9 percent in 2009. It was also noted that consistent use of the condom with the client has increased significantly from 22.7 percent (2003) and 43 percent (2006) to 69.8 percent (2009). With the regular clients, more than half (65.5 %) of the FSWs used condoms consistently in 2009 compared to 27.3 percent in 2003 and 49.7 percent in 2006. Consistent use of condoms with 'occasional' partners (other than client, husband and male friend) has also increased significantly from 11.9 (2003) and 45.1 percent (2006) to 76 percent (2009).

Table 38: Comparison of Condom Use between 2003, 2006 and 2006

Condom Use by Female Sex Workers	2003		2006		2009	
	Total 22 (Districts)		Total 22 (Districts)		Total 22 (Districts)	
			N = 600	%	N = 600	%
Use of Condom with Last Client *						
Yes	320	53.3	398	66.3	509	84.8
No	280	46.7	202	33.7	91	15.2
Total	**600**	**100.0**	**600**	**100.0**	**600**	**100.0**
Consistent Use of Condom with the Client in the Past Year *						
Yes	136	22.7	258	43.0	419	69.8
No	464	77.3	342	57.0	181	30.2
Total	**600**	**100.0**	**600**	**100.0**	**600**	**100.0**
Had Regular Client in the Past Year *						
Yes	414	69.0	505	84.2	444	74.0
No	186	31.0	95	15.8	156	26.0
Total	**600**	**100.0**	**600**	**100.0**	**600**	**100.0**
Use of Condom with Regular Client in the Last Sex *						
Yes	234	56.5	365	72.3	346	77.9
No	180	43.5	140	27.7	98	22.1
Total	**414**	**100.0**	**505**	**100.0**	**444**	**100.0**
Consistent Use of Condom with Regular Clients in the Past Year*						
Yes	113	27.3	251	49.7	291	65.5
No	301	72.7	254	50.3	153	34.5
Total	**414**	**100.0**	**505**	**100.0**	**444**	**100.0**

Table 38: Con'td…

Condom Use by Female Sex Workers	2003		2006		2009	
	Total 22 (Districts)		Total 22 (Districts)		Total 22 (Districts)	
			N = 600	%	N = 600	%
Had Sex with Partners Other than Client, Husband, Male Friend in the Past Year						
Yes	135	22.5	133	22.2	396	66.0
No	465	77.5	467	77.8	204	34.0
Total	**600**		**600**	**100.0**	**600**	**100.0**
Consistent Use of Condom with Partners Other than Client, Husband, Male Friend in the Past Year *						
Yes	16	11.9	60	45.1	301	76.0
No	119	88.1	73	54.9	95	24.0
Total	**135**		**133**	**100.0**	**396**	**100.0**
Number of Clients on the Day of Last Sexual Contact						
1	388	64.7	482	80.3	420	70.0
2	152	25.3	76		117	19.5
3	49	8.2	37		41	6.8
4 and more	11	1.8	7		22	3.7
Mean clients per day		1.5		1.3		1.5
Total	**600**	**100.0**	**600**	**100.0**	**600**	**100.0**

Note: * Significant difference at p < .05

Chapter 4: Conclusion and Recommendations

4.1 Conclusion

This 2009 IBBS study was conducted among 600 female sex workers (FSWs) in 22 districts from east to west Nepal along the terai highway. The objectives of the study were to determine the prevalence of HIV, Neisseria gonorrhoeae (GC), Chlamydia trachomatis (CT) and syphilis among the FSWs working at various sites in the 22 districts and to assess their HIV/STI-related knowledge, risk behaviors, treatment practices and exposure to the ongoing HIV programs. As in the earlier round of the study, the 22 districts were divided into two groups of 6 districts (western region districts) and 16 districts (eastern region districts), and the results were reported for both the groups as well as for all the 22 districts.

The study found that 2.3 percent (14/600) of the respondents were HIV positive. Overall, 3.5 percent (21/600) of the FSWs currently had syphilis. Altogether 1.5 percent (9/600) had gonorrhea and 8.3 percent (50/600) of the respondents had Chlamydia. Other conclusions drawn from the study are as follows:

- The median age of the FSWs was 26 years, and 28 percent of the respondents were less than 20 years of age.
- Slightly more than half (51.7%) of the respondents were illiterate or had no formal schooling.
- Overall, 56.7 percent of the respondents were married, and 17 percent of the FSWs were either divorced or separated from their husband.
- Approximately 65.8 percent of the sex workers had members in the family who were dependent on their income, 57.2 percent had 2-3 dependent members.
- The mean age of the FSWs when they had their first sex was 15.5 years, and 55.3 percent of the respondents were less than 15 years of age when they experienced their first sex.
- Altogether 25.7 percent had joined the sex trade less than a year ago.
- The respondents entertained both paying and non-paying partners. The mean number of sex partners in the previous week was 6.
- More than half (57.7%) of the FSWs had transport workers as their most frequent client.
- Overall, 69.8 percent of the sex workers had used the condom consistently with their clients in the past year.
- Consistent use of condoms with non-paying partners was very low. Only 9.3 percent of the sex workers had used condoms in every sexual intercourse with their non-paying partners.

- Altogether 58.3 percent of the sex workers reported obtaining free condoms all the time. Free condoms were mostly obtained from the NGOs/health workers/ volunteers and clients.

- The two most popular brands of condoms among the sex workers were condoms provided by the MOH followed by Number 1 and Dhaal.

- Almost 50 percent of the FSWs had heard about the female condom. Among them, only 5 percent had ever used a female condom.

- Majority (80.8%) of the married sex workers were adopting a family planning method to delay or avoid pregnancy.

- Almost all (99.7%) of the sex workers had heard about HIV/AIDS. The radio was reported to be the major source of information about HIV/AIDS by 92 percent of the sex workers.

- Altogether 77.5 percent of the respondents rejected the common local misconception that mosquito bite transmitted the HIV virus. Only 39.7 percent of the sex workers identified all three A, B and C HIV preventive measures while 26.7 percent were aware of all five major indicators of HIV.

- Altogether 2.3 percent of the sex workers were experiencing at least one STI symptom during the survey.

- In total, 69.4 percent of the respondents had not sought treatment for the STI symptom/s that they had been experiencing.

- Majority (87.2%) of the respondents had at least once met or interacted with the OEs/PEs from the HIV/AIDS-related programs and 50.5 percent had visited the DICs (Drop-in centers). The proportion of the respondents paying a visit to a STI clinic and VCT center during the past year was 45.3 percent and 65.2 percent respectively.

- Only 33.7 percent of the sex workers reported having participated in HIV/AIDS awareness raising programs in the 12 months preceding the survey. Thagali had conducted most of these activities in the 6 districts while in the 16 districts, GWP had done so.

- In total, 2.3 percent (14/600) of the respondents were found to be HIV positive.

- The prevalence of HIV was significantly higher (6.3% or 4/14) at the Dhangadhi site, one of the nine sites included in the study.

- The prevalence rate of current syphilis, gonorrhea and Chlamydia has decreased to 3.5 percent, 1.5 percent and 8.3 percent from 4.7 percent, 7.7 percent and 14.0 percent respectively reported in the IBBS study 2006.

4.2 Recommendations

- Many young girls are entering the sex trade every year. So the HIV/AIDS awareness campaigns should target the youth and adolescent groups. Programs might include visits by peer educators and outreach workers to

raise awareness about HIV and STI and to promote condom use. Sex education at the school level would also help to a great extent in creating general awareness.

- The sex workers do not use condoms consistently with non-paying partners such as husbands and boy friends. Prevention programs should focus more on the need for consistent condom use with all kinds of partners to prevent HIV/STI infection. Despite the many efforts of the MOH and donor agencies, HIV prevalence has gone up in this round of survey.

- In order to enable sex workers to access condoms easily, free condom distribution programs through NGOs/health workers/volunteers should be expanded to cover a larger group of the target population.

The mobilization of peer and outreach educators to educate the target groups has been quite successful in meeting its objectives. It should be continued on a larger scale to cover more sex workers. However, comparatively fewer sex workers had ever visited the existing DICs, STI clinics and VCT centers. Such facilities should be extended to facilitate convenient access to the sex workers.

ANNEX-1

Distribution of Sample Size by Location in 22 Terai Highway Districts

Lab Setup Location	No of FSW
16 Districts	
Itahari	105
Lahan	85
Narayanghat	75
Butawal	135
6 Districts	
Nepalgunj	80
Dhangadi	60
Mahendranagar	60
Total	**600**

ANNEX-2

INTEGRATED BIOLOGICAL AND BEHAVIORAL SURVEILLANCE SURVEY (IBSS) AMONG FEMALE SEX WORKERS – 2009

1 CONFIDENTIAL

FSW Questionnaire

Namaste! My name is ....., I am here from ACNielsen Pvt. Ltd. to collect data for a research study. This study is being conducted by ACNielsen Pvt. Ltd.and SACTS with technical assistance from Family Health International (FHI) and USAID – Nepal for the 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/AIDS, 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 with 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: 2065/___/___

Definition of Respondent

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

Name of interviewer: _____ Code No. of Interviewer:

Date of Interview: 2065 /_____/_____

Checked by the supervisor: Signature:_____ Date: 2065/_____/_____

Data Entry # 1: Clerk's name:_____ Date: 2065/_____/_____

Data Entry # 2: Clerk's name:_____ Date: 2065/_____/_____

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

1. Yes 2. No (Continue Interview)

↓

When?

_____ Days ago **(STOP INTERVIEW)**

1.0 GENERAL INFORMATION

Q. N.	Questions and Filters	Coding Categories	Skip to
101	Respondent ID No.	☐☐☐☐☐☐	
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	
102	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 ..... 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?	District: _____	

Q. N.	Questions and Filters	Coding Categories	Skip to
	(Name of Current Place of Residence)	VDC/Municipality: _____ *Ward No.....* ☐☐ *Village/Tole:* _____	
106	How long have you been living continuously at this location?	*Month.....* ☐☐☐ *Always (since birth)..... 0* → 201 *Since less than a month... 995*	
107	Before you moved here, where did you live?	District: _____ VDC/Municipality: _____ *Ward No.....* ☐☐ *Village/Tole:* _____	

2.0 PERSONAL INFORMATION

Q. N.	Questions and Filters	Coding Categories	Skip to
201	How old are you?	*Age .....* ☐☐ **(write the completed years)**	
202	What is your caste? **(Specify Ethnic Group/Caste)**	*Ethnicity/Caste*_____ (Specify) Code No…… ☐☐	
203	What is your educational status? **(Circle '0' if illiterate, '19' for the literate without attending the school, and write exact number of the passed grade)**	*Illiterate .....0* *Literate.....19* *Grade.....* ☐☐ ***(write the completed grade)***	
204	What is your present marital status?	*Married.....1* → *Divorced/Permanently Separated .....2* → *Widow.....3* → *Never married.....4* →	204.2 Deleted 204.3
204.1	How old were you when you got divorced/separated/widowed?	*Age .....* ☐☐ → **(write the completed years)**	204.3
204.2	Are you presently living with your husband?	*Yes.....1* → *No 2*	205

Q. N.	Questions and Filters	Coding Categories	Skip to
204.3	Who are you living with now? **(Multiple answers. DO NOT READ the possible answers)** **(Multiple Responses)**	*Male friend .....1* *Relatives .....2* *Other females.....3* *Children.....4* *Alone .....5* *Others (Specify)_____ 96*	
	[Note: If answer in Q. 204 is 'never married' Go to Q. 207]		
205	At what age were you married for the first time?	*Years old .....* ☐☐ **(Write Complete Years)**	
205.1	Have you given birth to children?	*Yes.....1* *No .....2* →	**205.5**
205.2	If yes, how many were live births?	*Sons .....* ☐☐ *Daughters .....* ☐☐	
205.3	Have you had miscarriage during your any pregnancies?	*Yes.....1* *No .....2* →	**205.5**
205.4	If yes, total number of miscarriage	*# Miscarriage…..* ☐☐	
205.5	Have you done termination/abortion of your any pregnancies?	*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……..1* Nurse……..2 Midwife……..3 TBA……4 Traditional healer……5 Friend……6 Nobody……7 Others (Specify)_____ 96 Don't know…… 98	
205.8	Do you want to have a child in the next two years?	*Yes.....1* *No .....2* →	

Q. N.	Questions and Filters	Coding Categories	Skip to
205.8	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?	*Yes.....1* *No .....2* →	**205.13**
205.10	**If Yes, What was the outcome of the last pregnancy?**	*Live Birth.....1* *Still Birth.....2* *Spontaneous abortion.....3* *Forced Abortion 4*	
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 Don't know…… 98	
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? **[Note that respondent may give multiple answers]**	*1.1*	

Q. N.	Questions and Filters	Coding Categories	Skip to
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	IDU – 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* → *%}g*	
09	WITHDRAWAL – Men can be careful and pull out before climax	*Yes.....1* *%* *No .....2* → *%}g*	

Q. N.	Questions and Filters	Coding Categories	Skip to
10	Have you heard any other ways or method that women or men can use to avoid pregnancy?	*Yes - 1* _____ (Specify) _____ (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?		
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	IDU – 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	*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	*Yes - 1* *No - 2*	
09	WITHDRAWAL – Men can be careful and pull out before climax	*Yes - 1* *No - 2*	

Q. N.	Questions and Filters	Coding Categories	Skip to
10	Have you heard any other ways or method that women or men can use to avoid pregnancy?	*Yes - 1* _____ (Specify) _____ (Specify) *No - 2*	
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? **(Adults are those who have completed 18 years)**	*Adults .....* ☐☐ *Children .....* ☐☐	
208	**How long have you been exchanging sexual intercourse for money or other things?** (if answer is less than 6 months stop interview)	*Months .....* ☐☐☐ *Don't know.....98*	
208.1	Did you have any sexual intercourse during past 12 months?	*Yes.....1* *No 2*	**Stop Interview**
209	How many months have you been working here as a sex worker at this place?	*1.2* *Months .....* ☐☐☐	

Q. N.	Questions and Filters	*1.3 Coding Categories*	Skip to
210	Where else have you worked as a sex worker? **(For example: *Bhatti* shop, Cabin Restaurant, Discotheques etc.) Mention location in the space provided**	*Discothèque*_____ *1* *Dance restaurant*_____ *2* *Cabine 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? **(List all the places mentioned by the respondent)**	*District VDC/Municipality Village/Tole* _____ _____ _____ _____ _____ _____ _____ _____ _____	
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)**	*District VDC/Municipality Village/Tole* _____ _____ _____ _____ _____ _____ _____ _____ _____	
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).**	*Name of Places Name of Nearby City* _____ _____ _____ _____ _____ _____	
214	In total, for how many months did you work as a sex worker in India?	*Months .....* ☐☐☐	
215	Were you coerced to go there or you went there on your free will?	*Coerced .....1* *On my own.....2*	
216	What is your average weekly income from commercial sex? **[Note: If there is '0' in both cash and gift equivalent, probe for the reasons]**	Cash _____ Rs. Gift equivalent to _____Rs. Total_____Rs. *Others (Specify)_____96*	
217	Do you have any other work besides sex work?	*Yes.....1* *No .....2* →	218

Q. N.	Questions and Filters	*1.4 Coding Categories*	Skip to
217.1	What do you do?	*Waiter ..... 1* *Housemaid/restaurant employee (dish cleaner, cook, washerwoman etc.)..... 2* *Wage laborer ..... 3* *Own restaurant/bhatti pasal. 4*	

		Masseuse ..... 5 *Dancer ..... 6* *Business (retail store, fruit shop etc.)..... 7* *Knitting /tailoring ..... 8* *Peer educator ..... 9* *Job (teacher, peon etc)..... 10* Others (specify)_____96	
217.2	What is your average weekly income from the above-mentioned sources?	_____Rupees	
218	Have you ever encountered any client who refused to give money after having sex?	*Yes..... 1* *No ..... 2* → 301	
218.1	How many such incidents have occurred in the past six months?	*Times .....* ☐☐	

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*	
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* ..... ☐	
305. 2	With how many clients did you have sexual intercourse in the past week?	*Number* ..... ☐☐	

Q. N.	Questions and Filters	*1.5 Coding Categories*	Skip to
306	In the past month, with which profession's client did you mostly have sex? **(Encircle three most reported types of client. DO NOT READ the possible answers**)	*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? **(Write '00' if Today)**	*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. Total_____ Rs. *Reason* _____	

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

Q. N.	Questions and Filters	Coding Categories	Skip to
401.2	Why didn't your client use a condom at that time? **(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* *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* → 403 *Most of the time ..... 2* *Some of the time ..... 3* *Rarely..... 4* *Never..... 5*	
402.1	Why didn't your client 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* *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

Q. N.	Questions and Filters	Coding Categories	Skip to
404.2	Why didn't your regular client use a condom at 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* *Client offered more money.... 8* *Didn't know / not aware about condom ..... 9* *Other (Specify) _____ ..... 96* *Don't know..... 98*	
405	How often did your regular clients use condom with you over the past 12 months?	*All of the time..... 1* → 406 *Most of the time ..... 2* *Some of the time ..... 3* *Rarely..... 4* *Never..... 5*	
405.1	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* *Didn't think of it ..... 7* *Client offered more money.... 8* *Other (Specify) _____ ..... 96* *Don't know..... 98*	

Condom use with Non-Paying 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? **(Write '00'for none intercourse in past one month)**	*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

Q. N.	Questions and Filters	Coding Categories	Skip to
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 partners use condoms over the last 12 months?	*All of the time ..... 1* → 410 *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	
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* *Didn't think of it..... 7* *Trust partner..... 8* *Wish to have child..... 9* *Other (Specify) _____* *..... 96* *Don't know..... 98*	

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..... 1* *No ..... 2* → 412.2	
411	Did he use condom when he had last sexual contact with you?	*Yes..... 1* *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*	

Q. N.	Questions and Filters	Coding Categories	Skip to
		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* *Didn't think it was necessary 6* *Didn't think of it ..... 7* *Other (Specify) _____* *..... 96* *Don't know 98*	

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? **(Multiple answers. DO NOT READ the possible answers)**	*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*	

Q. N.	Questions and Filters	Coding Categories	Skip to
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) 96* Don't remember/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* Regular client……..2 Husband/male friend…….. 3 Other male……..4 Others (Specify)_____96	
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? **(Observe and write)**	*Number .....* ☐☐	
415	Which places or persons do you know from where/whom you can obtain condoms? **(Multiple answers. DO NOT READ the possible answers)**	*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* *1.6 Hotel/lodge..... 10*	

Q. N.	Questions and Filters	Coding Categories	Skip to
		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? **(Buy, obtain free of cost or both ways)**	*Always free of cost..... 1* *Purchase..... 2* → 417 *Obtain both ways..... 3* *Condom never used ..... 4* → 418	
416.1	From where do you often obtain free condoms? **(Multiple answers. DO NOT READ the possible answers)**	*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? **(Multiple answers. DO NOT READ the possible answers)**	*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*	
	1.7.1.1.1.1.1.1.1 Note: If response is '1' in Q416 Go to Q418 after 416.3		
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 Others (Specify)_____96	
417.1	Which would be the most convenient	*Pharmacy..... 1*	

Q. N.	Questions and Filters	Coding Categories	Skip to
	place/s for you to purchase condoms? **(Multiple answers. DO NOT READ the possible answers)**	General retail store (*Kirana Pasal*) 2 Private clinic..... 3 Pan Shop ..... 4 Hotel/lodge/restaurant..... 5 Others (Specify)_____96	

Type of Sex Practices

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*	
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 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*	

3.0 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?			
	Source of Information	**Yes**	**No**	
	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	*1.7.2 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 fried* ..... *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	*Yes* *1*	

Q. N.	Questions and Filters	Coding Categories	1.7.2 Skip to
	mosquito bite?	*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	**I don't want to know the result**, 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	**Please do not tell me the result**, but did you find out the result of your test?	*Yes..... 1* *No 2*	→ 522
521	Why did you not receive the test	*Sure of not being infected.... 1*	

Q. N.	Questions and Filters	Coding Categories	1.7.2 Skip to
	result?	*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 yeas ago..... 4*	
523	Have you taken up HIV testing in the past 12 months?	*Yes..... 1* *No 2*	
524	**I don't want to know the results**, 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		Skip to
601	In the past one-year have you seen, read or heard any advertisements about condoms from the following sources? (**READ THE FOLLOWING LIST**)			
	Sources of Information	**Yes**	**No**	
	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	What message did you get from the advertisement? **(Multiple answers. DO NOT READ the**	*Condoms should be used to avoid HIV/AIDS ..... 1* *Condoms should be used to avoid STI 2*		

Q. N.	Questions and Filters	Coding Categories		Skip to
	possible answers)	*Condoms should be used for family planning, other family planning messages..... 3* *Other (Specify) _____ 96*		
603	In the past one-year, have you ever seen, heard or read following messages?			
	1.7.3 Messages/Characters	**Yes**	**No**	
	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 Lai	1	2	
	4. Ramro Sanga Prayog Gare Jokhim Huna Dinna Bharpardo Chhu Santosh Dinchhu Jhanjhat Manna Hunna	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	
	96. Others (Specify)_____	1	2	
603.1	Besides above messages have you seen, heard or read any other messages relating to STI/HIV/ AIDS Prevention or Condom Uses?	*Yes..... 1* *No ..... 2* →		604
603.2	What are they?	*Advertisement on No.1condom.. ..... 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*		

Q. N.	Questions and Filters	Coding Categories	Skip to
		Vega ..... 9 *Skin less ..... 10* *Play Vet ..... 11* *Did not use in the past 12 months ..... 95* Others(Specify)_____ 96	

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* → 609 *No response 99*	
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	Do you know from which organization were they? **(Multiple answers. DO NOT READ the possible answers)**	*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*	

Q. N.	Questions and Filters	Coding Categories	Skip to
		Sathi Sanstha ..... 17 *Indreni Sewa Samaj..... 18* *Step Nepal ..... 19* *Swan Nepal ..... 20* *Others (Specify) _____* *96 Don't know 98*	
608	How many times have you been visited by PE and/or OE in the last 12 months?	*Once ..... 1* *2-3 times ..... 2* *4-6 times ..... 3* *7-12 times ..... 4* *More than 12 times 5*	
609	Have you visited or been to any drop in center (DIC) in the last 12 months?	*Yes..... 1* *No 2*	→ 613
610	What did you do at DIC? **(Multiple answers. do not read the possible answers)**	*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	
611	Do you know which organizations run those DICs ? **(Multiple answers. DO NOT READ the possible answers)** 2	*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* *Indreni Sewa Samaj..... 16* *PSI ..... 17* *Sathi Sanstha ..... 18* *Step Nepal 19*	

Q. N.	Questions and Filters	Coding Categories	Skip to
		Swan Nepal ..... 20 *Others (Specify) _____* *96 Don't know 98*	
612	How many times have you visited such DICs in the last 12 months?	*Once ..... 1* *2-3 times ..... 2* *4-6 times ..... 3* *7-12 times ..... 4* *More than 12 times..... 5*	
613	Have you visited any STI clinic in the last 12 months?	*Yes..... 1* *No 2*	→ 617
614	What did you do at such STI clinics? **(Multiple answers. do not read the possible answers given below)**	*Blood tested for STI ..... 1* *Physical examination conducted for STI identification..... 2* *Was advised to use condom in each sexual intercourse..... 3* *Was advised to take complete and regular medicine ..... 4* *Was suggested to reduce number of sexual partners... 5* *Took friend with me ..... 6* Other (Specify)_____96	
615	Do you know which organizations run those STI clinics? **(Multiple answers. do not read the possible answers)**	*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	

Q. N.	Questions and Filters	Coding Categories	Skip to
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? 3 **(Multiple answers. DO NOT READ the possible answers)** 4	*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 result5* *Received counseling on using condom correctly in each sexual intercourse..... 6* *Took a friend with me ..... 7* *Other (Specify)_____ 96*	

Q. N.	Questions and Filters	*4.1 Coding Categories*	Skip to
619	Do you know which organizations run those VCT centers? **(Multiple answers. DO NOT READ the possible answers)** 5	*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? 6	*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? **(Multiple answers. DO NOT READ the possible answers)**	*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? **(Multiple answers. DO NOT READ the possible answers)**	*Talked about my sex partners1* *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 testing4* *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

Q. N.	7 QUESTIONS AND FILTERS	*7.1 Coding Categories*	Skip to
622	8 WHAT WERE THE ACTIVITIES THAT YOU PARTICIPATED IN? **(Multiple answers. DO NOT READ the possible answers)**	*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 Workshops8* *Condom use demonstrations 9* Others (Specify) _____96	
623	9 DO YOU KNOW WHICH ORGANIZATIONS ORGANIZED THOSE ACTIVITIES? **(Multiple answers. DO NOT READ the possible answers given below)** 10	*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 Don't know 98*	
624	How many times have you participated in such activities in the last 12 months?	*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? **(Multiple answers. DO NOT READ the possible answers)**	*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 vagina9* 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?		

Symptoms	Yes	No
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

Q. N.	Questions and Filters	Coding Categories		Skip to
	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	
	(If answer is 'No' to all in the Q. No. 702 Go to Q. 710)			
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? **(Write '00' if less than a week)**	*Week .....* ☐☐		
704	Where did you go for the treatment? **(Multiple answers. DO NOT READ the possible answers)**	*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	For which symptoms did you get treatment? **Specify the treatment.**			
	Symptoms	***Treatment***		
	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

Q. N.	Questions and Filters	Coding Categories		Skip to
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? **[If not paid mention the reasons]**	Rs. _____ *Reason* _____		
710	Did you have any of the following symptoms in the past year?			
	Symptoms	***10.1 Yes***	***10.2 No***	
	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*	
	(If answer is 'No' to all in Q. No. 710, Go to Q. No. 801)			

Q. N.	Questions and Filters	*Coding Categories*		*Skip to*
711	Have you gone through medical treatment for any of these symptoms in the past year?			
	Symptoms	***Yes***	***No***	
	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 vaginal discharge and foul vaginal discharge	*1*	*2*	
	10. Genital Warts	*1*	*2*	
	96. Others (Specify) _____	*1*	*2*	
	(If answer is 'No' to all in Q. No. 711, Go to Q. No. 801)			

712	Where did you go for the treatment? **(Multiple answers. Do not read the possible answers).**	*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)_____* → 801 *..... 9* *GWP ..... 10* *Siddhartha club clinic ..... 11* *WATCH clinic……..12* *CAC ..... 13* *NSARC ..... 14* *Trinetra..... 15* *Indreni sewa samaj..... 16* *Others (Specify) _____* *..... 96*	
713	Did anyone from the place where you went for treatment counsel you about how to avoid the problem?	*Yes..... 1* *No ..... 2* → 801	
713.1	What did he/she tell you? **(Multiple answers, DONOT READ the possible answers)**	*Told me to use condom..... 1* *Told me to reduce number of sexual partners ..... 2* *Told me to take medicine regularly ..... 3* *Told me not to have sexual contact during medicine taking period ..... 4* *Advised me to come for regular check up..... 5* *Others (Specify) _____* *..... 96*	

USE OF DRUGS AND INJECTION

Q. N.	Questions and Filters	Coding Categories	Skip to
801	During the last 30 days how often did you have drinks containing alcohol?	*Everyday ..... 1* *2-3 times a week ..... 2* *At least once a week..... 3* *Less than once in a week .... 4* *Never ..... 5* *Don't know 98*	
802	Some people take different types of drugs. Have you also tried any of those drugs in the past 30 days? **(Ganja, Bhang, Nitroson, Nitrovet E.)**	*Yes..... 1* *No ..... 2* *Don't know 98*	
803	Some people inject drugs using a syringe.	*Yes 1*	

Q. N.	Questions and Filters	Coding Categories	Skip to
	Have you ever-injected drugs? **(Do not count drugs injected for medical purpose or treatment of an illness)**	*No ..... 2* *Don't know 98*	809
804	Have you injected drugs in last 12 months? **(Do not count drugs injected for medical purposes or treatment of an illness)**	*Yes ..... 1* *No ..... 2* *Don't know 98*	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 me2* *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* *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	**(For Married SW only)** Does your husband inject drug? **(Check with Q. 204)**	*Yes..... 1* *No ..... 2* *Don't know 98*	
811.2	**(For female having regular client)** Did your regular client inject drug? **(Check with Q. 403)**	*Yes..... 1* *No ..... 2* *Don't know 98*	
811.3	**(For all)** 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

Q. N.	Questions and Filters	Coding Categories	Skip to
812.1	If yes, how are you related to her/him?	*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*	

ꕥ Thank You ꕥ

ANNEX-3
CLINICAL CARD
INTEGRATED BIO-BEHAVIORAL SURVEY (IBBS)
AMONG FEMALE SEX WORKERS IN 22 TERAI HIGHWAY DISTRICTS-2009

Female Clinical/Lab Checklist

Clinic Location: _____

Name of Lab Technician _____

Name of Staff Nurse / HA _____

Respondent ID Number: _____ Date: 20___/___/__
Time Hrs Min

(A) Clinical Information (Clinic)	**Yes**	**1**	**No**	**2**
(B) Specimen collection (Lab)	**Yes**	**1**	**No**	**2**

1 Clinical Information (Clinic)

1. Weight	_____ **Kg**			
2. Blood Pressure				
3. STI Symptom	**Yes**	**1**	**No**	**2**
4. Temperature	_____			
5. Pulse				
6. Vitamin Given	**Yes**	**1**	**No**	**2**
6.1 Name of the Vitamins Medicines given				
7. Iron Pills given	**Yes**	**1**	**No**	**2**

Syndromic Treatment Information

8 Do you now have or have you had in the past month any of the following symptoms?

a. Pain in the lower abdomen	**Yes**	**1**	**No**	**2**	**No response**	**3**
b. Pain during urination	**Yes**	**1**	**No**	**2**	**No response**	**3**

c. Frequent urination	**Yes**	**1**	**No**	**2**	**No response**	**3**
d. Pain during sex	**Yes**	**1**	**No**	**2**	**No response**	**3**
e. Ulcer or sore in the genital area	**Yes**	**1**	**No**	**2**	**No response**	**3**
f. Itching in or around the vagina	**Yes**	**1**	**No**	**2**	**No response**	**3**
g. Vaginal odor or smell	**Yes**	**1**	**No**	**2**	**No response**	**3**
h. Vaginal bleeding (unusual)	**Yes**	**1**	**No**	**2**	**No response**	**3**
i. Unusual heavy vaginal discharge and foul vaginal discharge	**Yes**	**1**	**No**	**2**	**No response**	**3**
j. Genital Warts	**Yes**	**1**	**No**	**2**	**No response**	**3**

k.Others (Specify) _____

[If yes to any of above, give vaginal discharge syndrome treatment]

Name of the Medicines Given :

Refer to VCT Center **Yes** **1** **No** **2**

Physical examination undertaken
Physical examination NOT undertaken

ANNEX-4
RESPONDENT ID CARD AND BIOLOGICAL COMPONENT CARD
INTEGRATED BIO-BEHAVIORAL SURVEY (IBBS)
AMONG FEMALE SEX WORKERS IN 22 TERAI HIGHWAY DISTRICTS-2009

FRONT SIDE

RESPONDENT ID CARD

ID Number:

Needs to collect test result YES NO

Test results will be available from to

(On any working days from 11AM to 4 PM)
Provisional diagnosis:

Treatment

Signature of Staff Nurse / HA_____ Date

REAR SIDE

Report Collection Centers

S.No	Name of Report Collection Centers	Address	Tel. Numbers

Biological Component Card

ID _____
Date: _____

Consented for Laboratory Tests **Yes** **No**

Respondent wants consultation
With staff nurse **Yes** **No**

Interviewer name: _____

(To be filled by Lab technician and Staff nurse)

Filled by Lab Technician (select appropriate category):

Respondent gave only blood sample	
Respondent gave only urine sample	
Respondent gave blood and urine sample	
Respondent did not give any samples	

Filled by staff nurse (select appropriate category):

Physical examination undertaken	
Physical examination NOT undertaken	

CLUSTER INFORMATION SHEET (CIS)

(CIS must be filled up for each and every selected Cluster

FOR OFFICE USE ONLY	
Location Name	
Cluster Number	

GENERAL INFORMATION		
01	Date of visit	2009

MEASURE OF SIZE		
02	Total number of Eligible Respondents	
03	Total number of Eligible Respondents Selected	

DETAILS OF RESPONSES:		
04	Total number of completed behavioural and biological	
05	Total number of completed behavioural only	
06	Total number of non-responses (sum of 6.1 through 6.5)	

DETAILS OF NON-RESPONSES:		
6.1	Total number of respondents not available for interview	
6.2	Total number of respondents who refused both behavioural and biological	
6.3	Total number of respondents who refused biological only	
6.4	Total number of respondents who started but could/did not complete the interview	
6.5	Total number of respondents who were interviewed earlier for IBBS in the present round	

Name of the Supervisor _____ Date :

ANNEX-5

Family Health International (FHI), Nepal

Oral Informed Consent Form for Female Sex Workers

Title Integrated Bio-behavioral Survey among Female Sex Workers in 22 terai Highway Districts of Nepal

Sponsor: ASHA Project- FHI/Nepal and USAID/Nepal

Principal Investigator/s: Jacqueline McPherson, MPH, FHI/Nepal
Laxmi Bilas Acharya, PhD, FHI/Nepal

Address: FHI/Nepal
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Phone: +977 1 443 7173; Fax: +977 1 441 7475
Email: satish@fhi.org.np, **lacharya@fhi.org.np**

Introduction to Research

We request you to participate in this study to collect information on knowledge of HIV/STI, HIV/STI related risk behavior, treatment seeking practices for STIs and prevalence rate of HIV and STI among women like you who are involved in commercial sex work. We want to make sure that you have understood the purpose of the study and your responsibility in the research before you decide to take part in this study. If you decide to take part in this study we will ask you to tell us about your decision in front of a witness. Both consent taker and witness will sign the form. Please ask us if you do not understand any word or information given to you.

General Information about the Research and Your Role

Female study participants shall be selected using a random process. You are in the list of possible candidates and the final selection would be based on your choice. A total of 600 females like you shall be selected for interview in this study from 22 districts in terai highway. If you agree to participate in the study we will interview you using a structured questionnaire and request you to provide blood sample for HIV and syphilis testing. We will draw about 10 ml blood by a disposable syringe from your arm if you decide to participate in “on the spot syphilis treatment plan”. If you decide not to participate in “on the spot treatment plan” for syphilis we will draw only about 5-7 ml of blood. Urine samples will be collected from 22 terai highway districts for Gonorrhea and Chlamydia tests. We provide medical examination also for syndromic treatment of any other STIs. You will be informed about the dates and place from where you can collect the results of HIV and STI tests. Test results will be provided with counseling by a qualified counselor.

It will take about 60 minutes to complete the interview, blood collection and examination if you decide to participate in the study. Further, if you decide to participate in “on the spot treatment plan” for syphilis you may need to spend about 60 minutes more after you are given the bicillin injection for observation by medical doctor for any adverse

reactions. Please be informed that this is a research and not a health care providing service.

Possible risks
The only risk of participating in this study is feeling of some discomfort during blood drawing. Drawing blood will not put you at any risk. You may feel some discomfort while answering few questions. You can decide in which question you feel uncomfortable to answer and let us know. You can quit the interview also if you feel very uncomfortable. You might feel some mental stress from your test result. However, qualified counselor with proper counseling on HIV and STI will provide test results. You will be provided information and address for seeking any assistance regarding the mental stress you may have due to the participation in the research.

There is small risk that people may see you participating in the study when you come for the interview or return for your test results. As your name and detailed address will not be recorded people will not have right to use information you have provided in the survey.

Possible benefits
If you agree to be treated on the spot for syphilis, a test will be performed on the interview site for syphilis screening. If you have syphilis infection, you will be provided bicilin injection. You may need to spend about 60 minutes more time after you are given the bicillin injection for observation by medical doctor for any adverse reactions. You will be provided free treatment for other STI symptoms also. You will be given test result and also provided with information on how STI/HIV is transmitted and how it can be prevented and controlled. We will not provide treatment for HIV infection but you will be referred to proper places for treatment. Follow up treatment costs will not be paid by the research team. You will be provided information on safe sex practices too. The information that we obtain from this research will help to plan strategies to control further spread of HIV/AIDS and other STIs.

The study team members will provide you the address of the place and the dates where you can hear your test results of HIV and syphilis. A qualified counselor will provide test results with pre and posttest counseling. The study ID card with your code number on it should be presented to hear the test results. We will not be able to recognize you without the study ID card so if you do not have the ID card when you return for the test results we cannot give you the results.

If you decide not to participate in the study
The decision whether or not to take part in this study is yours. If your decision is not to participate in the study it will not affect the heath services that you have normally been receiving or any services we will be providing from here.

Confidentiality
We will to the best of our ability keep secret the information collected about you and about your participation in the study. We will not record your name in any reports. In rare circumstances, a court of law may ask for the data recorded but that is less likely. We will not ask you and write your name on this form. We will ask you to sign the consent form but only ask you to agree with spoken words.

Payment
We will not pay you for your participation in the stud. We will give you condoms and IEC materials on HIV/AIDS as compensation for your participation in this study. We will also provide NRs. 100 to cover local transportation cost or provide transportation for coming to the study center for interview and for providing biological sample.

Leaving the study
You may leave the study at any point of time you wish. If you leave, it will not change the health services that you normally receive from here.

If you have any question about this study
If you have any questions about the study, please call:
Satish Raj Pandey, ASHA Project-FHI/Nepal, Baluwatar, Kathmandu, Ph. No: 01-4437173
OR
Laxmi Bilas Acharya, FHI/Nepal, Baluwatar, Kahtmandu, Phone: 01-4437173
We will not be able to pay for care for injuries that occur after the study.

Your rights as participant
This is reviewed and approved by the Institutional Review Board of Family Health International and Nepal Health Research Council. If you have any questions about how you are treated in this study or what are your rights as a participant you may contact ***Satish Raj Pandey***, Family Health International (FHI), Baluwatar, Kathmandu, Nepal.Ph. No: 977 01-4437173. ***Mr. David Borasky***, Protection of Human Subjects Committee, PO Box 13950, Research Triangle Park, NC 27709, USA Phone Number : (International Access Code) –1-919-405-1445, Email: dborasky@fhi.org

11 VOLUNTEER AGREEMENT

I was present when the selected person was read about the benefits, risks and procedures of the study. All questions were answered and she has also agreed to take part in the research.

…….. ……..
Signature of the witness Date

I verify that the nature and intention, the potential benefits, and possible risks associated with participating in this research were explained to the respondent.

…….. …….
Signature of the person who obtained consent Date

ANNEX -6
BLOOD AND SPECIMEN
Collection Data and Delivery Data
SACTS/ NRL

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
1	33423001	3-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
2	33423002	3-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
3	33423003	3-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
4	33423004	4-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
5	33423005	4-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
6	33423006	4-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
7	33423007	4-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
8	33424001	4-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
9	33424002	4-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
10	33424003	4-Mar-09	8-Mar-09	5-Mar-09	Nepalgunj
11	55538001	3-Mar-09	8-Mar-09	5-Mar-09	Narayanghat
12	55538002	4-Mar-09	8-Mar-09	5-Mar-09	Narayanghat
13	55538003	4-Mar-09	8-Mar-09	5-Mar-09	Narayanghat
14	55539001	3-Mar-09	8-Mar-09	5-Mar-09	Narayanghat
15	55539002	3-Mar-09	8-Mar-09	5-Mar-09	Narayanghat
16	67054001	3-Mar-09	7-Mar-09	6-Mar-09	Lahan
17	67054002	3-Mar-09	7-Mar-09	6-Mar-09	Lahan
18	67054003	3-Mar-09	7-Mar-09	6-Mar-09	Lahan
19	67054004	3-Mar-09	7-Mar-09	6-Mar-09	Lahan
20	67054005	4-Mar-09	7-Mar-09	6-Mar-09	Lahan
21	67054006	4-Mar-09	7-Mar-09	6-Mar-09	Lahan
22	67054007	5-Mar-09	7-Mar-09	6-Mar-09	Lahan
23	67054008	5-Mar-09	7-Mar-09	6-Mar-09	Lahan
24	67054010	5-Mar-09	7-Mar-09	6-Mar-09	Lahan
25	67054011	5-Mar-09	7-Mar-09	6-Mar-09	Lahan
26	67054013	5-Mar-09	7-Mar-09	6-Mar-09	Lahan
27	67054014	6-Mar-09	7-Mar-09	6-Mar-09	Lahan
28	67054015	6-Mar-09	7-Mar-09	6-Mar-09	Lahan
29	33421001	7-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
30	33421002	7-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
31	33421003	7-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
32	33424004	5-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
33	33424005	5-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
34	33424006	5-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
35	33424007	5-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
36	33425001	5-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
37	33425002	5-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
38	33425003	5-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
39	33425004	6-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
40	33425005	6-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
41	33425006	6-Mar-09	8-Mar-09	8-Mar-09	Nepalgunj
42	44536001	7-Mar-09	8-Mar-09	8-Mar-09	Narayanghat

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
44	55538004	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
45	55538005	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
46	55538006	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
47	55538007	7-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
48	55539003	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
49	55539004	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
50	55539005	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
51	55539006	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
52	55539007	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
53	55539008	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
54	55539009	5-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
55	55540002	6-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
56	55540003	6-Mar-09	8-Mar-09	8-Mar-09	Narayanghat
57	67054016	7-Mar-09	11-Mar-09	11-Mar-09	Lahan
58	67054017	7-Mar-09	11-Mar-09	11-Mar-09	Lahan
59	67054018	7-Mar-09	11-Mar-09	11-Mar-09	Lahan
60	67054019	7-Mar-09	11-Mar-09	11-Mar-09	Lahan
61	67054020	7-Mar-09	11-Mar-09	11-Mar-09	Lahan
62	67054021	8-Mar-09	11-Mar-09	11-Mar-09	Lahan
63	67054022	8-Mar-09	11-Mar-09	11-Mar-09	Lahan
64	67054023	8-Mar-09	11-Mar-09	11-Mar-09	Lahan
65	67054024	8-Mar-09	11-Mar-09	11-Mar-09	Lahan
66	67054025	8-Mar-09	11-Mar-09	11-Mar-09	Lahan
67	67055001	10-Mar-09	16-Mar-09	11-Mar-09	Lahan
68	67055002	10-Mar-09	16-Mar-09	11-Mar-09	Lahan
69	67055003	10-Mar-09	16-Mar-09	11-Mar-09	Lahan
70	67056001	9-Mar-09	11-Mar-09	11-Mar-09	Lahan
71	67056002	9-Mar-09	11-Mar-09	11-Mar-09	Lahan
72	67056003	10-Mar-09	16-Mar-09	11-Mar-09	Lahan
73	67056004	10-Mar-09	16-Mar-09	11-Mar-09	Lahan
74	33314001	9-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
75	33314002	9-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
76	33314003	9-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
77	33314004	9-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
78	33420001	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
79	33420002	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
80	33421004	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
81	33421005	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
82	33421006	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
83	33421007	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
84	33528001	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
85	33528002	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
86	33528003	8-Mar-09	15-Mar-09	12-Mar-09	Nepalgunj
87	44536003	8-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
88	44536004	11-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
89	44536005	11-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
90	44536006	11-Mar-09	15-Mar-09	12-Mar-09	Narayanghat

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
92	44536008	11-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
93	55538008	8-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
94	55538009	8-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
95	55538010	9-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
96	55540005	9-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
97	55540006	10-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
98	55540007	10-Mar-09	15-Mar-09	12-Mar-09	Narayanghat
99	33314005	15-Mar-09	22-Mar-09	15-Mar-09	Nepalgunj
100	33422001	12-Mar-09	15-Mar-09	15-Mar-09	Nepalgunj
101	33422002	13-Mar-09	15-Mar-09	15-Mar-09	Nepalgunj
102	33422003	13-Mar-09	15-Mar-09	15-Mar-09	Nepalgunj
103	33422004	14-Mar-09	15-Mar-09	15-Mar-09	Nepalgunj
104	33422005	14-Mar-09	15-Mar-09	15-Mar-09	Nepalgunj
105	55540008	12-Mar-09	15-Mar-09	15-Mar-09	Narayanghat
106	55540009	13-Mar-09	15-Mar-09	15-Mar-09	Narayanghat
107	55540010	13-Mar-09	15-Mar-09	15-Mar-09	Narayanghat
108	55540011	13-Mar-09	15-Mar-09	15-Mar-09	Narayanghat
109	55540012	13-Mar-09	15-Mar-09	15-Mar-09	Narayanghat
110	67055004	10-Mar-09	16-Mar-09	15-Mar-09	Lahan
111	67055005	12-Mar-09	16-Mar-09	15-Mar-09	Lahan
112	67055006	12-Mar-09	16-Mar-09	15-Mar-09	Lahan
113	67055007	13-Mar-09	16-Mar-09	15-Mar-09	Lahan
114	67055008	14-Mar-09	16-Mar-09	15-Mar-09	Lahan
115	67055009	14-Mar-09	16-Mar-09	15-Mar-09	Lahan
116	67055010	14-Mar-09	16-Mar-09	15-Mar-09	Lahan
117	67056005	12-Mar-09	16-Mar-09	15-Mar-09	Lahan
118	67056006	12-Mar-09	16-Mar-09	15-Mar-09	Lahan
119	67056007	12-Mar-09	16-Mar-09	15-Mar-09	Lahan
120	67056008	12-Mar-09	16-Mar-09	15-Mar-09	Lahan
121	67056009	14-Mar-09	16-Mar-09	15-Mar-09	Lahan
122	33314006	16-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
123	33314007	16-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
124	33316001	18-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
125	33316002	18-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
126	33316003	18-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
127	33316004	18-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
128	33317001	18-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
129	33317002	18-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
130	33419001	16-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
131	33419002	16-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
132	33419003	16-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
133	33419004	16-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
134	33422006	15-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
135	33422007	16-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
136	33422008	15-Mar-09	22-Mar-09	18-Mar-09	Nepalgunj
137	66951001	15-Mar-09	19-Mar-09	18-Mar-09	Lahan
138	66951002	15-Mar-09	19-Mar-09	18-Mar-09	Lahan

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
140	66951004	15-Mar-09	19-Mar-09	18-Mar-09	Lahan
141	66951005	15-Mar-09	19-Mar-09	18-Mar-09	Lahan
142	66951006	15-Mar-09	19-Mar-09	18-Mar-09	Lahan
143	67157001	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
144	67157002	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
145	67157003	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
146	67157004	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
147	67157005	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
148	67157006	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
149	67157007	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
150	67157008	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
151	67158001	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
152	67158002	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
153	67158003	15-Mar-09	18-Mar-09	18-Mar-09	Lahan
154	67158004	15-Mar-09	19-Mar-09	18-Mar-09	Lahan
155	67158005	15-Mar-09	19-Mar-09	18-Mar-09	Lahan
156	55641001	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
157	55642001	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
158	55642002	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
159	55642003	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
160	55642004	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
161	55845001	17-Mar-09	22-Mar-09	19-Mar-09	Birgunj
162	55845002	17-Mar-09	22-Mar-09	19-Mar-09	Birgunj
163	55845003	17-Mar-09	22-Mar-09	19-Mar-09	Birgunj
164	55845004	17-Mar-09	22-Mar-09	19-Mar-09	Birgunj
165	55847001	17-Mar-09	22-Mar-09	19-Mar-09	Birgunj
166	55847002	17-Mar-09	22-Mar-09	19-Mar-09	Birgunj
167	55847005	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
168	55847006	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
169	55847007	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
170	55847008	18-Mar-09	22-Mar-09	19-Mar-09	Birgunj
171	33316005	20-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
172	33316006	20-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
173	33317003	20-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
174	33419005	19-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
175	33419006	19-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
176	33420003	19-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
177	33420004	21-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
178	33420007	19-Mar-09	22-Mar-09	22-Mar-09	Nepalgunj
179	55641002	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
180	55641003	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
181	55641004	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
182	55641005	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
183	55641006	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
184	55641007	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
185	55641008	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
186	55641009	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
188	55642006	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
189	55642007	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
190	55642008	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
191	55642009	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
192	55642010	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
193	55845005	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
194	55845006	19-Mar-09	22-Mar-09	22-Mar-09	Birgunj
195	55845007	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
196	55847009	20-Mar-09	22-Mar-09	22-Mar-09	Birgunj
197	66749001	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
198	66749002	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
199	66749003	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
200	66749004	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
201	66749005	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
202	66749006	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
203	66749007	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
204	66749008	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
205	66850001	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
206	66850002	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
207	66850003	21-Mar-09	22-Mar-09	22-Mar-09	Lahan
208	66951007	18-Mar-09	22-Mar-09	22-Mar-09	Lahan
209	66951008	18-Mar-09	22-Mar-09	22-Mar-09	Lahan
210	66951009	18-Mar-09	22-Mar-09	22-Mar-09	Lahan
211	66951010	18-Mar-09	22-Mar-09	22-Mar-09	Lahan
212	66951011	18-Mar-09	22-Mar-09	22-Mar-09	Lahan
213	66951012	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
214	66952001	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
215	66952002	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
216	66952003	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
217	66952004	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
218	66952005	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
219	66952006	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
220	66952007	19-Mar-09	22-Mar-09	22-Mar-09	Lahan
221	67158006	18-Mar-09	22-Mar-09	22-Mar-09	Lahan
222	55743001	24-Mar-09	25-Mar-09	25-Mar-09	Birgunj
223	55743002	24-Mar-09	25-Mar-09	25-Mar-09	Birgunj
224	55743003	24-Mar-09	25-Mar-09	25-Mar-09	Birgunj
225	55744001	22-Mar-09	25-Mar-09	25-Mar-09	Birgunj
226	55744003	24-Mar-09	25-Mar-09	25-Mar-09	Birgunj
227	55744004	24-Mar-09	25-Mar-09	25-Mar-09	Birgunj
228	55744005	24-Mar-09	25-Mar-09	25-Mar-09	Birgunj
229	55744006	24-Mar-09	25-Mar-09	25-Mar-09	Birgunj
230	55845008	22-Mar-09	25-Mar-09	25-Mar-09	Birgunj
231	55845009	22-Mar-09	25-Mar-09	25-Mar-09	Birgunj
232	55845010	22-Mar-09	25-Mar-09	25-Mar-09	Birgunj
233	55845011	22-Mar-09	25-Mar-09	25-Mar-09	Birgunj
234	55845012	23-Mar-09	25-Mar-09	25-Mar-09	Birgunj

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
236	55847011	23-Mar-09	25-Mar-09	25-Mar-09	Birgunj
237	55847012	23-Mar-09	25-Mar-09	25-Mar-09	Birgunj
238	33315001	25-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
239	33315002	25-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
240	33315003	25-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
241	33315004	25-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
242	33315005	25-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
243	33316007	22-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
244	33317004	22-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
245	33317005	22-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
246	33317006	23-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
247	33318001	23-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
248	33318002	23-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
249	33318003	24-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
250	33318004	24-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
251	33420005	24-Mar-09	26-Mar-09	26-Mar-09	Nepalgunj
252	66850004	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
253	66850005	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
254	66850006	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
255	66850007	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
256	66850008	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
257	66850009	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
258	66850010	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
259	66952008	24-Mar-09	26-Mar-09	26-Mar-09	Lahan
260	67157009	23-Mar-09	26-Mar-09	26-Mar-09	Lahan
261	67157010	25-Mar-09	26-Mar-09	26-Mar-09	Lahan
262	67158007	22-Mar-09	26-Mar-09	26-Mar-09	Lahan
263	33315006	26-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
264	33315007	26-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
265	33318005	26-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
266	33318006	26-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
267	33318007	26-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
268	33526001	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
269	33526002	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
270	33526003	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
271	33526004	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
272	33526005	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
273	33526006	28-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
274	33526007	28-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
275	33527001	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
276	33527002	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
277	33527003	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
278	33527004	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
279	33527005	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
280	33527006	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
281	33527007	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
282	33528004	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
284	33528006	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
285	33528007	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
286	33528008	27-Mar-09	29-Mar-09	29-Mar-09	Nepalgunj
287	55743004	27-Mar-09	29-Mar-09	29-Mar-09	Birgunj
288	55743005	27-Mar-09	29-Mar-09	29-Mar-09	Birgunj
289	55743006	27-Mar-09	29-Mar-09	29-Mar-09	Birgunj
290	55846001	25-Mar-09	29-Mar-09	29-Mar-09	Birgunj
291	55846002	25-Mar-09	29-Mar-09	29-Mar-09	Birgunj
292	55846003	25-Mar-09	29-Mar-09	29-Mar-09	Birgunj
293	55846004	25-Mar-09	29-Mar-09	29-Mar-09	Birgunj
294	66648001	26-Mar-09	29-Mar-09	29-Mar-09	Birgunj
295	66648002	26-Mar-09	29-Mar-09	29-Mar-09	Birgunj
296	66648003	26-Mar-09	29-Mar-09	29-Mar-09	Birgunj
297	66648004	26-Mar-09	29-Mar-09	29-Mar-09	Birgunj
298	66648005	26-Mar-09	29-Mar-09	29-Mar-09	Birgunj
299	66648006	28-Mar-09	29-Mar-09	29-Mar-09	Birgunj
300	66648007	28-Mar-09	29-Mar-09	29-Mar-09	Birgunj
301	66648008	28-Mar-09	29-Mar-09	29-Mar-09	Birgunj
302	77759001	28-Mar-09	29-Mar-09	29-Mar-09	Itahari
303	77759002	28-Mar-09	29-Mar-09	29-Mar-09	Itahari
304	77759003	28-Mar-09	29-Mar-09	29-Mar-09	Itahari
305	77760001	28-Mar-09	29-Mar-09	29-Mar-09	Itahari
306	77760002	28-Mar-09	29-Mar-09	29-Mar-09	Itahari
307	77760003	28-Mar-09	29-Mar-09	29-Mar-09	Itahari
308	77760004	28-Mar-09	29-Mar-09	29-Mar-09	Itahari
309	77760005	29-Mar-09	29-Mar-09	29-Mar-09	Itahari
310	77760006	29-Mar-09	29-Mar-09	29-Mar-09	Itahari
311	77760007	29-Mar-09	29-Mar-09	29-Mar-09	Itahari
312	77761001	29-Mar-09	29-Mar-09	29-Mar-09	Itahari
313	77761002	29-Mar-09	29-Mar-09	29-Mar-09	Itahari
314	77761003	31-Mar-09	1-Apr-09	1-Apr-09	Itahari
315	77761004	31-Mar-09	1-Apr-09	1-Apr-09	Itahari
316	77761005	31-Mar-09	1-Apr-09	1-Apr-09	Itahari
317	77762001	30-Mar-09	1-Apr-09	1-Apr-09	Itahari
318	77762002	30-Mar-09	1-Apr-09	1-Apr-09	Itahari
319	77762003	30-Mar-09	1-Apr-09	1-Apr-09	Itahari
320	77762004	30-Mar-09	1-Apr-09	1-Apr-09	Itahari
321	77762005	31-Mar-09	1-Apr-09	1-Apr-09	Itahari
322	77762006	31-Mar-09	1-Apr-09	1-Apr-09	Itahari
323	55743007	29-Mar-09	2-Apr-09	2-Apr-09	Birgunj
324	55743008	29-Mar-09	2-Apr-09	2-Apr-09	Birgunj
325	55744007	30-Mar-09	2-Apr-09	2-Apr-09	Birgunj
326	55744008	30-Mar-09	2-Apr-09	2-Apr-09	Birgunj
327	55744009	30-Mar-09	2-Apr-09	2-Apr-09	Birgunj
328	55744010	31-Mar-09	2-Apr-09	2-Apr-09	Birgunj
329	55846005	29-Mar-09	2-Apr-09	2-Apr-09	Birgunj
330	55846006	30-Mar-09	2-Apr-09	2-Apr-09	Birgunj

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
332	55846008	1-Apr-09	2-Apr-09	2-Apr-09	Birgunj
333	55846009	1-Apr-09	2-Apr-09	2-Apr-09	Birgunj
334	55846010	1-Apr-09	2-Apr-09	2-Apr-09	Birgunj
335	66648009	31-Mar-09	2-Apr-09	2-Apr-09	Birgunj
336	66648011	31-Mar-09	2-Apr-09	2-Apr-09	Birgunj
337	22208001	4-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
338	22208002	4-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
339	22208003	4-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
340	22210001	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
341	22210002	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
342	22210003	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
343	22210004	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
344	22210005	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
345	22210006	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
346	22211001	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
347	22211002	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
348	22211003	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
349	22211004	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
350	22211005	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
351	22211006	2-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
352	22211007	3-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
353	22212001	3-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
354	22212002	3-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
355	22212003	3-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
356	22212004	3-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
357	22212005	3-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
358	22213001	4-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
359	22213002	4-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
360	22213003	4-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
361	22213004	4-Apr-09	5-Apr-09	5-Apr-09	Dhangadi
362	77759004	2-Apr-09	5-Apr-09	5-Apr-09	Itahari
363	77759005	2-Apr-09	5-Apr-09	5-Apr-09	Itahari
364	77760008	1-Apr-09	5-Apr-09	5-Apr-09	Itahari
365	77761006	4-Apr-09	5-Apr-09	5-Apr-09	Itahari
366	77761007	4-Apr-09	5-Apr-09	5-Apr-09	Itahari
367	77761008	4-Apr-09	5-Apr-09	5-Apr-09	Itahari
368	77762007	3-Apr-09	5-Apr-09	5-Apr-09	Itahari
369	77762008	3-Apr-09	5-Apr-09	5-Apr-09	Itahari
370	77763001	3-Apr-09	5-Apr-09	5-Apr-09	Itahari
371	77763002	3-Apr-09	5-Apr-09	5-Apr-09	Itahari
372	77763003	3-Apr-09	5-Apr-09	5-Apr-09	Itahari
373	77763004	4-Apr-09	5-Apr-09	5-Apr-09	Itahari
374	77865001	1-Apr-09	5-Apr-09	5-Apr-09	Itahari
375	77865002	1-Apr-09	5-Apr-09	5-Apr-09	Itahari
376	77865003	2-Apr-09	5-Apr-09	5-Apr-09	Itahari
377	77865004	2-Apr-09	5-Apr-09	5-Apr-09	Itahari
378	77865006	4-Apr-09	5-Apr-09	5-Apr-09	Itahari

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
380	77866001	1-Apr-09	5-Apr-09	5-Apr-09	Itahari
381	44433001	4-Apr-09	8-Apr-09	8-Apr-09	Butwal
382	44433002	5-Apr-09	8-Apr-09	8-Apr-09	Butwal
383	44433004	5-Apr-09	8-Apr-09	8-Apr-09	Butwal
384	44433005	5-Apr-09	8-Apr-09	8-Apr-09	Butwal
385	44433006	5-Apr-09	8-Apr-09	8-Apr-09	Butwal
386	44433007	5-Apr-09	8-Apr-09	8-Apr-09	Butwal
387	44433008	6-Apr-09	8-Apr-09	8-Apr-09	Butwal
388	44433009	6-Apr-09	8-Apr-09	8-Apr-09	Butwal
389	44433010	6-Apr-09	8-Apr-09	8-Apr-09	Butwal
390	44433011	6-Apr-09	8-Apr-09	8-Apr-09	Butwal
391	44433012	7-Apr-09	8-Apr-09	8-Apr-09	Butwal
392	44434001	7-Apr-09	8-Apr-09	8-Apr-09	Butwal
393	44434002	7-Apr-09	8-Apr-09	8-Apr-09	Butwal
394	44434003	7-Apr-09	8-Apr-09	8-Apr-09	Butwal
395	44537001	4-Apr-09	8-Apr-09	8-Apr-09	Butwal
396	44537002	4-Apr-09	8-Apr-09	8-Apr-09	Butwal
397	44537003	4-Apr-09	8-Apr-09	8-Apr-09	Butwal
398	44537004	7-Apr-09	8-Apr-09	8-Apr-09	Butwal
399	44537005	7-Apr-09	8-Apr-09	8-Apr-09	Butwal
400	77760009	6-Apr-09	8-Apr-09	8-Apr-09	Itahari
401	77760010	6-Apr-09	8-Apr-09	8-Apr-09	Itahari
402	77761009	7-Apr-09	8-Apr-09	8-Apr-09	Itahari
403	77761010	7-Apr-09	8-Apr-09	8-Apr-09	Itahari
404	77763005	6-Apr-09	8-Apr-09	8-Apr-09	Itahari
405	77763006	6-Apr-09	8-Apr-09	8-Apr-09	Itahari
406	77865008	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
407	77865009	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
408	77865010	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
409	77866002	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
410	77866003	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
411	77866004	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
412	77866005	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
413	77866006	5-Apr-09	8-Apr-09	8-Apr-09	Itahari
414	77866007	7-Apr-09	8-Apr-09	8-Apr-09	Itahari
415	22205001	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
416	22205002	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
417	22205003	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
418	22205004	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
419	22205005	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
420	22205006	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
421	22206001	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
422	22207001	7-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
423	22207002	7-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
424	22207003	7-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
425	22207004	8-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
426	22207005	8-Apr-09	9-Apr-09	9-Apr-09	Dhangadi

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
428	22208005	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
429	22208006	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
430	22208007	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
431	22209001	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
432	22209002	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
433	22209003	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
434	22209004	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
435	22209005	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
436	22209006	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
437	22209007	6-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
438	22212006	5-Apr-09	9-Apr-09	9-Apr-09	Dhangadi
439	44431001	10-Apr-09	12-Apr-09	9-Apr-09	Butwal
440	44431002	10-Apr-09	12-Apr-09	9-Apr-09	Butwal
441	44431003	11-Apr-09	12-Apr-09	9-Apr-09	Butwal
442	44431004	11-Apr-09	12-Apr-09	9-Apr-09	Butwal
443	44431005	11-Apr-09	12-Apr-09	9-Apr-09	Butwal
444	44431006	11-Apr-09	12-Apr-09	9-Apr-09	Butwal
445	44431007	11-Apr-09	12-Apr-09	9-Apr-09	Butwal
446	44434004	8-Apr-09	12-Apr-09	9-Apr-09	Butwal
447	44434005	8-Apr-09	12-Apr-09	9-Apr-09	Butwal
448	44434006	8-Apr-09	12-Apr-09	9-Apr-09	Butwal
449	44434007	8-Apr-09	12-Apr-09	9-Apr-09	Butwal
450	44434008	8-Apr-09	12-Apr-09	9-Apr-09	Butwal
451	44434009	8-Apr-09	12-Apr-09	9-Apr-09	Butwal
452	44434010	10-Apr-09	12-Apr-09	9-Apr-09	Butwal
453	44537006	9-Apr-09	12-Apr-09	9-Apr-09	Butwal
454	44537007	9-Apr-09	12-Apr-09	9-Apr-09	Butwal
455	44537008	9-Apr-09	12-Apr-09	9-Apr-09	Butwal
456	44537009	9-Apr-09	12-Apr-09	9-Apr-09	Butwal
457	44537010	9-Apr-09	12-Apr-09	9-Apr-09	Butwal
458	22204001	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
459	22204002	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
460	22204003	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
461	22204004	11-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
462	22204005	11-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
463	22204006	11-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
464	22204007	11-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
465	22206002	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
466	22206003	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
467	22206004	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
468	22206005	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
469	22206006	10-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
470	22206007	12-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
471	22207006	9-Apr-09	12-Apr-09	12-Apr-09	Dhangadi
472	77759006	11-Apr-09	12-Apr-09	12-Apr-09	Itahari
473	77759007	11-Apr-09	12-Apr-09	12-Apr-09	Itahari
474	77759008	11-Apr-09	12-Apr-09	12-Apr-09	Itahari

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
476	77760011	9-Apr-09	12-Apr-09	12-Apr-09	Itahari
477	77762009	8-Apr-09	12-Apr-09	12-Apr-09	Itahari
478	77762010	8-Apr-09	12-Apr-09	12-Apr-09	Itahari
479	77763007	8-Apr-09	12-Apr-09	12-Apr-09	Itahari
480	77763008	8-Apr-09	12-Apr-09	12-Apr-09	Itahari
481	77763009	8-Apr-09	12-Apr-09	12-Apr-09	Itahari
482	77763010	9-Apr-09	12-Apr-09	12-Apr-09	Itahari
483	77764001	10-Apr-09	12-Apr-09	12-Apr-09	Itahari
484	77764002	10-Apr-09	12-Apr-09	12-Apr-09	Itahari
485	77764003	10-Apr-09	12-Apr-09	12-Apr-09	Itahari
486	77764004	10-Apr-09	12-Apr-09	12-Apr-09	Itahari
487	77764005	10-Apr-09	12-Apr-09	12-Apr-09	Itahari
488	77764006	11-Apr-09	12-Apr-09	12-Apr-09	Itahari
489	77764007	11-Apr-09	12-Apr-09	12-Apr-09	Itahari
490	77764008	11-Apr-09	12-Apr-09	12-Apr-09	Itahari
491	77866008	8-Apr-09	12-Apr-09	12-Apr-09	Itahari
492	11103001	13-Apr-09	17-Apr-09	13-Apr-09	Mahendranagar
493	11103002	13-Apr-09	17-Apr-09	13-Apr-09	Mahendranagar
494	11103003	13-Apr-09	17-Apr-09	13-Apr-09	Mahendranagar
495	11103004	13-Apr-09	17-Apr-09	13-Apr-09	Mahendranagar
496	77759010	13-Apr-09	13-Apr-09	13-Apr-09	Itahari
497	77764009	12-Apr-09	13-Apr-09	13-Apr-09	Itahari
498	77764010	12-Apr-09	13-Apr-09	13-Apr-09	Itahari
499	77865011	12-Apr-09	13-Apr-09	13-Apr-09	Itahari
500	77866009	12-Apr-09	13-Apr-09	13-Apr-09	Itahari
501	77866010	12-Apr-09	13-Apr-09	13-Apr-09	Itahari
502	77866011	12-Apr-09	13-Apr-09	13-Apr-09	Itahari
503	11101001	14-Apr-09	17-Apr-09	14-Apr-09	Mahendranagar
504	11101002	14-Apr-09	17-Apr-09	14-Apr-09	Mahendranagar
505	11101003	14-Apr-09	17-Apr-09	14-Apr-09	Mahendranagar
506	11101004	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
507	11101005	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
508	11101006	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
509	11101007	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
510	11102001	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
511	11102002	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
512	11102003	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
513	11103005	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
514	11103006	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
515	11103007	15-Apr-09	17-Apr-09	15-Apr-09	Mahendranagar
516	33629001	12-Apr-09	19-Apr-09	15-Apr-09	Butwal
517	33629002	12-Apr-09	19-Apr-09	15-Apr-09	Butwal
518	44432001	12-Apr-09	19-Apr-09	15-Apr-09	Butwal
519	44432002	12-Apr-09	19-Apr-09	15-Apr-09	Butwal
520	44432003	13-Apr-09	19-Apr-09	15-Apr-09	Butwal
521	44432004	13-Apr-09	19-Apr-09	15-Apr-09	Butwal
522	44432005	13-Apr-09	19-Apr-09	15-Apr-09	Butwal

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
524	44432007	13-Apr-09	19-Apr-09	15-Apr-09	Butwal
525	44432008	14-Apr-09	19-Apr-09	15-Apr-09	Butwal
526	44432009	14-Apr-09	19-Apr-09	15-Apr-09	Butwal
527	11102004	16-Apr-09	17-Apr-09	17-Apr-09	Mahendranagar
528	11102005	16-Apr-09	17-Apr-09	17-Apr-09	Mahendranagar
529	11102006	16-Apr-09	17-Apr-09	17-Apr-09	Mahendranagar
530	33629003	16-Apr-09	19-Apr-09	19-Apr-09	Butwal
531	33629004	16-Apr-09	19-Apr-09	19-Apr-09	Butwal
532	33630001	18-Apr-09	19-Apr-09	19-Apr-09	Butwal
533	33630002	18-Apr-09	19-Apr-09	19-Apr-09	Butwal
534	33630003	18-Apr-09	19-Apr-09	19-Apr-09	Butwal
535	33630004	18-Apr-09	19-Apr-09	19-Apr-09	Butwal
536	33630005	18-Apr-09	19-Apr-09	19-Apr-09	Butwal
537	33630006	18-Apr-09	19-Apr-09	19-Apr-09	Butwal
538	33630007	19-Apr-09	19-Apr-09	19-Apr-09	Butwal
539	44431008	15-Apr-09	19-Apr-09	19-Apr-09	Butwal
540	44431009	15-Apr-09	19-Apr-09	19-Apr-09	Butwal
541	44432010	15-Apr-09	19-Apr-09	19-Apr-09	Butwal
542	44435001	16-Apr-09	19-Apr-09	19-Apr-09	Butwal
543	44435002	16-Apr-09	19-Apr-09	19-Apr-09	Butwal
544	44435003	16-Apr-09	19-Apr-09	19-Apr-09	Butwal
545	44435004	17-Apr-09	19-Apr-09	19-Apr-09	Butwal
546	44435005	17-Apr-09	19-Apr-09	19-Apr-09	Butwal
547	44435006	17-Apr-09	19-Apr-09	19-Apr-09	Butwal
548	44435007	17-Apr-09	19-Apr-09	19-Apr-09	Butwal
549	44435008	17-Apr-09	19-Apr-09	19-Apr-09	Butwal
550	77968001	18-Apr-09	19-Apr-09	19-Apr-09	Birtamode
551	77968002	18-Apr-09	19-Apr-09	19-Apr-09	Birtamode
552	77969001	17-Apr-09	19-Apr-09	19-Apr-09	Birtamode
553	77969002	17-Apr-09	19-Apr-09	19-Apr-09	Birtamode
554	77969004	18-Apr-09	19-Apr-09	19-Apr-09	Birtamode
555	77970001	16-Apr-09	19-Apr-09	19-Apr-09	Birtamode
556	77970002	16-Apr-09	19-Apr-09	19-Apr-09	Birtamode
557	77970003	16-Apr-09	19-Apr-09	19-Apr-09	Birtamode
558	77970004	16-Apr-09	19-Apr-09	19-Apr-09	Birtamode
559	77970005	16-Apr-09	19-Apr-09	19-Apr-09	Birtamode
560	77970006	17-Apr-09	19-Apr-09	19-Apr-09	Birtamode
561	77970007	18-Apr-09	19-Apr-09	19-Apr-09	Birtamode
562	33629005	19-Apr-09	21-Apr-09	21-Apr-09	Butwal
563	33629006	19-Apr-09	21-Apr-09	21-Apr-09	Butwal
564	33629007	19-Apr-09	21-Apr-09	21-Apr-09	Butwal
565	44431010	20-Apr-09	21-Apr-09	21-Apr-09	Butwal
566	44435009	19-Apr-09	21-Apr-09	21-Apr-09	Butwal
567	44435010	19-Apr-09	21-Apr-09	21-Apr-09	Butwal
568	44435011	20-Apr-09	21-Apr-09	21-Apr-09	Butwal
569	77967001	21-Apr-09	22-Apr-09	22-Apr-09	Birtamode
570	77967002	21-Apr-09	22-Apr-09	22-Apr-09	Birtamode

S.No	ID Codes	Blood / Urine Collected	Delivered to SACTS	Delivered to NRL	Clinic Location
572	77968003	19-Apr-09	22-Apr-09	22-Apr-09	Birtamode
573	77968004	19-Apr-09	22-Apr-09	22-Apr-09	Birtamode
574	77968005	20-Apr-09	22-Apr-09	22-Apr-09	Birtamode
575	77968006	20-Apr-09	22-Apr-09	22-Apr-09	Birtamode
576	77968007	20-Apr-09	22-Apr-09	22-Apr-09	Birtamode
577	77968008	20-Apr-09	22-Apr-09	22-Apr-09	Birtamode
578	77968009	21-Apr-09	22-Apr-09	22-Apr-09	Birtamode
579	77968010	21-Apr-09	22-Apr-09	22-Apr-09	Birtamode
580	77969003	19-Apr-09	22-Apr-09	22-Apr-09	Birtamode
581	77969005	19-Apr-09	22-Apr-09	22-Apr-09	Birtamode
582	77969006	20-Apr-09	22-Apr-09	22-Apr-09	Birtamode
583	77969007	21-Apr-09	22-Apr-09	22-Apr-09	Birtamode
584	77970008	19-Apr-09	22-Apr-09	22-Apr-09	Birtamode
585	77970009	20-Apr-09	22-Apr-09	22-Apr-09	Birtamode
586	77970010	23-Apr-09	27-Apr-09	22-Apr-09	Birtamode
587	77967004	22-Apr-09	27-Apr-09	26-Apr-09	Birtamode
588	77967005	22-Apr-09	27-Apr-09	26-Apr-09	Birtamode
589	77967006	22-Apr-09	27-Apr-09	26-Apr-09	Birtamode
590	77967007	22-Apr-09	27-Apr-09	26-Apr-09	Birtamode
591	77967008	24-Apr-09	27-Apr-09	26-Apr-09	Birtamode
592	77967009	24-Apr-09	27-Apr-09	26-Apr-09	Birtamode
593	77967010	25-Apr-09	27-Apr-09	26-Apr-09	Birtamode
594	77968011	23-Apr-09	27-Apr-09	26-Apr-09	Birtamode
595	77968012	23-Apr-09	27-Apr-09	26-Apr-09	Birtamode
596	77968013	25-Apr-09	27-Apr-09	26-Apr-09	Birtamode
597	77969008	22-Apr-09	27-Apr-09	26-Apr-09	Birtamode
598	77969009	24-Apr-09	27-Apr-09	26-Apr-09	Birtamode
599	77969010	24-Apr-09	27-Apr-09	26-Apr-09	Birtamode
600	77969011	26-Apr-09	27-Apr-09	26-Apr-09	Birtamode

ANNEX -7
Monitoring and Evaluation Framework for HIV in Nepal

Prevention 1. HIV-related risk and transmission among Sex Workers reduced	**National M&E**	**UNGASS**	**ASHA**	**PMP**	**Result**		
Impact/Outcome Indicators	**Ind #**	**Ind #**	**Ind #**	**Ind #**	**Total - 600**	**16 districts-400**	**6 districts (200)**
% of female sex workers that are HIV infected (22 terai highway distircts)	I-2	23	IR	IR 9.1	2.30%	2%	3%
% of female sex workers that report the use of condom with most recent client (22 terai highway distircts)	PO-6	18	IR 1.1	IR 9.1.3	84.80%	87%	80.50%
% of female sex workers reporting consistent condom use with their clients over the past 12 months (22 terai highway distircts)			IR 1.4	IR 9.1.4	69.80%	72%	65.50%
% of female sex workers who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (22 terai highway distircts)	PO-9	14	IR 1.7	IR 9.1.5	26.70%	26.50%	27%
Output/Coverage Indicators							
% of female sex workers reached with targeted HIV prevention (eg. BCC with OE/PE or DIC or STI Clinics or VCT or community events / trainings or drug treatment or rehabilitation) (22 terai highway districts)	OP11		IR 1.15		90.00%	90.70%	88.50%
% of female sex workers reached with HIV prevention program (Knows where to receive HIV test result and received condom) in (22 terai highway districts)		9			77.20%	78.80%	74%
% Female sex workers that have received an HIV test in the last 12 months and who know their results in (22 terai highway distircts)		8			61.20%	60.50%	62.50%