# NATIONAL BASELINE HIGH RISK AND BRIDGE POPULATION BEHAVIOURAL SURVEILLANCE SURVEY (2002)

# **REPORT**

PART II
(MEN WHO HAVE SEX WITH MEN AND INJECTING DRUG USERS)

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#### **PREFACE**

The key objectives of the National AIDS Control Program are the reduction of the spread of HIV infection in the country and strengthening India's response to HIV/AIDS on a long-term basis. To meet these objectives, data on the current situation in the country needs to be collected. Such information provides a backdrop for evidence based planning of strategic interventions for the control of HIV/AIDS. The impact of the interventions also needs to be periodically monitored through continuous surveillance.

Till recently surveillance systems only concentrated on tracking of AIDS cases and the spread of HIV virus. But such surveillance only documents the damage that has already been wrought on the individuals, families, communities and the country. This does not help in identifying factors like current behaviour, which fuels the HIV pandemic. Documenting such behaviour and documenting behavioural change, which predisposes to the spread of HIV/AIDS is of crucial importance for prevention of HIV/AIDS. Therefore a new framework for HIV surveillance has been developed. The Behavioural Surveillance Surveys, aptly called the Second Generation Surveillance System are based on tracking behavioural changes in the country.

A general population BSS was undertaken earlier and this was followed by BSS among high-risk groups and bridge populations. The present report (Part II) highlights findings from the two high- risk groups of Men having Sex with Men and Injecting Drug Users. Part I of the Report covered Female Sex Workers and their Clients. The surveys have been contracted to ORG-CSR, so as to facilitate an independent evaluation of the existing situation. I appreciate the efforts of the ORG-CSR team in ensuring a high quality and for completion of the work in time.

I hope NACO and State AIDS Control Societies and all other concerned agencies will use the findings to plan effective interventions and to identify critical 'grey' areas, which need urgent attention. This wave of BSS is intended to furnish base line information and future waves will be undertaken over the next five years to monitor changes in behavioural parameters.

I wish to complement UNAIDS for their signal contribution in terms of financial and technical support to setting up the Baseline Behavioural indicators.

I thank the World Bank, APAC, DFID and FHI for supporting this endeavour. I thank Dr. Laxmi Bai (APAC), Ms. Stella Manoharan (FHI) for coordinating the Training of Trainers Workshop and contributing to standardization of the survey instruments.

I congratulate Dr. P.Salil (Joint Director) and Dr. GVS Murthy (Consultant) for successfully coordinating the survey and for ensuring a speedy compilation of this crucial report.

A survey of this magnitude would not have been possible without the unstinted cooperation and patience of thousands of female sex workers and their clients.

(Mr. J V R Prasada Rao) Special Secretary (Health) & Project Director, NACO

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#### LIST OF ABBREVIATIONS

AIDS: Acquired Immuno Deficiency Syndrome

APAC: AIDS Prevention And Control Project

BB/bb: Brothel based

BSS: Behavioral Surveillance Survey

DFID: Department for International Development

FHI: Family Health International

FSW: Female Sex Workers

HIV: Human Immuno Deficiency Virus

ID: Injecting Drugs

IDU: Injecting Drug Users

ISSA: Integrated System for Statistical Analysis

M&E: Monitoring & Evaluation

MSM: Men who have sex with Men

NACO: National AIDS Control Organization

NACP: National AIDS Control Program

NBB/nbb: Non Brothel based

NE: North Eastern

NGO: Non Governmental Organizations

ORG-CSR: Operations Research Group – Center for Social Research

SACS: State AIDS Control Society

SD: Standard Deviation

SI: Sampling Interval

SPSS: Statistical Package for Social Sciences

STD: Sexually Transmitted Diseases

UNAIDS: Joint United Nations Program on HIV/AIDS

USAID: United States Agency for International Development

UT: Union Territory

WHO: World Health Organization

# **ACKNOWLEDGEMENTS**

# NACO and ORG-CSR thank the following NGOs for their cooperation and help in implementing the BSS among MSM and IDU populations

# NGOs who assisted in covering MSM populations

Sl.	Location	Name of NGO		
No.				
1	Kolkatta	Integration		
		Kolkata – 700 019		
2	Delhi	Development Advocacy and Research Trust		
		(DART)		
		New Delhi – 49		
3	Bangalore	GELAYA		
		Bangalore		
4	Mumbai	The Humsafar Trust		
		Mumbai		
5	Chennai	Social Welfare Association for Men (SWAM)		
		Chennai 600083		

# NGOs who assisted in covering IDU populations

Sl. No.	Location	Name of NGO	
1	Kolkatta	Human Development and Research Institute Kolkata – 700 009	
2	Delhi	Sharan New Delhi Sahara	
3	Manipur	Kripa Society Imphal Lamka Rehabilitation Research Centre (LRRC) Churachandpur Institute for Social Disease Moreh, Distr. – Chandel	
4	Mumbai	Sankalp Rehabilitation Trust Mumbai	
5	Chennai	Address Centre Chennai 600013	

## EXECUTIVE SUMMARY

## 1.0 Introduction

- The National AIDS Control Program was launched in 1992. The increasing prevalence of HIV/AIDS in the country necessitated the launch of a second phase of the National Program in 1999 (NACP-II). The major objectives of NACP-II are reduction in spread of HIV infection in the country and strengthening the country's response to HIV/AIDS on a long-term basis. Specific objectives include interventions to change behavior, especially among high-risk groups, decentralization of service delivery, protection of human rights, operational research and management reform.
- Monitoring and Evaluation has been given key importance in NACP-II. This is to
  facilitate evidence based planning for NACP. This will be done through a regular
  Computerized Management Information System and through conduct of a series of
  Behavioral Surveillance Surveys (BSS) in the general population, bridge populations
  and the high-risk groups.
- BSS in the general population and high-risk groups is to be undertaken three times during the period 2001 2005. To provide an independent evaluation of NACP-II activities, an external agency was contracted for BSS. ORG-CSR was identified for this purpose and will be involved in conducting a baseline, mid-term and end evaluation by BSS in the general population and the high-risk groups.
- The present report details the observations of the national baseline BSS survey among high-risk groups, Men who have Sex with Men (MSM) and Injecting Drug Users (IDU), which was conducted in 5 cities/States across the country. This baseline provides basic information needed to strategize and prioritize programs under NACP-II during its five years of implementation.

# 2.0 Methodology and Sampling Design

- Among MSM, the survey was carried out across the five locations of Delhi, Kolkata, Mumbai, Chennai and Bangalore. Among IDUs, it was carried out in Delhi, Kolkata, Mumbai, Chennai and Manipur.
- A total of 1387 MSM and 1355 IDU were interviewed across all the sampling units. A
  two-stage cluster sampling design was adopted for selecting respondents for both the
  target categories. In Manipur, a three-stage cluster sampling design was adopted for
  selecting respondents among injecting drug users.
- Fieldwork was initiated in mid February 2002 and was completed by end March 2002. The entire fieldwork for both the target groups was carried out simultaneously in almost all locations.
- Standardisation and uniformity during the survey were ensured by conducting a
  training of key trainers workshop in Delhi, organised by the technical group at
  NACO. Extensive six-day training for supervisors and investigators was organised in

each city/State. Schedules were back translated and tight quality control was maintained during data collection. Teams were briefed every morning and debriefed every evening during data collection.

• Data entry was done in the ISSA package at four locations in the country while the final data analysis was done using the SPSS (10.0) software in Delhi. Adequate checks were built in at data entry and data analysis stages to ensure data quality.

## 3.0 RESULTS AND DISCUSSION

#### 3.1 Men who have Sex with Men

# 3.1.1 Profile of Men who have Sex with Men

- The operational definition of the respondents was Men who had sex (manual/oral/anal) with other men in the past six months.
- At the national level, a total of 1387 interviews were completed.
- Overall, 42% of the respondents were aged 19–25 years while 39%were in the age group of 26-35 years. Only 5% of the respondents were aged below 19 years. The mean age of all respondents was 28 years (SD 7.4).
- About 9 percent of the sampled respondents were illiterate. Nearly 11% studied up to the primary level. About 19% of the respondents had completed secondary education.
- At the aggregated level, there were more respondents engaged in service (21%), self-employment (13%) and petty business/ small shop owner (13%) than other primary occupations. Casual non-agricultural and skilled/semi-skilled laborers constituted about 11% of the total respondents. Respondents engaged in transport related activities were about 8%, while 7% were students and 13% were unemployed.
- Cumulating responses across the five locations it was observed that about one-third of the respondents had married a female partner. This proportion was highest in Delhi (46%) and lowest in Mumbai (29%).
- Nearly two-thirds (64%) of the respondents were not currently married nor living with any female partner. One-fourth (26%) of the respondents were currently married and living with their wives (female).
- Most of the respondents (95%) were staying in the same city where they were interviewed. Among local residents, about two-third (67%) said that they were living there since birth. Overall, about 15 percent respondents reported to be living alone and about 94% were staying at their regular residence.
- More than half the respondents (57%) said that they usually traveled to other places, of whom, 17% said that they traveled at least fortnightly. About 20% respondents said that they traveled out at least once in a month. These trips were usually meant for socializing with relatives / friends (47%) or for pleasure (27%).

- Around two-thirds (67%) of the respondents reported ever having consumed alcohol. Nearly 16% consumed alcohol everyday followed by 35% who consumed at least once in a week and 28% who consumed once a fortnight. More than one-third (36%) regularly took alcoholic drinks prior to sex.
- Intoxicating drug use was reported by nearly 13% of the total respondents. Of them, about three-fourths (76%) reportedly tried *Ganja*, 42% mentioned *Bhang*, 8% had tried *Afim* and consumption of brown sugar and heroin was reported by 4% each. A significant proportion (12%) had also reported injecting addictive drugs without a medical prescription within the last 12 months.

# 3.1.2 Awareness of HIV/AIDS

- Most of the respondents (97%) across all the five selected cities, reported that they had heard of HIV/AIDS.
- A high proportion of respondents (83%) reported that the correct and consistent use of condoms could protect from HIV.
- Overall, around three-fourths of the respondents reported that having one uninfected faithful sex partner could protect from HIV (73%). Awareness was maximum in Mumbai (95%) and minimum in Bangalore (62%).
- Nearly 69% of the respondents were aware of two methods of prevention i.e. consistent condom use and sex with a mutually faithful partner. The proportion was high in Mumbai (87%) and Chennai (74%).
- About 84% of the respondents were aware that HIV is not transmitted through sharing a meal with an infected person.
- About 78% of the respondents reported to be aware that HIV is not transmitted through mosquito bites. The variation across the cities was considerable and varied from 55% in Kolkata to 89% in Bangalore.
- Nearly three-fourths (71%) of the respondents were reportedly aware that a healthy looking person might be suffering from HIV. This varied from 89% in Mumbai to 55% in Bangalore.
- Around half the respondents could correctly identify all three issues (54%).

# 3.1.3 Awareness of STD, Self Reported STD prevalence, and treatment seeking behavior

• Most of the MSM (79%) had heard of sexually transmitted diseases. This proportion was as high as 94% in Delhi.

- Besides genital discharge and genital ulcer / sore, nearly three-fourths (73%) of the respondents were aware of other important STD symptoms in men. Similarly, about two-thirds (65%) were aware of other important STD symptoms in women.
- Overall, about 16% of the respondents reported that they suffered from genital discharge while 24% of the respondents reported genital ulcer/sore and around 30 % had burning pain during urination in last 12 months. About 41% of respondents reported that they suffered from at least one of the above mentioned symptoms in the past 12 months while about 22% reported more than one symptom. 9% of respondents reported that they suffered from either genital discharge or ulcer/sore in last 12 months.
- Around 44% and 28% of the respondents reportedly visited private hospital/clinic and government hospital/clinic respectively during the last episode. Around 14% of respondents purchased medicine from chemist shops and an almost equal proportion (15%) went to NGO peer educators. About 11% of the respondents took home-based remedies and one-tenth did not take any treatment.
- About 81% of the respondents took allopathic medicine to treat the symptoms of STD. About 11% of the respondents took Ayurvedic/ herbal treatment while 3% took homeopathic medicine.
- Overall, more than half the respondents (54%) reported that they would seek treatment from a private hospital/clinic as compared to 28% of the respondents who preferred going to a government hospital/clinic. About 13 % of the respondents reported that they would approach an NGO peer educator for future STI episodes. Only 1% of the respondents preferred home based remedies

# 3.1.4 Sexual behaviour and condom usage

- Overall, 31% of the respondents had sexual intercourse with any female partner in the last 6 months. This varied from 8% in Bangalore to 52% in Delhi. The mean number of female partners in the last 6 months was 2.4. This was as high as around 5.8 in Bangalore and as low as 1.2 in Kolkata.
- The mean age at first sex with any male partner was 17 years. Around 32% of the respondents reported their age at first sex with any male partner as less than 15 years. Only about 4% of the respondents reported that they had their first sex after the age of 25 years.
- Overall about 47% of respondents reported their friends as their first male partners followed by 22% and 16% of respondents who reported neighbours and relatives respectively. 10% of the respondents reported a commercial partner and/or co-worker as their first male partner.
- The median age at first sex with any commercial male partner was 19 years. It was 16 years in case of non-commercial partners.

- Across the country 36% of respondents reported that they had sex with a commercial partner during the last one month prior to the survey. Nearly 80% of respondents reported sex with non-commercial partners during the last one month prior to the survey.
- The mean number of commercial and non-commercial male partners in the last one-month was 9.1 and 5.2 respectively. The mean number of commercial male partners in the last one month ranged from 6.1 in Bangalore to as high as 13.7 in Chennai, whereas the mean number of non-commercial male partners ranged between 5.1 in Bangalore to 8.3 in Chennai.
- The mean number of commercial and non-commercial male partners in the last 7 days was reported as 3.8 and 2.3 respectively. The mean number of commercial male partners in the last 7 days varied from 3 in Bangalore to 5.2 in Chennai, whereas the mean number of non-commercial male partners ranged between 1.8 in Delhi and Mumbai to 2.4 in Chennai.
- Overall, 39% of the respondents reported using condoms last time they had sex with any commercial male partner. 53% of the respondents reported using condoms last time they had sex with non-commercial male partners.
- Overall about 13% of the respondents reported that they used condoms consistently with all commercial partners in the last one month. In all, about 30% of the respondents reported consistent condom use with their non-commercial male partners.
- Queried on reason for not using condoms with commercial partners, 33% stated that their partners did not like to use condoms, while an additional 27% stated that they did not think condoms were necessary. 22% respondents stated that they did not use condoms as their partners objected.
- Perceptions regarding non-use of condoms with non commercial partners were different compared to reason cited for commercial partners. 59% did not use condoms because they did not feel it was necessary. Interestingly, 86% did not use condom, because either the partner did not like condom (53%) or partners objected to condom use (33%).

#### 3.1.5 Other Salient Observations

- Nearly 29% of the respondents reported that they perceived themselves to be at moderate risk of getting HIV while 27% felt that their chances were very high and 18% respondents reported that they had "no chance" of getting infected.
- In all, about 70% of the respondents reported that it was possible for them to get a confidential test done to find out if they were infected with HIV. Overall 35% of the respondents reported having undergone an HIV test. The variation across the cities ranged from a low of 6% in Kolkata to a high of 65% in Mumbai.
- Overall nearly half (52%) the respondents had some inter-personal communication on STI/HIV/AIDS in the past one-year. The proportion varied from 85% in Chennai to

12% in Kolkata. Nearly one–fourth (26%) of the respondents had attended/participated in campaign on STI/HIV/AIDS in the past one year.

# 4.2 Injecting Drug Users

# 4.2.1 Profile of the IDUs

- Operational definition of the respondents was Men and Women who have injected drugs in the past three months.
- At the national level a total of 1355 interviews were completed.
- Overall, about three-fourths of the IDUs were aged between 19 to 35 years. The mean and median age of the respondents were 31 years and 30 years respectively.
- Nearly one-third of all the respondents were illiterate or had no formal schooling. Nearly 19% studied beyond secondary level (grade XII).
- Overall, nearly 42% of the respondents reported that they had ever been married. The mean age at marriage was 23 years.
- Nearly three-fifths of the IDUs reported that they were not married and not living with any sexual partner. About 27% of the respondents were currently married and living with their spouse.
- Overall, about one-fourth of the respondents were non-agricultural or casual laborers. Nearly 20% of all the respondents were unemployed or retired, 13% were petty business/small shop owners, 8% were transport workers and 6% were students.
- Nearly 95% of the IDUs reported that they were living in the city where they were interviewed. Overall, about 69% of the IDUs interviewed were living in the city since birth. About 36% respondents were staying alone, and this proportion was significantly higher in Mumbai (65%) as compared to the same in the other four locations.
- Nearly three-fourths of all the IDUs interviewed reported that they consumed alcohol. Of these, 12% consumed alcohol everyday. This proportion was as high as 62% in Manipur.

# 4.2.2 Drug Use

Overall, mean as well as median age of starting use of any addictive drug was 20 years. Nearly one-fifth of the respondents reported starting using any addictive drug below 16 years of age.

- o The mean duration of injecting drugs was 56 months (approximately), i.e. four years and eight months. The mean varied from 92.6 months in Kolkata to around 35 months in Mumbai.
- o Nearly one-third of all the IDUs started injecting drugs between 21 25 years of age. The mean age of starting injection (of drugs) was around 26 years.
- o More than 60% injected drugs more than 2-3 times in a day. 16% injected at least 4 times a day.
- Over half the respondents reported injecting buprenorphine (53%) usually as cocktail, followed by 34% who injected heroin, 22% who injected crack, 6% who injected dextroproxyphene, 3% who injected tranquilizers and 1% who injected a cocktail of heroin and cocaine. In Mumbai crack was mostly injected with Avil.

# 4.2.3 Needle and Syringe sharing behavior

- Around 41% respondents reported using previously used needles/syringes. This proportion was the highest in Chennai (62%) and lowest in Kolkata (23%).
- About 4% respondents reported sharing every time they injected in the past one month while 44% never shared needles/syringes while injecting in the past one month.
- Overall, 43% respondents reported cleaning every time they injected in the past month and 3% never cleaned needles/syringes while injecting during the same reference period.
- Nearly 83% respondents who cleaned needles in the past month reported using cold water for cleaning, while 8% used hot water, around 2% used bleach or alcohol respectively and 1% boiled the needles/syringes.
- Overall 45% reported using an unused needle every time and 5% never used an unused needle/syringe in the past month.
- Nearly 44% of respondents never gave/rented/sold used needles/syringes in the past month. A significant proportion (33%) occasionally gave/rented/sold used needles/syringes and 6% always indulged in this practice.
- Cumulative data from all sites shows that 97 percent of respondents could obtain new/unused needles/syringes when they needed them. Nearly all respondents (99%) knew a person/place from where they could obtain new/unused needles/syringes when they needed them. At an overall level, most respondents reported pharmacist/chemist (94%) as the source for obtaining new/unused needles/syringe.
- Nearly 20% respondents had injected drugs from a pre-filled needle/syringe in the past one month. This proportion was significantly lower in Kolkata (9%) but nearly a third of the respondents in Chennai (29%) and Manipur (29%) reported this behavior.

- Overall, nearly two thirds of respondents reported that they never injected drugs by squirting from another used syringe in the past 1 month (69%). Only 1% respondents reported that they injected drugs after squirting from another used syringe every time in the past month.
- More than half the respondents reported never sharing a cooker / vial / container / filter / rinse water for boiling in the past one month. However, around 21% shared occasionally and 9% shared every time.
- Around 43% respondents never drew drugs from a common container in the past month while 7% reported such a practice every time.
- Over half the respondents had never received treatment for drug use (55%). However, a high proportion of respondents had received treatment at some point of time but they were not currently receiving any treatment (37%). The proportion currently receiving treatment was only 8%.
- Overall, among all respondents who had ever received treatment the commonly reported modes were either counseling (41%) or detoxification (39%). The other types of treatment reported were helped/forced to quit cold turkey (27%), residential rehabilitation (20%), drug substitution (13%), and treatment of abscess and health education (12% each). Around 10% reported going to self help groups.

#### 4.2.4 Awareness of HIV/AIDS

- The proportion of respondents who had heard of HIV/AIDS was significantly high across the country (97%).
- Overall, 84 percent of the respondents among those who were aware of HIV/AIDS reported that consistent condom use could prevent HIV. Awareness levels were 90% in Manipur and Mumbai, but were significantly lower than the all India proportion in Kolkata (70%).
- Nearly three fourths of respondents aware of HIV/AIDS were aware that HIV could be prevented by having one, faithful and uninfected partner (71%). This proportion was significantly higher in Mumbai (83%) and relatively lower in Delhi (60%) and Kolkata (60%).
- Overall, the proportion aware that switching to non-injecting drugs could prevent HIV was 55%. The proportion aware of this form of harm reduction was higher in Chennai (74%) and Mumbai (71%) compared to Manipur (42%) and Delhi (36%).
- Around two thirds of the respondents had correct knowledge of both methods of prevention (65%) (I.e. consistent condom use and having a faithful and uninfected partner). Awareness levels were 80% in Mumbai, but were significantly lower in Kolkata (45%) and Delhi (53%).

• The proportion of respondents who were aware that HIV could not be transmitted through sharing a meal with an infected person was 69%. Overall, the proportion of respondents aware that HIV cannot be transmitted through mosquito bites was 67%. The proportion of respondents who were aware that a healthy looking person could be suffering from HIV was 71%. Less than half the respondents could correctly identify all three issues (43%).

# 4.2.5 Awareness of STD, STD prevalence, and treatment seeking behavior

- Around three-fourths of the respondents had heard of STD (76%). This proportion was significantly higher in Kolkata (88%) and Manipur (84%).
- Overall, less than a third of the respondents aware of STD were aware of other STD symptoms among women (59%) and around a third were aware of other STD symptoms among men (67%).
- Overall, 11 percent of respondents reported genital discharge in the past 12 months and 12% reported ulcer/sore in the genital area in the past 12 months. 20% reported burning/pain during urination. Nearly 12% of all respondents had suffered from more than one symptom and a fourth of all respondents had suffered from at least one STD symptom in the past 12 months (26%). Overall, 17% respondents reported that they suffered from ulcer/sore or genital discharge in the past 12 months.
- About 37 percent of the respondents, who reported any symptoms of STD, did not take any treatment during the last episode, while 20 percent respondents purchased medicines from a chemist shop. The proportion of respondents who visited any private hospital / clinic and government hospital / clinic last time were 18% and 17% respectively. About 13% of the respondents reported taking some home based remedy.
- More than half the respondents reported that they would seek treatment from a government hospital/clinic (61%) as compared to about 23% of respondents citing private hospital/clinic as their preference if they suffered from any symptom of STD in the future. Around 7% of all respondents reported that they would seek treatment from an NGO peer educator.

# 4.2.6 Sexual behavior and condom usage

- Overall, nearly 87 percent of all respondents ever had sexual intercourse.
- A significant proportion (66%) of the respondents had their first sex at the age of 16-21 years and 12% had sexual intercourse before 15 years sex. The mean age was 19.4 years while the median age was 19 years.
- It was observed that 16% of all respondents had sex with a commercial partner in the last 12 months while 10% reported sex with "non-regular partners" during the same

period and over one fourth of the respondents (27%) reported having sex with regular partners in the last 12 months.

- The mean number of commercial, non-regular and regular female partners was 4.6, 2.0 and 1.0 respectively. The median was 3.0, 1.0 and 1.0 respectively.
- Around 60% respondents' who had sex with a commercial partner in the last 12 months reported using a condom at last sex. Around a third of the respondents' who had sex with non-regular partners in the last 12 months reported using a condom at last sex (34%) and this proportion was similar for those who had sex with their regular partners (34%).
- Around a third of those respondents' who had sex with commercial partners in the last 12 months reported consistent condom use (32%). Around 12% of the respondents' who had sex with non-regular partners in the last 12 months reported consistent condom use while it was 6% with regular partners.

#### 4.2.7 Other Salient Observations

- Overall, about 35% respondents felt that they were at a very high risk of contracting HIV and about 20% felt that they only had a moderate chance. Slightly over a fourth felt that they had a low chance of contracting HIV/AIDS while 17% felt that they had no chance of contracting HIV/AIDS.
- Around 60 percent of the respondents reported that it was possible for them to get a confidential test to find out if they were infected with HIV. One fourth of the respondents reported that they had ever undergone an HIV test (26%). Over half the respondents, who had been tested, undertook it voluntarily (56%), except in Mumbai where this proportion was 32%. Overall, around 79% respondents found out the result of their HIV test.
- The proportion of respondents attending /participating in any campaign / meeting on STD/HIV/AIDS was lower (27%) than those who received interpersonal communication on STD/HIV/AIDS (50%). Across the sampling units, around 13 percent respondents reported receiving free medical treatment for STD/HIV/AIDS.

# CHAPTER – I INTRODUCTION

This report is a sequel to the earlier report on National Baseline Behavioural Surveillance Survey (BSS) among Female Sex Workers and their Clients (Part- I). Readers interested in accessing details on the role of BSS in the National AIDS Control Programme in India are requested to refer to the report on National Baseline Behavioural Surveillance Survey (BSS) among Female Sex Workers and their Clients (Part- I).

#### 1.1 BACKGROUND

The human immunodeficiency virus (HIV), which causes Acquired Immuno Deficiency Syndrome (AIDS), has brought about a global pandemic far more extensive than what was predicted even a decade ago. UNAIDS and WHO estimates show that the number of people living with HIV or AIDS globally at the end of the year 2001 stood at 40 million.

It is estimated that about 7.1 million people are living with HIV/AIDS in Asia and the Pacific in 2001. The epidemic claimed the lives of 4,35,000 people in the region in 2001. It has been estimated that nearly **3.97 million** people in India were HIV infected at the end of 2001. HIV infections have been reported from all States and Union Territories.

#### 1.2 INDIA'S RESPONSE TO THE AIDS CHALLENGE

In India, the first few cases of HIV infection were reported in 1986. Government of India took a serious note of the problem and initiated a series of important measures to tackle the epidemic. A high-powered National AIDS Committee was immediately constituted in 1986. In 1991 a "Strategic Plan for Prevention and Control of AIDS in India" was prepared for the five-year period 1992-1997 with support from The World Bank, WHO and other international donor agencies. For combating the challenge of the HIV/AIDS epidemic effectively, the Government of India established National AIDS Control Organization (NACO) in 1992.

# 1.3 MONITORING AND EVALUATION OF THE NACP-II

Under the second phase of the National AIDS Control Project (NACP-II), an extremely important feature is concurrent monitoring and evaluation (M & E) of the program activities.

For effective monitoring and evaluation to assess the implementation of the Phase-II of the National AIDS Control Project at National and State level, conducting baseline, midterm and final evaluation through Behavioral Surveillance Survey (BSS) has been given prime importance. The responsibility has been contracted to ORG Centre for Social Research (ORG CSR).

## 1.4 OBJECTIVES OF THE PRESENT STUDY

The National AIDS Control Organization commissioned this study for establishing baseline parameters related to:

- 1. General Population
- 2. Bridge Populations
- 3. High Risk Population Groups

The present report provides the detailed findings of the baseline survey conducted among the two high-risk population groups of Injecting Drug Users (IDU) and Men having Sex with Men (MSM) seeking their present status on awareness, knowledge, attitude and behavior with regard to STD/HIV/AIDS. The detailed methodology/sampling design of this National Baseline BSS Survey is discussed in Chapter II.

# CHAPTER - II METHODOLOGY AND SAMPLING DESIGN

This chapter presents an overview of the methodology and sampling design of National Baseline HIV/AIDS risk Behavioral Surveillance Survey (BSS) among Men having Sex with Men (MSM) and Injecting Drug Users (IDU).

#### 2.1 TARGET RESPONDENTS

After considering all possible options, the following respondent target groups were decided based on the prevention efforts that are either currently underway or planned for in the future:

- Men who have Sex with Men in the past six months
- Intravenous Drug Users who have injected an illegal or non-prescribed drug in the past three months

Among Men who have Sex with Men, it was decided that the survey would be carried out across the five locations of Delhi, Kolkata, Mumbai, Chennai and Bangalore. Among injecting drug users, it was decided that the survey would be conducted in Delhi, Kolkatta, Mumbai, Chennai and Manipur. The selection of sites was based on the estimated size of these groups in different towns/cities and on achieving a regional representation.

#### 2.2 CORE INDICATORS

ORG CSR research team finalized the list of core indicators in consultation with NACO, SACS and members of the technical working group.

## 2.3 COVERAGE OF THE SURVEY

The survey among Men who have Sex with Men was carried out across the following 5 locations:

- 1. Delhi
- 2. Mumbai
- 3. Kolkatta
- 4. Chennai
- 5. Bangalore

The survey among Injecting Drug Users was carried out across the following 5 locations:

- 1. Delhi
- 2. Mumbai
- 3. Kolkata
- 4 Chennai
- 5. Manipur

#### 2.4 DEVELOPMENT OF RESEARCH INSTRUMENT

ORGCSR research team developed separate semi-structured questionnaire schedules for the target groups to collect all the necessary information. The draft questionnaire for pre-testing in the field was finalized in consultation with NACO and members of the Technical Working Group.

#### 2.5 PRE-TESTING THE RESEARCH INSTRUMENT

The questionnaires were translated into vernacular for each location. Back- translation was also undertaken. ORG CSR core research team members undertook a small-scale, rapid qualitative research study. This involved a small number of target respondents, to develop a comprehensive understanding of the correct terminology for ensuring that the original meaning of the question was not lost. A project orientation workshop was organized in Delhi for all the core research team members of ORG CSR who were involved in this research project. The Technical Working Group organized a training of trainers (TOT) workshop in Delhi for the core research team of ORG CSR and all research professionals as well as field executives who coordinated the project at the State level.

Pre-testing of the MSM questionnaire was undertaken in Kolkata while the IDU questionnaire was pre-tested in Delhi. About 40 interviews were conducted across these two locations. The questionnaire was finalized in consultation with NACO and Technical Working Group members based on the feedback of the pre-test.

#### 2.6 TRAINING OF FIELD TEAMS

Field personnel were drawn from two sources. Experienced investigators and supervisors with prior experience of working on similar research projects with ORG CSR were recruited across all States where sampling units were located. At the same time, many of the NGOs working among MSM and IDU categories, with whom ORG CSR had built up a partnership after extensive networking, also provided their outreach workers for carrying out the survey. However, to ensure quality control, supervisory responsibility was vested with ORG CSR's permanent field staff. Intensive training was organized at each location for training investigators and supervisors thoroughly on the final questionnaires, interview techniques and appropriate recording of responses. One day's field visit during the training workshop provided useful insights to each investigator and supervisor about the approach and field methodology to be adopted for successfully carrying out the survey. Mock calls were also undertaken during the training. An STD specialist was also invited as the resource person in each location to sensitize investigators and supervisors on STD.

#### 2.7 SAMPLE SIZE CALCULATION

Before calculating the required sample sizes, the following points were considered:

The procedures presented are intended for surveys where the primary objective is to measure changes in selected behavioral indicators over time.

The sample size required per survey round for the measurement of change on a given variable is a function of five factors:

- i) The initial or starting level of the key variable
- ii) The magnitude of change that needs to be detected reliably
- iii) The level of significance
- iv) The power of estimation
- v) The proportion of the population of interest that is eligible to be considered for the key variable

An expression for the required sample size for a given sub-population for each survey round is given by:

$$n = D \frac{\left[Z_{1-\alpha}\sqrt{2 P(1-P) + Z_{1-\beta}\sqrt{P_1(1-P_1) + P_2(1-P_2)}}\right]^2}{(P_2-P_1)^2} \dots (S)$$

where

n = the required sample size

D = design effect

 $P_1$  = the estimated proportion at the time of the first survey

 $P_2$  = the target proportion at some future date, so that  $(P_2 - P_1)$  is the magnitude of change to be detected

$$P = (P_1 + P_2) / 2$$

 $Z_{1-\alpha}$  = the Z – score corresponding to the desired level of significance

 $Z_{1-\beta}$  = the Z – score corresponding to the desired level of power

The following table shows different target groups covered in the survey, key variables to be measured, estimated baseline value of the key variables and sample size.

Target Groups	Key Variable	Estimated baseline value of key indicator	Domains	Estimated midterm value	Sample Size
Men who have Sex with Men	Consistent condom use with non-commercial partners in past 3 months	50%	Each City	65%	267
Intravenous Drug Users	Consistent use of needles that no one else used in past one month	50%	Each City/ State	65%	267

Assumptions made in the formula (S) are:

D = 2

 $Z_{1-\alpha}$  = 1.645 (Corresponding to 95% confidence level)

 $Z_{1-\beta} = 0.84$  (Corresponding to 80% power of estimate)

Estimated proportion at the time of the baseline survey  $(P_1) = 50\%$ 

Target proportion which NACO is aiming to achieve at mid-term  $(P_2) = 65\%$ 

#### 2.8 SAMPLING PROCEDURE

The following sections detail out the specific sampling designs adopted for the two target groups.

#### 2.8.1 Men who have Sex with Men (MSM)

The following Two-Stage Cluster Sampling Design was adopted for selecting target respondents in each location:

STAGE I : Selection of Sites

STAGE II Selection of Target Respondents

STAGE I: Selection of Sites (Clusters)

The steps followed in the selection of sites for MSM target groups were as follows:

Step 1 : The list of sites, arranged geographically, was prepared.

Step 2 : The sampling interval (SI) was calculated by dividing the total

number of sites (M) by the number of clusters to be selected (a)

i.e. SI = M/a.

Step 3 : A random number (RS) between 1 and SI was selected. The site

on the numbered list corresponding to the number was the first

sample cluster.

Step 4 : Subsequent units were chosen by adding the sampling interval

(SI), to the number identified in step 3.

Step 5 : This procedure was followed until the list was exhausted.

# STAGE II: Selection of Target Respondents

The field team reached the selected site at the beginning of the peak hour. If the number of MSM present at that point of time was more than the required number, a quick listing exercise was carried out using type/color of clothes of the target respondents and the required number of respondents was randomly selected from the list. But, if the number of target respondents was less than or equal to the required sample size to be covered at the site, all of them were approached for the interview.

## 2.8.2 Injecting Drug Users (IDU)

The following Two-Stage Cluster Sampling Design was adopted for selecting target respondents in Delhi, Mumbai, Kolkata and Chennai. Only in Manipur a Three-Stage Cluster Sampling Design was adopted, the first stage being the selection of cities.

STAGE I : Selection of Sites

STAGE II Selection of Target Respondents

## STAGE I: Selection of Sites (Clusters)

The steps followed in the selection of sites for IDU target groups were as follows:

Step 1 : The list of sites, arranged geographically, was prepared.

Step 2 : The sampling interval (SI) was calculated by dividing the total

number of sites (M) by the number of clusters to be selected (a)

i.e. SI = M/a.

Step 3 : A random number (RS) between 1 and SI was selected. The site

on the numbered list corresponding to the number was the first

sample cluster.

Step 4 : Subsequent units were chosen by adding the sampling interval

(SI), to the number identified in step 3.

Step 5 : This procedure was followed until the list was exhausted.

# STAGE II: Selection of Target Respondents

The field team reached the selected site at the beginning of the peak hour. If the number of IDU present at that point of time was more than the required number, a quick listing exercise was carried out using type/color of clothes of the target respondents and the required number of respondents was randomly selected from the list. But, if the number of target respondents was less than or equal to the required sample size to be covered at the site, all of them were approached for the interview.

## 2.8.3 Achieved Sample Sizes

The following table presents achieved sample sizes of the target respondents across different locations:

**Table 2.1: Achieved Sample Sizes** 

Sl. No.	State/State Group	IDU	MSM
1.	Bangalore		270
2.	Chennai	271	272
3.	Delhi	274	299
4.	Kolkatta	230	270
5.	Manipur	310	
6.	Mumbai	270	276
	All India	1355	1387

#### 2.9 FIELDWORK

The fieldwork was initiated in mid February 2002 and was completed by end March 2002. The entire fieldwork for both the target groups was carried out simultaneously in almost all locations. As mentioned earlier, field teams consisted of experienced investigators and supervisors from ORG CSR and NGO outreach workers. Involvement of NGO outreach workers was felt important to gain access to MSM and IDU communities, which were perceived to be hard to reach target groups. Moreover,

it was observed during the pilot survey that respondents belonging to these target categories, particularly MSM, were much comfortable with an interviewer belonging to the same community. However, for avoiding any subjective/objective bias in interviews, all outreach workers were thoroughly trained during the training workshop, supervised very closely by ORG CSR field supervisors in the field and sent to a site (for fieldwork) where they were not known or not involved in any intervention project. To eliminate bias, the selection of respondents to be interviewed was decided by the ORG-CSR representatives and not by the NGO outreach workers.

The core research team members and senior field professionals of ORG CSR made a number of field visit across different survey locations for ensuring high quality of survey data. Field supervisors made at least 20% spot checks to ensure completeness and accuracy of the filled up questionnaires. Detailed manual scrutiny of the filled up questionnaires as well as the coding exercise was initiated by field supervisors during the fieldwork itself. NACO representatives and members of the Technical Working Group also made several field visits across different parts of the country and provided their valuable inputs.

#### 2.10 DATA MANAGEMENT AND DATA ANALYSIS

Data were entered in the Integrated System for Survey Analysis (ISSA) package. This package was preferred due to its inbuilt capacity of making range and consistency checks. Data were analyzed using SPSS (10.0) package. Estimates of all the key variables including the core indicators for different target groups have been calculated and presented in the following chapters.

#### 2.11 QUALITY ASSURANCE MECHANISM

The core research team of ORG CSR made all efforts for maintaining high quality of output at every stage of the project. During the fieldwork core team members and senior field professionals made regular field visits for quality control. Each field supervisor carried out a minimum of 20% spot checks for ensuring accuracy of the collected information. Moreover, members of the Technical Working Group and NACO officials also visited the field and during training/data collection and provided their valuable inputs and feedback. The questionnaires were manually scrutinized and coded in the field itself for ensuring a high quality of data.

# CHAPTER – 3 MEN WHO HAVE SEX WITH MEN

#### 3.1 BACKGROUND

Acknowledged as an important link in HIV/AIDS transmission, Men who have Sex with Men (MSM) are one of the key target groups for any intervention project. The National Baseline BSS survey among high risk and bridge groups thus included this group to obtain baseline information on prevalence of STD, their treatment seeking behavior, their sexual behavior and condom usage, beside other salient observations pertaining to their risk behavior and prevention of HIV/AIDS.

#### 3.2 RESPONDENTS' PROFILE

The respondents' profile is composed of some important classificatory variables (age, education, marital status, and occupation) and information pertaining to their place of stay and intoxicating substance use.

# 3.2.1 Age of the respondent

Table 3.1 presents the age distribution of respondents across the five survey locations. At an overall level, a sizable proportion of the respondent (42%) was aged between 19–25 years. Almost an equal proportion (39%) was aged 26-35 years. The mean age of the respondents was 28 years (SD +/- 7.4). The median age was 26 years (range 12-60 years)

**Table 3.1: Age Distribution of the Respondents** 

(All figures are in percentages)

					(An figures are in percentages)					
City	City Age Groups (In Years)		Mean Std		Median	Range				
	<19	19-25	26-35	36-45	45+		Deviation		Minimum	Maximum
Bangalore	5.2	39.3	42.6	10.4	2.6	27.5	7.3	26.0	16	55
Chennai	3.7	40.4	40.4	12.9	2.6	28.1	7.2	26.0	16	60
Delhi	4.0	39.1	38.8	15.1	3.0	28.5	7.8	27.0	12	60
Kolkata	7.0	40.4	37.8	10.0	4.8	27.8	8.2	26.0	14	54
Mumbai	4.3	50.7	36.2	6.9	1.8	26.2	6.5	25.0	16	54
Total	4.8	42.0	39.1	11.1	3.0	27.7	7.4	26.0	12	60

Base : All Respondents

## 3.2.2 Educational Level of the Respondent

The literacy status of respondents is shown in Table 3.2.

A fifth of the respondents (18.5%) were educated beyond secondary school. Only 9 percent of the sampled respondents were illiterate.

The proportion of illiterate respondents was relatively more in Chennai (15%) and Delhi (13%) compared to Mumbai (3%) and Kolkata (6%). About one-fourth (25%) of the respondents in Mumbai and Delhi had studied beyond the Secondary school level.

**Table 3.2: Educational Level of the Respondents** 

(All figures are in percentages)

City	Educational Level								
	Illiterate*	Primary (1-4th)	Middle (5-7th)	Secondary (8-10th)	Higher Secondary (11-12th)	12 <sup>th</sup> +			
Bangalore	8.9	8.9	10.4	28.5	23.7	19.6			
Chennai	15.1	14.0	15.1	23.9	15.1	16.9			
Delhi	13.0	12.4	18.4	19.4	11.4	25.4			
Kolkata	5.9	11.1	10.0	21.5	47.0	4.4			
Mumbai	2.9	6.2	10.9	30.4	24.3	25.4			
Total	9.2	10.5	13.0	24.7	24.0	18.5			

Base: All Respondents

# 3.2.3 Occupation of the Respondents

Data pertaining to the primary occupation of the MSM respondents in all five cities is depicted in Table 3.3.

Overall, 20.8% were engaged in service while 13% each were self employed or petty businessmen. In Mumbai, a significant proportion (40.9%) was engaged in service. Cumulated across locations, 7% respondents were students.

Unemployed MSM were higher in Bangalore and Kolkata (17% and 15% respectively) as compared to the other locations.

**Table 3.3: Main Occupation of the Respondents** 

(All figures are in percentages)

City	Main Occupation								
	Service	Self employed professional/Service	Petty Business/small shop owner	Unemployed /not working/ retired	Student	Others			
Bangalore	16.7	7.8	15.2	17.0	8.5	34.8			
Chennai	16.9	1.1	16.5	9.6	4.0	51.7			
Delhi	25.8	6.0	14.4	12.0	4.3	37.1			
Kolkata	3.0	29.3	10.4	14.8	11.9	30.8			
Mumbai	40.9	21.4	8.0	9.8	8.7	11.2			
Total	20.8	13.0	12.9	12.6	7.4	33.3			

Base: All Respondents

## 3.2.4 Marital Status of the Respondents

The MSM respondents were asked whether they were ever married to a female partner and their age at marriage with such partners. The responses are tabulated in Table 3.4. This table shows that at an aggregated level, about one-third of the respondents reported having been ever married to a female partner. This proportion was highest in Delhi (46%) and lowest in Mumbai (29%).

<sup>\*</sup> Includes those respondents who can read and write but have no formal education

About half (45%) of the ever-married respondents got married at an age of 22 to 25 years while nearly one-third (32%) got married before they were 22 years old. The mean age at marriage for all ever - married respondents across the five survey locations was 23 years. This was lowest in Delhi (22 years) and highest in Chennai (24 years).

Table 3.4: Marital Status and Age at Marriage

(All figures are in percentages)

City	Ever been married to a female partner		Age a	t Marri	age		Mean	Median	Standard Deviation	Ra	nge
	N	%	< 18	18-21	22-25	25+				Minimum	Maximum
Bangalore	80	29.6	5.0	25.0	53.8	16.3	22.6	23.0	3.8	10	29
Chennai	103	37.9	1.9	16.5	49.5	32.0	24.4	24.0	3.9	10	45
Delhi	138	46.2	6.5	34.8	44.2	14.5	22.1	22.0	3.5	10	31
Kolkata	65	24.1	13.8	23.1	35.4	27.7	22.8	23.0	4.5	15	34
Mumbai	79	28.6	3.8	29.1	41.8	25.3	23.1	23.0	3.3	13	31
Total	465	33.5	5.8	26.5	45.4	22.4	23.0	23.0	3.8	10	45

Base : All Respondents for "Ever Married" Married Respondents for "Age at Marriage"

## 3.2.5 Status of Sexual Partnerships

Table 3.5 shows that nearly two-thirds (64%) of the sample reported not being currently married nor living with any female partner at the time of the survey. This proportion varied from 75% in Kolkata to 52% in Delhi. Slightly more than one-fourth (26%) of the respondents were currently married and reportedly living with their wives (female). This proportion was highest in Delhi (34%) and lowest in Kolkata (19%).

**Table 3.5: Status of Sexual Partnerships of the Respondents** 

(All figures are in percentages)

City	Sexual Partnership Status								
Currently married and living with spouse (female)		Currently married and living with other female sexual Currently married and not living with spouse or other female		Currently married	Not Currently married and living with female sexual	Not Currently married and not living with female sexual partner			
		partner	sexual partner		partner	_			
Bangalore	25.2	2.6	1.9	29.7	3.7	66.7			
Chennai	30.9	1.8	5.1	37.8	0.4	61.8			
Delhi	34.1	0.3	11.7	46.1	2.3	51.5			
Kolkata	18.9	0.7	4.4	24.0	0.7	75.2			
Mumbai	21.0	0.4	7.2	28.6	6.5	64.9			
Total	26.2	1.2	6.2	33.6	2.7	63.7			

Base: All Respondents

# 3.2.6 Residential Status of the Respondents

The residential status of the respondents is shown in Table 3.6. The Table reveals that most of the respondents (95%) were staying in the same city where their interview

was conducted. The exception was Kolkata where nearly a fourth of the respondents were not living in the city. Among local residents, about two-third (67%) said that they were living there since birth.

Overall, about 15 percent respondents reported to be living alone. This proportion was high in Delhi (23%), and Chennai (22%) and low in Kolkata (5.9%) and Mumbai (5.8%).

Overall, about 94% of the respondents stated that they were staying in a regular residence, the highest being in Mumbai and Delhi (98%) and lowest in Bangalore (89%).

**Table 3.6: Residential Status of the Respondents** 

City	Residential Status (All figures are in percentages)							
	Live in the city	Staying Alone	Not staying at a regular residence					
Bangalore	98.5	15.6	11.5					
Chennai	98.2	21.7	10.7					
Delhi	99.7	23.1	2.3					
Kolkata	77.4	5.9	6.3					
Mumbai	99.3	5.8	1.8					
Total	94.7	14.6	6.4					

Base: All Respondents

## 3.2.7 Mobility Pattern of the Respondents

The respondents were asked whether and how frequently they traveled to other towns or villages. The responses are tabulated in Table 3.7.

Overall, 57% respondents said that they usually traveled to other places but the frequency of travel was low. Only 17% respondents said they traveled weekly or fortnightly. About 20% respondents said that they traveled out at least once in a month. These trips were usually meant for socializing with relatives / friends (47%) or for pleasure (27%).

Respondents from Mumbai traveled more often compared to the other respondents.

**Table 3.7: Mobility Pattern of the Respondents** 

(All figures are in percentages)

		in percentages)					
City	Those who often travel	Fre	equency of tra	ıvel*	Purpose of Traveling*		
		Weekly	Fortnightly	Others	Meeting relatives/ friends	Pleasure trips	
Bangalore	54.8	10.1	9.5	80.4	39.9	23.6	
Chennai	45.6	6.5	25.8	67.8	46.8	20.2	
Delhi	62.5	5.3	8.0	86.6	57.8	26.2	
Kolkata	45.9	8.1	4.0	87.9	44.7	38.7	
Mumbai	75.4	4.8	5.8	89.4	51.4	25.5	
Total	57.0	6.7	9.9	83.3	47.4	26.5	

Base: All Respondents

\*Base: Those who often travel

# 3.2.8 Substance Use (Alcohol / Drug / ID)

The respondents were probed on different types of intoxicating substances they might be using, frequency of intake and consumption of such intoxicating substances prior to sexual intercourse. The responses are tabulated in Table 3.8 and 3.9.

#### **Alcohol Intake**

Cumulating across the five metros, about two-thirds (67%) of the respondents reported ever having consumed alcohol. Nearly 16% said they were habituated to drinking every day while 35% drank at least once a week. Importantly, more than one-third (36%) admitted that they 'regularly' took alcoholic drinks prior to sex.

Table 3.8: Alcohol Intake by the Respondents in Past 4 Weeks

(All figures are in percentages)

City	Ever had alcohol	Frequency	Frequency of alcohol intake in last four weeks					
		Every day	At least once a week	Drinking in frequently	drinking before sex*			
Bangalore	67.4	24.7	41.8	33.5	19.8			
Chennai	82.0	16.6	46.6	36.8	26.0			
Delhi	70.2	19.0	30.5	50.4	10.0			
Kolkata	55.2	7.4	24.8	67.8	2.7			
Mumbai	59.4	8.5	26.8	64.6	11.0			
Total	66.9	15.8	35.0	49.1	14.8			

Base: All Respondents for "ever had alcohol"

\* Base: Respondents who have ever had alcohol

#### **Drug Use**

Intoxicating drug use was reported by nearly 13% of the total respondents surveyed in the five Metropolitan Cities. Of them, about three-fourths (76%) reported to have tried *Ganja*, 42% mentioned *Bhang*, and 8% had tried *Affim* while consumption of brown sugar and heroin was reported by 4% each. A significant proportion (12%) had also reported injecting addictive drugs without a medical prescription within the last 12 months prior to the survey. A higher proportion of respondents in Chennai (22%) and Bangalore (36%) reported injecting intoxicating drugs.

**Table 3.9: Drug Use by Respondents** 

(All figures are in percentages)

City	Ever tried any drug		Type of	Injected drug in last 12 months		
		Ganja	Bhang	Charas	Affim	
Bangalore	4.1	81.8	18.2	0.0	9.1	36.4
Chennai	19.9	81.5	25.9	1.9	11.1	22.2
Delhi	21.7	75.4	69.2	47.7	9.2	4.6
Kolkata	10	74.1	25.9	14.8	3.7	3.7
Mumbai	5.8	56.3	25.0	37.5	0.0	
Total	12.5	75.7	41.6	24.3	8.1	11.6

Base: All Respondents for "Ever tried any drug"

All those who ever tried any drug for "Type of drugs tried" and "Injected drug in last 12 months"

#### 3.3 AWARENESS OF HIV / AIDS

The following sections portray the awareness level among the respondents regarding different issues pertaining to prevention of HIV / AIDS and common myths associated with the spread of HIV / AIDS.

#### 3.3.1 Ever heard of HIV / AIDS

Table 3.10 indicates that overall, most of the respondents (97%) across all the five selected cities, reported that they had heard of HIV/AIDS. No significant variation was observed between the metros.

## 3.3.2 Awareness about different methods of prevention

As a whole, in all the five cities, a high proportion of respondents (83%) reported that using condoms correctly and every time could protect people from HIV. This awareness was higher in Chennai (94%), Bangalore (93%), and Mumbai (91%).

In all, around three-fourths of the respondents reported that people could protect themselves by having one uninfected faithful sex partner. It was observed that a maximum of 95% of the respondents in Mumbai and a minimum of 62% of the respondents in Bangalore and Kolkata were found to be aware of this mode of prevention.

Overall, around three-fourths (74%) of the respondents reported sexual abstinence as one of the HIV prevention methods. Intercity variation indicates that the proportion of respondents reporting sexual abstinence as HIV prevention method was significantly higher in Mumbai (87%) and Chennai (82%) as compared to Bangalore (62%), Kolkata (69%) and Delhi (70%).

Nearly 69% of the respondents were aware of first two methods of prevention i.e. consistent condom use and single sex partnership. The proportion of respondents who were aware of these two methods of HIV prevention was high in Mumbai (87%) and Chennai (74%) and relatively lower in Bangalore (59%), Delhi (70%) and Kolkata (56%).

Table 3.10: Awareness on methods of preventing HIV Infection

(All figures are in percentages)

City	Ever heard of	Awareness ab	out different methods o	Knowing first two methods of prevention	
	HIV/AIDS	Consistent condom use	Having one uninfected faithful sex partner	Sexual Abstinence	i.e. consistent condom use and single sex partnership
Bangalore	96.3	92.2	61.5	61.5	58.9
Chennai	97.8	93.8	77.6	81.6	74.3
Delhi	97.7	72.6	68.9	70.2	66.9
Kolkata	94.1	65.6	61.5	68.5	55.9
Mumbai	98.9	90.6	94.6	87.0	87.0
Total	97.0	82.8	72.8	73.8	68.6

Base: All respondents

# 3.3.3 Awareness of HIV transmission through needle sharing/ mother to child/ Breast-feeding

To measure the awareness level with regard to modes of transmission of HIV, three questions on transmission through needle sharing, mother to child and breast-feeding were asked to all respondents (Table 3.11).

Overall, most of the respondents (92%) were aware that needle sharing could be responsible for HIV transmission.

In all, about 89% of the respondents were aware of the potential of mother to child HIV transmission.

Nearly three-fourths of the respondents (72%) reported that "breast feeding" could be a mode of transmission of HIV. This was as high as 90% in Bangalore compared to 50% in Kolkata.

Table 3.11: Awareness of HIV Transmission through Needle Sharing/Mother to Child/Breast Feeding

(All figures are in percentages)

City	Awarenes	s of HIV Transmissio	n Through
	Needle sharing	Mother to Child	Breast feeding
Bangalore	92.2	93.0	90.0
Chennai	91.9	91.5	71.7
Delhi	94.6	91.6	74.6
Kolkata	87.4	78.9	49.6
Mumbai	94.9	88.0	73.2
Total	92.3	88.7	71.9

Base: All respondents

#### 3.3.4 Correct beliefs about HIV transmission

Those who were aware of HIV/AIDS were asked three questions on misconceptions related to spread of HIV/AIDS to judge the level of their correct beliefs about HIV transmission. The questions were:

- 1.Can a person get HIV/AIDS by sharing a meal with someone who is infected?
- 2.Can a person get HIV/AIDS from Mosquito bites?
- 3. Do you think that healthy looking person could be suffering from HIV?

About 84% of all the respondents were aware of the fact that HIV is not transmitted through sharing a meal with an infected person.

About 78% of all the respondents reported that they were aware that HIV is not transmitted through a mosquito bite. The variation across the cities was considerable and varied from 55% in Kolkata to 90% in Chennai.

Nearly three-fourths (71%) of the respondents were reportedly aware that a healthy looking person might be suffering from HIV. However, the proportion of respondents reporting this was higher in Mumbai (89%) as compared to Bangalore (55%), Delhi (70%), Chennai (76%) and Kolkata (63%).

55% respondents correctly identified all three issues regarding correct beliefs. 70.7% in Chennai contrasted with 36.6% in Kolkata and 48.1% in Bangalore were aware of all three aspects.

Table 3.12: Correct Beliefs about HIV transmission

(All figures are in percentages)

City		is not transmitted ough	Aware that a healthy person may be	Respondents correctly identifying all three issues	
	Sharing a meal	Mosquito Bite	suffering from HIV		
Bangalore	88.5	88.5	55.2	46.3	
Chennai	90.8	89.7	75.7	69.1	
Delhi	84.3	81.3	70.2	54.2	
Kolkata	70.0	54.8	63.0	34.4	
Mumbai	86.6	75.4	88.8	63.8	
Total	84.1	78.0	70.7	53.6	

Base: All respondents

# 3.4 AWARENESS OF STD, SELF REPORTED STD PREVALENCE AND TREATMENT SEEKING BEHAVIOR

Awareness of STD, its prevalence and the treatment seeking behavior comprised an important part of this National Baseline Behavioral Surveillance Survey on HIV / AIDS.

#### 3.4.1 Ever Heard of STD

Most of the MSM respondents (79%) surveyed across five locations had heard of sexually transmitted diseases. As high as 94% respondents in Delhi reported having heard of STD. Awareness levels were lower in Chennai (67%) and Kolkata (65%) (Table 3.13).

### 3.4.2 Awareness of STD Symptoms

Besides genital discharge and genital ulcer / sore, nearly three-fourths (73%) of the respondents from all five locations reported that they were aware of other important STD symptoms in men. Similarly, about two-thirds (65%) were aware of other important STD symptoms in women.

The data presented in Table 3.13 reveals that about 87% of MSM in Delhi and 79% in Bangalore knew of other important STD symptoms in men. The largest proportion of respondents aware of other important STD symptoms in women was from Delhi (88%), while the lowest was in Kolkata (50%).

Table 3.13: Awareness of STD and STD symptoms among men and women

(All figures are in percentages) **Ever heard of STD** Aware of other STD Symptoms in City Women Men 79.3 Bangalore 83.3 56.7 Chennai 67.3 62.1 58.1 Delhi 94.0 87.3 87.6 Kolkata 64.8 61.9 49.6 Mumbai 84.1 72.8 71.4 Total 79.0 73.0 65.2

Base: All Respondents

# 3.4.3 Self Reported STD Prevalence

Table 3.14 presents findings on self- reported STD prevalence in the last 12 months among the respondents interviewed across the five study locations.

Overall, about 16% of the respondents were suffering from genital discharge in last 12 months before the survey. Intercity variation in this regard was considerable. About 36% of respondents in Bangalore reportedly suffered from genital discharge in the last 12 months as against 6% of the respondents in Mumbai. This proportion ranged from 10–17% in the rest of the cities i.e. Delhi (17%), Kolkata (10%) and Chennai (11%).

In all, about one-fourth (24%) of the respondents reported genital ulcer/sore in last 12 months before survey. While comparing across the five cities, it was observed that the proportion of respondents suffering from this symptom was higher in Bangalore (47%) and Delhi (33%) as compared to the other three cities.

Around 30 % of the respondents reported that they suffered from burning pain during urination in the preceding 12 months before survey. Intercity variation indicates that the proportion of respondents reporting burning pain during urination varied widely from 9% in Kolkata to 57% in Bangalore.

Overall, about 41% of respondents suffered at least one of the above-mentioned symptoms in the preceding 12 months. A higher proportion of respondents reported to have suffered from at least one symptom in Bangalore (63%) and Delhi (57%) as compared to Chennai (35%), Kolkata (27%) and Mumbai (24%).

In all, about 22% of respondents reported that they suffered from more than one symptom in last 12 months. A higher proportion of respondents from Bangalore (48%) and Delhi (28%) as compared to Chennai (13%), Kolkata (6%) and Mumbai (8%) reported that they suffered from more than one symptom

Overall, 31.3% respondents suffered from genital discharge or ulcer/sore in last 12 months.

**Table 3.14: Self Reported STD Prevalence** 

(All figures are in percentages)

City	Reported symptoms in last 12 months		n last 12 months	Reporting at least one of the three symptom in last 12 months	more than one symptom	Reporting discharge / ulcer/ sore
	Genital discharge	Genital ulcer/sore	Burning pain during urination		of the three symptom in last 12 months	
Bangalore	35.9	46.7	57.0	63.3	52.2	57.4
Chennai	10.7	14.7	23.9	34.6	13.2	21.7
Delhi	17.1	33.1	42.1	56.9	28.4	39.8
Kolkata	10.0	13.3	9.3	26.7	5.6	21.5
Mumbai	5.8	12.0	14.1	23.6	7.6	15.6
Total	15.9	24.1	29.5	41.2	21.5	31.3

Base: All Respondents

## 3.4.4 STD Treatment Seeking Behaviour during the last episode

The respondents who reported any of the three symptoms (genital discharge, ulcer/sore, burning pain during urination) in the last 12 months preceding the survey were asked about what they did last time when they had any of these symptoms. Table 3.15 presents data on STD treatment choices.

Overall, across the five study locations, about 44% and 28% of the respondents reportedly visited private hospital/clinic and government hospital/clinic respectively. Around 14% reported that they had purchased medicine from chemist shop and an almost equal proportion (15%) of the respondents reported that they went to NGO peer educator. About 11% of the respondents reported that they had taken home based remedies. One-tenth of the respondents interviewed did not take any treatment.

Intercity variations indicate that slightly more than half the respondents in Delhi (52%) and Kolkata (51%) reported visiting private hospital/clinic. A relatively low proportion of respondents in Chennai (19%) reported to have visited private hospital/clinic.

A significantly high proportion of respondents in Bangalore (54%) reported that they had visited government hospital/clinic. The proportion of respondents who reportedly went to NGO peer educator was 31% and 22% in Bangalore and Mumbai

respectively. This proportion was relatively low in Kolkata (8%), Chennai (6%) and Delhi (1%).

27% respondents purchased medicine from Chemist shops in Delhi. This was low in the other cities. Delhi also had the highest proportion reporting home-based remedies.

Table 3.15 - STD Treatment Seeking Behavior during the Last Episode

(All figures are in percentages)

City	Private Hospital	Government Hospital	Medicine from chemist shop	NGO peer educators/ clinic	Home Based remedy	No Treatment
Bangalore	45.0	53.8	11.1	31.0	4.1	1.2
Chennai	19.1	35.1	4.3	6.4	12.8	16.0
Delhi	51.8	13.5	26.5	1.2	18.2	12.9
Kolkata	51.4	9.7	15.3	8.3	13.9	12.5
Mumbai	47.7	4.6	7.7	21.5	3.1	15.4
Total	43.9	27.6	14.7	14.2	10.8	10.1

Base: Those who reported any or all symptoms of STD in last 12 months

# 3.4.5 Time taken to visit a health practitioner and type of medicine taken during last episode

Table 3.16 presents findings on time taken to visit a health practitioner by those respondents who reported any symptom of STD in the last 12 months before the survey.

Across all the five cities, nearly 42% of the respondents took less than one month but more than one week to visit a health practitioner. An almost equal proportion (41%) of the respondents took one week or less.

It was interesting to note that in Kolkata only 15.3% sought medical attention within a week of onset of symptoms.

Overall about 81% of the respondents took allopathic medicines to treat the symptoms of STD. About 11% of the respondents took Ayurvedic/ herbal treatment. Only 3% of the respondents took homeopathic medicine.

While comparing among five cities, it was found that about 96% of the respondents in Bangalore took allopathic treatment. The proportion of respondents who reportedly took Ayurvedic medicine was as high as 21% in Delhi.

Table 3.16: STD Treatment Seeking Behavior - Time taken to visit a Health Practitioner during Last Episode and Type of taken Medicine at Last Episode

(All figures are in percentages)

City	Time take	n to visit a Health I	Practitioner	Type of Medicine			
	1 week or less	Less than 1 month but more than 1 week	One month or more	Allopathic	Homeopathic	Ayurvedic /Herbal	
Bangalore	55.0	37.4	7.6	95.9	0.6	4.7	
Chennai	26.6	54.3	19.1	67.0	4.3	12.8	
Delhi	38.2	42.4	5.3	78.8	2.4	20.6	
Kolkata	15.3	44.4	38.9	72.2	6.9	11.1	
Mumbai	61.5	29.2	7.7	78.5	1.5	3.1	
Total	41.1	41.6	12.8	81.1	2.6	11.4	

Base: Those who reported any or all symptoms of STD in last 12 months

### 3.4.6 STD treatment sources proposed to be utilized for future episodes

Table 3.17 reveals that overall, more than half the respondents (54%) reported that they would seek treatment from a private hospital/clinic and 28% reported government hospital/clinic as their preferred choice in case they had any symptoms of STD in future. Proportion preferring to use private sources was highest in Mumbai (63%). Conversely, proportion stating Government hospitals, as a preference was only 9% in Mumbai.

Table 3.17: STD Treatment sources proposed to be utilized for future episodes

(All figures are in percentage)

City	Go to a Private hospital/clinic	Go to a Govt. Hospital/clinic	Go to NGO Peer Educator	Take home based remedy	Go to Health Worker	Go to a traditional healer/quack
Bangalore	38.5	35.6	18.5	0.7	1.1	1.5
Chennai	36.4	42.3	12.5	2.6	1.5	1.1
Delhi	67.9	27.4	1.0	0.7	1.0	0.3
Kolkata	61.9	24.1	7.8	1.1	0.7	1.5
Mumbai	63.4	9.1	25.7	0.4	0.4	0.4
Total	53.9	27.6	12.9	1.1	0.9	0.9

Base: All Respondents

### 3.5 SEXUAL BEHAVIOUR AND CONDOM USAGE

This section contains information on age at first sex with female and male partners, last time and consistent condom use with female and male partners, age of first male partner and type of first sexual experience, type of first male partner, age at first sex with commercial and non-commercial male partners and mean number of both types of partners. This also includes person suggesting last time condom use, brand and source of condom used and reasons if any, for not using condoms at last sex.

# 3.5.1 Age at first sex with any female partner

Table 3.18 presents age of the respondents at first sex with any female partner (paid or unpaid) across the five selected cities.

The median age at first sex with any female partner was 19 years (range 12 to 51 years). It was observed that 27% reported no sex with any female partner. Around 33% had their first sex with a female partner before 19 years. The mean age at first sex with any female partner was 20 years.

A significant variation was observed across the five selected cities with respect to age at first sex with any female partner. About 47% of the respondents in Chennai had first sex with any female partner at less than 15 years of age as against just 2% to 6% of respondents in other four cities.

Table 3.18: Age at First Sex with any female partner

(All figures are in percentages)

City		Age Groups (in years)				Mean	Standard	Median	Ra	nge
	<15	16-18	19-21	22-25	25+		Deviation		Minimum	Maximum
Bangalore	5.2	24.4	14.8	19.3	36.3	23.5	7.3	22.0	12	51
Chennai	47.4	13.2	17.3	16.2	5.1	17.7	4.3	16.0	12	30
Delhi	6.0	28.4	17.4	14	3.0	19.1	3.6	19.0	12	30
Kolkata	1.9	14.8	7.4	11.1	4.8	20.3	4.4	20.0	14	34
Mumbai	4.0	21.4	17.8	9.1	4.3	19.4	3.7	19.0	12	31
Total	12.8	20.6	15.0	13.9	10.5	20.1	5.6	19.0	12	51

Base: All Respondents

# 3.5.2 Sex with any female partner in the last 6 months

Overall, 31% of the respondents reported sexual intercourse with any female partner in the last 6 months (Table 3.19).

Inter-city variations indicate that the proportion of respondents who had sex with any female partner in the last 6 months varied from 8% in Bangalore to as high as 52% in Delhi.

Overall, the mean number of female partners with whom the respondents had sex in the last 6 months was 2.4. It varied from 5.8 in Bangalore to 1.2 in Kolkata.

Table 3.19: Sex with any female partner in the last 6 months

(All figures are in percentages)

City	Had sexual intercourse with female partner in	Mean number of female partners in last	Standard Deviation	Median number of female partners in last
	past 6 months	6 months		6 months
Bangalore	7.8	5.8	5.0	4.0
Chennai	34.6	2.8	3.8	1.0
Delhi	51.8	2.5	6.6	1.0
Kolkata	25.2	1.2	0.5	1.0
Mumbai	32.6	1.9	3.1	1.0
Total	30.9	2.4	4.8	1.0

Base: All Respondents

### 3.5.3 Last time and consistent condom use with female partners

All the respondents who had sex with any female partner in the last 6 months before the survey were asked about whether they used condoms the last time they had sex and on consistent condom use. Consistent condom use means using condoms every time the respondent had sex with any female partner. The findings are presented in Table 3.20

36 % of the respondents reportedly used condoms while having sex with a female partner the last time. This varied from 24% in Kolkata to 62% in Bangalore. Regarding consistent condom use, overall 15% of respondents across various cities, reported using condoms every time they had sex with any female partner in last 6 months. In four cities, except Bangalore, the proportion of respondents using condoms consistently ranged from 10% in Kolkata to 26% in Mumbai.

Table 3.20: Last time and consistent condom use with female partners

	(A	n ngures are in percentages)
City	Used condom last time*	Used condom consistently in last 6 months
Bangalore	61.9	0.0
Chennai	48.9	14.9
Delhi	26.5	14.2
Kolkata	23.5	10.3
Mumbai	42.2	25.6
Total	36.0	15.4

<sup>\*</sup> Base: Those who had sexual intercourse with any female partner

### 3.5.4 Age at First Sex with any Male Partner

All respondents were asked about their age at first sexual experience (manual/oral/anal) with any male partner. The related data given in Table 3.21 shows age of the respondents at first sex with any male partner across the five selected cities.

Overall, the mean age at first sex with any male partner was 17 years. Around 32% of the respondents reported their age at first sex with any male partner as less than 14 years,

A significant variation was observed across the five selected cities with respect to age at first sex with male partners. About 15% of the respondents in Bangalore had first sex with any male partner at less than 14 years of age as against 29% to 43% of respondents in other four cities.

Table 3.21: Age at first sex with any male partner

(All figures are in percentages)

City	A	Age at first sex with male partner						Median
	Less than 15	15-18	19-25	26-35	36-45		Deviation	
Bangalore	14.8	52.6	32.2	0.4	0.0	17.2	2.8	17.0
Chennai	39.7	34.6	20.2	5.5	0.0	16.4	4.6	15.0
Delhi	32.4	44.5	18.4	4	0.7	16.6	4.5	16.0
Kolkata	43.3	34.8	17.4	3.7	0.7	16.1	4.5	15.0
Mumbai	29.3	44.6	23.6	2.2	0.4	16.7	4.3	16.0
Total	31.9	42.2	22.3	3.2	0.4	16.6	4.2	16.0

Base: All Respondents

# 3.5.5 Age of First Male Partners

All respondents were also asked about the age of first male partner (Table 3.22).

Overall, the mean age of first male partner was 21 years. 47.7 % of the respondents interviewed across the five locations reported age of their first male partner as 19-25 years.

It was observed that about 63% of the respondents in Bangalore reported the age of their first partner as 15-18 years.

Table 3.22: Age of first male partners

(All figures are in percentages)

City	Age of first ma	ale partner			Mean	Standard Deviation
	Less than 19	19-25	26-35	36-45		
Bangalore	15.6	62.6	19.6	2.2	22.5	4.9
Chennai	36.8	43.8	16.9	2.6	21.4	6.7
Delhi	47.5	41.1	10.4	1.0	19.7	5.3
Kolkata	38.5	39.6	16.7	5.2	22	7.5
Mumbai	34.1	52.2	12.7	1.1	21.2	5.2
Total	34.8	47.7	15.1	2.4	21.3	6.1

Base: All Respondents

# 3.5.6 Type of first sexual experience and first male partners

All respondents were asked about their first sexual experience (manual/oral/anal) with any male partner. Multiple responses were recorded. Table 3.23 reflects that, in all 58% of the respondents reported that their first sexual experience was oral and an almost equal proportion (57%) of respondents reported anal sex, the first time. About 47% reported manual sex as their first sexual experience.

The proportion of respondents reporting oral sex as their first sexual experience varied between 31% in Delhi to 85% in Bangalore. The proportion of respondents reporting anal sex as their first sexual experience ranged from as low as 28% in Kolkata to as high as 79% in Delhi.

As regard, type of first male partner, overall about 47% of respondents reported their friends as the first male partner followed by 22% and 16% of respondents who reported neighbors and relatives respectively. Overall, only 10% of the respondents reported a commercial partner and/or co-worker as their first male partner.

No significant differences were observed across the sampled locations.

Table 3.23: Type of first sexual experience and first male partners

(All figures are in percentages)

City	Type of First Sexual Experience			Type of first male partners					
	Manual	Oral	Anal	Co-worker	Friend	Relative	Neighbor	Comm. Partner	Any other person
Bangalore	30.7	84.8	75.2	7.0	47.8	21.5	20.0	2.6	1.1
Chennai	23.2	60.3	44.1	5.9	49.6	12.5	20.2	9.2	2.6
Delhi	54.2	30.8	78.6	1.7	45.2	18.1	23.1	9.7	2.3
Kolkata	66.7	39.3	28.1	5.9	42.2	16.7	27.8	3.7	3.7
Mumbai	60.5	76.1	56.5	4.7	51.4	13.4	19.9	1.1	9.4
Total	47.2	57.8	57.0	5.0	47.2	16.4	22.2	5.3	3.8

Base: All Respondents

# 3.5.7 Median age at first sex with any commercial/non-commercial male partners

All the respondents who reported having sex with a commercial or a non – commercial male partner were asked about their age at first sexual intercourse with either. Table 3.24 reveals that the median age at first sex with any commercial male partners was 19 years while it was 16 years in case of non-commercial partners.

Inter-city variation in the median age with commercial male partners ranged from 16 years in Kolkata to 20 years in Bangalore and Delhi and for non-commercial male partners, it varied from 15 years in Delhi and Kolkata to 18 years in Bangalore.

Table 3.24: Median age at First Sex with any commercial/Non-commercial male partners (All figures are in percentages)

City	Age at First Sex with Com male partner	Age at First Sex with Non-Com male partner	
	Median	Median	
Bangalore	20.0	18.0	
Chennai	19.0	16.0	
Delhi	20.0	15.0	
Kolkata	16.0	15.0	
Mumbai	18.0	16.0	
Total	19.0	16.0	

Base: All Respondents

# 3.5.8 Proportion of Respondents Reporting Commercial and Non-Commercial Male Partners in Last One Month

Overall, 36% of all respondents reported having sex with commercial partners during the last one month prior to the survey. This proportion was significantly high in Delhi

(65%) and Chennai (51%) as compared to Mumbai (8%), Kolkata (18%) and Bangalore (36%).

Nearly 80% of all respondents interviewed across 5 locations reported sex with non-commercial partners during the last one month prior to the survey. This proportion varied from 90% in Bangalore to 73% in Mumbai and Chennai (Table 3.25).

**Table 3.25: Respondents reporting Commercial/Non-commercial Male Partners in last One Month** 

(All figures are in percentages)

	(1111 115 111 111 111 111 111 111 111 11	in percentages,
City	Commercial	Non-Commercial
Bangalore	36.3	89.6
Chennai	50.7	72.8
Delhi	65.2	74.2
Kolkata	17.8	84.8
Mumbai	7.6	73.2
Total	36.0	78.8

Base: All Respondents

# 3.5.9 Mean number of commercial and non-commercial male partners in last one month

All the respondents reporting sex with commercial and non-commercial male partners during the last one month were asked to report the number of male partners (commercial and non commercial) with whom they had sex in the said period. The mean number of commercial and non-commercial male partners was reported as 9.1 and 5.2 respectively (Table 3.26).

The mean number of commercial male partners was 6.1 in Bangalore as against 13.7 in Chennai. The mean number of non-commercial male partners ranged between 5.1 in Bangalore to 8.3 in Chennai.

Table 3.26: Mean No. Of Commercial/Non-commercial male partners in Last One Month

City	Number	of Commercia partner	al male	Number of non-commercial male partner		
	Mean	Standard Deviation	Median	Mean	Standard Deviation	Median
Bangalore	6.1	4.5	5.0	5.1	3.2	4.0
Chennai	13.7	6.9	12.0	8.3	5.9	6.0
Delhi	7.6	6.6	5.0	3.5	3.1	2.0
Kolkata	8.9	7.6	6.0	5.8	5.7	4.0
Mumbai	8.0	7.9	5.0	3.6	3.7	3.0
Total	9.1	7.1	7.0	5.2	4.8	4.0

Base: All Respondents

# 3.5.10 Mean Number of commercial and non-commercial male partners in last Seven days

All the respondents were asked to report the number of male partners (commercial and non commercial) with whom they had sex in the last 7days before the survey. As

shown in Table 3.27, the mean number of commercial and non-commercial male partners was reported as 3.8 and 2.3 respectively.

The mean number of commercial male partners ranged from 3 in Bangalore to 5.2 in Chennai, whereas the mean number of non-commercial male partners ranged from 1.8 in Delhi and Mumbai to 2.4 in Chennai.

Table 3.27: Mean Number of Commercial/Non-commercial male partners in Last Seven Days

City	No. Of Commercial male partner			No. Of non-commercial male partner			
	Mean	Standard Deviation	Median	Mean	Standard Deviation	Median	
Bangalore	3.0	1.9	2.0	2.3	1.3	2.0	
Chennai	5.2	3.2	4.0	2.9	2.4	2.0	
Delhi	3.1	2.9	2.0	1.8	1.2	1.0	
Kolkata	4.4	3.9	4.0	2.5	2.2	2.0	
Mumbai	2.8	1.8	2.0	1.8	1.3	1.0	
Total	3.8	3.0	3.0	2.3	1.8	2.0	

Base: All Respondents

#### 3.5.11 Last time condom use with commercial and non-commercial male partners

Last time condom use with different types of partners is an important indicator. Those respondents who had anal sex with commercial and non-commercial male partners in last 30 days were asked whether they had used condoms last time they had sex with their commercial and non-commercial male partners.

Table 3.28 indicates that overall, 39% of the respondents reported using condom last time they had sex with any commercial male partner. There were considerable intercity variations. The proportion of respondents reporting last time condom use with commercial male partners was high in Mumbai (67%) and Chennai (64%). In Delhi and Bangalore, 30% and 31% of the respondents respectively reported that they used condoms at last sex with their commercial male partners. However, this was as low as 19% in Kolkata.

Overall, 53% of the respondents reported using condoms last time they had sex with non-commercial male partners. The proportion of respondents reporting last time condom use with non-commercial male partners was high in Bangalore (81%), Mumbai (62%) and Chennai (59%). About 26% and 31% of the respondents in Delhi and Kolkata respectively reportedly used condoms last time they had sex with their non-commercial male partners.

Table 3.28: Last Time Condom Use with Commercial/Non-Commercial Male Partners (All figures are in percentages)

	(=====	(======================================			
City	Last time condom use with commercial male partners*	Last time condom use with non-commercial male partners**			
Bangalore	31.5	80.7			
Chennai	63.7	58.5			
Delhi	30.4	25.8			
Kolkata	18.9	30.7			
Mumbai	66.7	62.4			
Total	39.3	52.6			

<sup>\*</sup> Base: Those who had sex with any commercial male partner in last 1 month

# 3.5.12 Consistent condom use with commercial and non-commercial male partners in the last one-month

All respondents, who reported sex with different types of partners in the last one-month were asked about the frequency of using condoms.

Table 3.29 presents findings on consistent use of condom with commercial and non-commercial male partners in the last one-month. Overall about 13% of the respondents reported that they used condoms every time they had sex with commercial partners in the last one month before the survey. Inter-city variations indicate that the proportion of respondents using condoms consistently with their commercial male partners in last one month varied from 8% in Kolkata to 33% in Mumbai.

In all, about 30% of the respondents interviewed in all the five cities reported using condoms every time they had sex with their non-commercial male partners. The proportion of the respondents using condoms consistently with non-commercial male partners was higher in Mumbai (56%) and Bangalore (44%). A relatively low proportion was reported from Kolkata (21%), Chennai (19%) and Delhi (11%).

Table 3.29: Consistent Condom Use with Commercial/Non-Commercial Male Partners in Last One Month

(All figures are in percentages)

	\ 8'	garage are consisting and			
City	Consistent condom use with commercial male partner *	Consistent condom use with non- commercial male partner **			
Bangalore	8.9	43.7			
Chennai	15.6	19.2			
Delhi	13.9	11.3			
Kolkata	7.5	20.6			
Mumbai	33.3	56.4			
Total	12.6	30.3			

<sup>\*</sup> Base: Those who had sex with any commercial male partner in last 1 month

<sup>\* \*</sup> Base: Those who had sex with any non-commercial male partner in last 1 month

<sup>\* \*</sup> Base: Those who had sex with any non-commercial male partner in last 1 month

# 3.5.13 Person suggesting condom use at last sex with commercial/non-commercial male partners

Table 3.30 presents data on persons who suggested condom use at last sex with commercial and non-commercial male partners.

Overall, 49% of the respondents reported that they themselves decided to use condom last time while having sex with commercial male partners. About one-third (34%) of the respondents reported that their commercial male partners had suggested condom use last time and the rest (17%) reported of a joint decision to use condoms on the last occasion.

Inter-city variations indicate that the proportion of respondents who themselves decided upon condom use with commercial male partners was highest in Mumbai (79%) and lowest in Bangalore (21%).

Overall, half the respondents reported that they themselves decided on condom use last time while having sex with non-commercial male partners. About one-fourth (25%) reported that their non-commercial partners suggested condom use last time and the rest reported that the decision was a joint one.

Inter-city variations indicate that the proportion of respondents who themselves decided upon condom use with non-commercial male partners was highest in Mumbai (68%) and lowest in Bangalore (32%).

Table 3.30: Persons suggested Condom Use at Last Sex with Commercial/Non-Commercial Male Partners

(All figures are in percentages)

City	With commercial male partners*			With non-commercial male partners**			
	Self	Partner	Joint decision	Self	Partner	Joint decision	
Bangalore	21.2	45.9	32.9	31.7	35.8	32.6	
Chennai	64.0	34.2	1.8	67.2	25.2	7.6	
Delhi	50.8	20.3	28.8	52.6	19.3	28.1	
Kolkata	50.0	30.0	20.0	38.6	15.7	45.7	
Mumbai	78.6	14.3	7.1	67.5	11.9	20.6	
Total	48.6	33.7	17.7	49.7	24.6	25.7	

<sup>\*</sup> Base: Those who used condom at last sex with commercial partner

# 3.5.14 Type of Condom Brands Used at last sex with Commercial and Non-Commercial Male Partners

Table 3.31 represents the data on condom brands used at last sex with commercial and non-commercial male partners. The interviewers showed the package covers of all popular brands to the respondents to confirm the type of condom brands used.

As a whole, about 37% of the respondents reported using Nirodh brand of condom followed by one-fourth (25%) who reported using Kamasutra brand. The remaining respondents reported use of Delux Nirodh, Masti, Kohinoor, etc. brands of condom with their commercial partners. There was a considerable variation in the use of Nirodh. None had reported use of Nirodh in Mumbai while in the remaining cities,

<sup>\* \*</sup> Base: Those who used condom at last sex with non-commercial partner

use of Nirodh varied from 13% in Bangalore to 59% in Chennai. The range of respondents reporting Kamasutra varied from 14% in Mumbai to 32% in Bangalore.

With regard to use of different brands of condoms with non-commercial male partners, 28% of the respondents reported the use of Kamsutra brand while 24% reported use of Nirodh. The remaining respondents reported use of other brands of condoms like Delux Nirodh, Masti, Kohinoor, etc. with their non-commercial partners.

There was considerable variation in the use of Nirodh brand in five cities ranging from 1% in Mumbai to 73% in Chennai. The range of respondents reporting Kamasutra varied from 12% in Chennai to 47% in Bangalore.

Table 3.31: Type of Condom Brands Used at Last Sex with Commercial/Non-Commercial Male Partners

(All figures are in percentages)

City	With commercial male partner*			With non-commercial male partner**			
	Nirodh	Kamsutra	Delux Nirodh	Kamsutra	Nirodh	Kohinoor	
Bangalore	12.9	31.8	15.3	46.8	14.2	28.4	
Chennai	58.8	23.7	10.5	12.2	73.3	0.8	
Delhi	40.7	16.9	25.4	14	24.6	7	
Kolkata	30	30.0	30.0	17.1	5.7	28.6	
Mumbai	0.0	14.3	7.1	22.2	0.8	4	
Total	37.2	24.5	15.6	27.6	24.3	15.3	

<sup>\*</sup> Base: Those who used condom at last sex with commercial partner

# 3.5.15 Source of condom used at last sex with commercial and non-commercial male partners

All the respondents who used condoms last time were asked to report the source of condoms used with commercial and non-commercial partners (Table 3.32).

Overall, a significant proportion (32%) of the respondents reported NGO peer educators as the source of condom used with commercial partners. About one-fourth (26%) of the respondents obtained condoms from the person they had sex with. Another one-fifth of the respondents reported chemist shop as the source of procurement. The rest of the respondents reported other sources like health worker/clinic, friend, pan-shop, grocery shop, etc.

The range of respondents reporting NGO peer educators as source of condoms varied from 14% in Delhi to 79% in Mumbai. Similarly the range of respondents reporting, "person had sex with" as source of obtaining condoms used with commercial partners varied from none in Mumbai to 39% in Delhi. The proportion of respondents reporting "purchased at chemist shop" as source of obtaining condoms used with commercial partners varied from 11% in Chennai to 34% in Delhi. Nearly 30% respondents in Kolkata reported chemist shop as the source of getting condoms used with commercial partners.

Overall, a significant proportion (40%) of the respondents reported NGO peer educators as the source of condom used with non-commercial male partners. About

<sup>\* \*</sup> Base: Those who used condom at last sex with non-commercial partner

one-fifth (19%) of the respondents obtained condoms from the person they had sex with. Another one-fifth (22%) of the respondents reported chemist shop as source of condoms. The rest of the respondents reported other sources like health worker/clinic, friend, pan-shop, grocery shop, etc.

The proportion of respondents reporting NGO peer educators as source of condoms varied from 4% in Delhi to 64% in Mumbai. Similarly the proportion of respondents reporting, "person had sex with" as source of obtaining condoms used varied from 9% in Mumbai to 30% in Bangalore. The proportion of respondents reporting to have purchased at chemist shop varied from 5% in Bangalore to 56% in Delhi. Approximately 54% respondents in Kolkata reported chemist shop as the source of getting condoms used with non-commercial male partners.

Table 3.32: Source of Condom Used at Last Sex with Commercial/Non-Commercial Male

**Partners** (All figures are in percentages) With commercial male partners\* With non-commercial male partners\*\* City NGO/NGO NGO/NGO Person had Purchased at Purchased at Person sex with Peer Educator chemist shop **Peer Educator** chemist shop had sex with Bangalore 18.8 24.7 40.4 23.5 4.6 29.4 Chennai 47.4 24.6 11.4 52.7 18.3 15.3 Delhi 13.6 39.0 33.9 3.5 56.1 24.6 Kolkata 20.0 11.4 20.0 30 4.3 54.3 Mumbai 78.6 0.0 21.4 64.3 21.4 8.7 25.9 21.3 32.3 40.4 21.8 19.4 Total

# 3.5.16 Reason for not using condom at last sex with commercial and non-commercial male partners

The respondents who did not use condom last time with commercial and non-commercial male partners were asked to mention the main reasons for not using condom that time. Table 3.33 presents the findings.

About 33%, 27% and 22% of the respondents reported, "partner doesn't like condoms", "did not think condoms were necessary" and "partner objected to condom use" as main reasons respectively for not using condom with commercial male partners.

A considerable proportion of respondents in Delhi (75%)and Kolkata (56%) stated, "partner doesn't like condoms" as the main reason for not using condoms with commercial male partners. "Partner objected to condom use" and "Didn't think it was necessary" were major reasons reported by most of the respondents in Kolkata and Delhi.

About 59%, 53% and 33% of the respondents reported "did not think condoms were necessary" "partner doesn't like condoms" and "partner objected to condom use" as main reasons respectively for not using condoms with non-commercial male partners.

<sup>\*</sup> Base: Those who used condom at last sex with commercial partner

<sup>\* \*</sup> Base: Those who used condom at last sex with non-commercial partner

Most of the respondents, in all the five cities stated, "didn't think necessary" and "partner doesn't like them" as the main reasons for not using condoms with non-commercial male partners.

The proportion of respondents reporting "partner objected to condom use" as the main reason for not using condoms with non-commercial male partners was high in Delhi (60%) and low in Mumbai (16%), Kolkata (21%), Bangalore (23%) and Chennai (27%).

Table 3.33: Reason for Not Using Condom at Last Sex with Commercial/ Non-commercial Male Partners

$\rightarrow$	115111 62	41 C III	percentages)	

City	With commercial male partners*			With non-commercial male partners**			
	Partners don't like condom	Didn't think it was necessary	Partners objected condom	Didn't think it was necessary	Partners don't like condom	Partners objected to condom	
Bangalore	1.1	0.5	1.6	50.0	11.5	23.1	
Chennai	23.1	24.6	16.9	73.1	49.5	26.9	
Delhi	74.8	57.0	43.7	62.2	74.4	59.8	
Kolkata	55.8	53.5	51.2	56.3	53.8	20.9	
Mumbai	14.3	0.0	0.0	42.9	37.1	15.7	
Total	32.9	26.9	21.8	58.7	53.1	33.3	

<sup>\*</sup> Base: Those who did not use condom at last sex with commercial partner

#### 3.6 OTHER SALIENT OBSERVATIONS

### 3.6.1 Risk perception of getting infected with HIV/AIDS

A probed question was asked to all respondents to measure their perception of getting HIV/AIDS infection against a four-point scale varying from "very high" to "no chance". Table 3.34 presents the related data. Overall, about 29% of the respondents reported moderate chance of getting infected with HIV/AIDS. A low proportion (18%) of respondents reported that they had "no chance" of getting HIV infection.

Inter-city variation in respondent's perceived risk indicates that a significant proportion of respondents in Chennai (44%) and Mumbai (40%) perceived very high chance of getting HIV infection followed by Bangalore (21%), Kolkata (16%) and Delhi (14%). Significant proportion of respondents in Delhi (40%), Mumbai (32%), Chennai (30%) and a relatively low proportion of respondents in Bangalore (22%) and Kolkata (17%) reported Moderate Chances of getting HIV infection. No chances of getting HIV infection were perceived by 31% of respondents in Bangalore, followed by 24% in Kolkata.

<sup>\* \*</sup> Base: Those who did not use condom at last sex with non-commercial partner

Table 3.34: Risk perception of getting infected with HIV/AIDS

(All figures are in percentages)

City	Very high	Moderate	Low	No chance
Bangalore	20.7	21.5	27.0	30.7
Chennai	44.1	29.8	17.6	8.5
Delhi	14	40.1	26.4	19.4
Kolkata	15.6	17.4	42.6	24.4
Mumbai	40.2	32.2	21.0	6.5
Total	26.7	28.5	26.9	17.9

Base: All Respondents

# 3.6.2 HIV testing

Table 3.35 indicates that, in all, about 70% of the respondents reported that it was possible for them to get a confidential test to find out if they were infected with HIV. In all five cities possibility of getting HIV confidential test was reported by more than 80% of the respondents in Bangalore (82%), Delhi (84%) and Mumbai (92%). This proportion was considerably low in Kolkata (27%).

Overall 35% of the respondents reported having undergone an HIV test. The variation across the cities ranged from a low of 6% in Kolkata to 65% in Mumbai.

Overall 66% of the respondents who reported to have undergone HIV testing did it voluntarily. This proportion across various cities ranged between 29% in Kolkata to 87% in Mumbai.

Most of the respondents (85%) who had been tested, reported to have got the results of their test. This ranged from 59% in Kolkata to 95% in Chennai.

**Table 3.35: HIV Testing** 

(All figures are in percentages)

City	Possibility of confidential HIV	Ever had HIV Test	Voluntary/ R Tes	Ever found out result of test*	
	testing		Voluntary Required		
Bangalore	81.5	53.0	39.9	60.1	75.5
Chennai	65.4	40.8	72.1	27.9	94.6
Delhi	83.6	12.7	71.1	28.9	92.1
Kolkata	27.4	6.3	29.4	70.6	58.8
Mumbai	91.7	64.9	86.6	13.4	87.7
Total	70.3	35.2	66.4	33.6	85.0

Base: All Respondents

### 3.6.3 Exposure to STI/HIV/AIDS Programme intervention in the past one year

Table 3.36 presents findings on exposure to STI/HIV/AIDS Programs in the past one year. Overall nearly half (52%) of the respondents reported that they have had some

<sup>\*</sup> Base: Those respondents who have had a HIV test

inter-personal communication on STI/HIV/AIDS in the past one year. The proportion varied from 85% in Chennai to 12% in Kolkata.

Table 3.36 also presents findings on exposure to STI/HIV/AIDS Programs. Overall nearly one–fourth (26%) of the respondents reported that they have attended/participated campaign on STI/HIV/AIDS in the past one year. This was as low as 18% in Bangalore and as high as 37% in Mumbai.

 $Table \ 3.36: Exposure \ to \ STI/HIV/AIDS \ Programme \ Interventions \ in \ the \ Past \ One \ -Year$ 

(All figures are in percentages) City **Interpersonal communication on** Attended / participated in any STI/ HIV/ AIDS campaign / meeting on STI/ HIV/ AIDS in the past one year Bangalore 54.8 17.8 Chennai 29.0 85.3 Delhi 37.1 27.4 Kolkata 11.9 19.6 Mumbai 72.1 37.3 52.1 26.3 Total

Base: All Respondents

# CHAPTER - IV INJECTING DRUG USERS (IDUs)

#### 4.1 BACKGROUND

Acknowledged as a critical group in HIV/AIDS transmission, injecting drug users (IDUs) are one of the key target groups for any intervention project. The National Baseline BSS survey among high risk and bridge groups thus has undertaken a detailed study of this population, in terms of their demographic profile, their awareness of STD and HIV/AIDS, drug use, needle and syringe sharing behavior, self reported prevalence of STD, their treatment seeking behavior, their sexual behavior and condom usage, beside other salient observations pertaining to their risk behavior and prevention of HIV/AIDS. Each of these issues is discussed in detail in the ensuing sections. The discussion will present the scenario across all five-study locations.

#### 4.2 PROFILE OF THE IDU

This section presents the socio-economic profile of the IDU. The discussion will be centered on the age, educational level, marital status, main occupation, residential status and the use of substances like alcohol and drugs (injected and otherwise), the details of which are presented in individual sub-sections.

# 4.2.1 Age distribution

Overall, about three-fourths of the respondents reported their age between 19 years and 35 years. Nearly half of the respondents belonged to 26 to 35 years age group. The mean and median age of the respondents was 31 years and 30 years respectively. A considerable degree of variation in reported age was observed across all five locations, the minimum age being reported as 12 years in Manipur and maximum as 60 years in Delhi, Kolkata and Mumbai (Table 4.1).

As far as the age distribution of respondents across five study locations is concerned, the mean as well as median age of respondents in Chennai was found to be slightly higher than the other four locations. Nearly 42% of the IDU interviewed in Chennai reported their age being more than 35 years compared to only 5% in Manipur, 13% in Mumbai, 28% in Delhi and 33% in Kolkata. The proportion of respondents reporting their age below 26 years was as high as 44% in Manipur and as low as 9% in Chennai and Kolkata. The mean age of respondents varied from 34 years in Chennai to 27 years in Manipur (Table 4.1).

**Table 4.1: Age Distribution of the Respondents** 

(All figures are in percentages)

<del></del>							nguit	s are in per	centages	
City/State		Age Groups (in years)						Median	Rai	nge
	<19	19-25	26-35	36-45	46+				Min	Max
Chennai	0.4	8.1	49.6	39.6	2.2	34.1	6	35	18	57
Delhi	2.2	25.9	43.8	21.9	6.2	31.4	8	30	16	60
Kolkata	0.0	9.1	57.8	26.5	6.5	34.0	8	32	20	60
Manipur	4.2	39.5	51.1	4.5	0.6	26.6	5	26	12	49
Mumbai	6.7	36.3	44.1	9.3	3.7	28.3	8	27	14	60
Total	2.8	24.7	49.1	19.7	3.7	30.7	8	30	12	60

Base: All Respondents

# 4.2.2 Educational Level of Respondents

Table 4.2 indicates that nearly one-third of all the respondents interviewed across five study locations were illiterates.

There was a wide variation in educational level of the respondents across five study locations. The proportion of illiterate respondents was significantly higher in Kolkata (56%), Mumbai (42%) and Delhi (39%) as compared to Chennai (15%) and Manipur (11%). Similarly, the proportion of respondents reporting an educational level beyond secondary school was as high as 52% in Manipur and as low as 5% in Mumbai.

**Table 4.2: Educational Level of the Respondents** 

(All figures are in percentages)

City/State		<b>Education Level</b>									
-	Illiterate <sup>1</sup>	Illiterate <sup>1</sup>   1-5th   6-8th   9-10th		11-	12+						
					<b>12th</b>						
Chennai	15.2	24.1	22.6	19.3	11.1	7.8					
Delhi	38.7	19.3	23.7	10.6	2.6	4.4					
Kolkata	56.1	15.7	10.4	10.0	3.9	3.9					
Manipur	10.9	6.8	9.6	20.9	32.2	19.6					
Mumbai	42.2	30.7	15.6	6.7	1.9	3.0					
Total	31.3	19.0	16.4	13.8	11.1	8.2					

Base: All Respondents

# 4.2.3 Marital Status and Age at Marriage

Overall, 41.2% of the respondents reported that they had ever been married. The proportion of ever-married respondents was 54% in Chennai, 46% in Delhi, 43% in Kolkata and 32% in Mumbai and Manipur (Table 4.3).

The mean age at marriage across all five study locations was 23 years, the highest being 24 years in Chennai and lowest being 21 years in Mumbai. Table 4.3 indicates that the proportion of respondents reporting an age at marriage below 18 years was significantly higher in Mumbai (17%) and Delhi (15%) compared to the same in Manipur (4%), Kolkata (3%) and Chennai (2%). Nearly one-fourth of the IDU interviewed in Chennai and Kolkata reported their age at marriage to be above 25 years.

<sup>&</sup>lt;sup>1</sup> Includes those Respondents who are Literate but have no Formal Education

Table 4.3: Marital Status and Age at Marriage

(All figures are in percentages)

City/State	Ever 1	Ever Married		ge at N	Tarria	ge	Mean Age at	SD
	%	Numbe r	<18	18-21	22-25	26+	Marriage	
Chennai	54.4	147	2.0	31.3	42.2	24.5	23.5	4
Delhi	45.6	125	15.2	40.8	26.4	17.6	21.6	4
Kolkata	42.6	98	3.1	38.8	31.6	26.5	22.9	4
Manipur	32.5	101	4.0	27.7	53.5	14.9	23.1	3
Mumbai	32.2	87	17.2	47.1	21.8	13.8	20.7	4
Total	41.2	558	7.9	36.6	35.7	19.9	22.5	4

Base: All Respondents for "Ever Married"

Married Respondents for "Age at Marriage"

# 4.2.4 Status of Sexual Partnerships

Nearly three-fifths of the IDU interviewed across five study locations reported that they were not married and not living with any sexual partner. About 27% of the respondents were currently married and living with their spouse (Table 4.4).

The status of sexual partnership of the respondents across five study locations, as presented in Table 4.4, reveals that the proportion of "not married and not living with any sexual partner" ranged from 73% in Mumbai to 43% in Chennai, whereas, the proportion of "currently married and living with spouse" varied from 45% in Chennai to 9% in Mumbai

**Table 4.4: Status of Sexual Partnerships of the Respondents** 

(All figures are in percentages)

City/State		Se	xual Partnership	Status	<u>por contagos)</u>	
	Currently married, living with spouse	Currently married, living with other sexual	Currently married, not living with spouse or with Other Sexual	Not currently married and living with other sexual	with other	
		partner	Partner	partner	partner	
Chennai	44.8	1.9	8.1	2.2	43.0	
Delhi	26.6	0.4	18.2	1.5	53.3	
Kolkata	25.2	0.0	15.2	0.9	58.7	
Manipur	27.0	0.6	5.1	3.2	64.0	
Mumbai	9.3	0.4	14.8	2.2	73.3	
Total	26.6	0.7	12.0	2.1	58.6	

Base: All Respondents

# 4.2.5 Main Occupation of Respondents

Overall, about one-fourth of the respondents were non-agricultural or casual labors. Nearly 20% of all the respondents were unemployed or retired, 13% were petty business/small shop owners, 8% were transport workers and 6% were students (Table 4.5).

Table 4.5 indicates that the proportion of respondents reporting non-agricultural or casual labor as their main occupation was as high as 47% in Kolkata to as low as 12% in Manipur. Small business as the main occupation was reported by nearly one-fourth of the respondents in Manipur compared to only 9% in Mumbai. The proportion of respondents reporting transport worker as their main occupation was significantly higher in Chennai (19%) compared to all other study locations.

**Table 4.5: Main occupation of the Respondents** 

(All figures are in percentages)

City/State		M	ain Occupation	l .	,
	Non- agricultural/ casual laborer	Unemployed/ not working/ retired	Petty business/small shop owner	Transport worker/ driver	Skilled/semi- skilled laborer in mfg./processing industry
Chennai	15.6	35.2	6.3	18.5	7.4
Delhi	33.6	12.4	13.1	9.5	9.5
Kolkata	46.5	13.9	10.9	6.5	13
Manipur	11.6	22.2	23.5	4.5	1.9
Mumbai	27.4	13.7	9.3	1.9	3.3
Total	25.9	19.7	13.0	8.1	6.7

Base: All Respondents

### 4.2.6 Residential Status of Respondents

All the respondents were asked whether they lived in the city where they were interviewed. Overall, nearly 95% of them reported that they were living in the city where they were interviewed. However, the proportion was slightly lower in case of Manipur where around 15% of the respondents reported that they were living in a city/village other than the one where they were contacted during the survey (Table 4.6).

Table 4.6 indicates that there was a wide variation in length of stay in the city. The proportion of respondents who reported that they were living in the city since their birth was as high as 89% in Chennai and as low as 37% in Mumbai. The same proportion in Manipur, Kolkata and Delhi were 88%, 87% and 44% respectively. Overall, about 69% of the IDUs interviewed across all five study locations were living in the city since birth.

The proportion of respondents who reported that they were staying alone was significantly higher in Mumbai (65%) as compared to the same in other four locations (Delhi-45%, Kolkata- 44%, Chennai- 22%, Manipur -3%). Most of the IDUs interviewed in Manipur (93%) and Chennai (81%) reported to be staying at their

regular residence as compared to only 26% in Mumbai, 53% in Delhi and 62% in Kolkata.

**Table 4.6: Residential status of the Respondents** 

(All figures are in percentages)

City/State	Live in the City/Town *	//Town *   City/Town since		Not Staying at Regular
	•	Birth **		Residence
Chennai	98.5	89.1	21.5	18.9
Delhi	97.8	43.7	45.3	47.4
Kolkata	98.7	87.2	44.3	37.8
Manipur	85.5	88.3	2.6	7.4
Mumbai	98.9	37.1	64.8	73.7
Total	95.5	68.5	34.5	36.2

Base: \* All Respondents

\*\* Those who live in the city

# 4.2.7 Use of Alcohol by Respondents

All the respondents were asked whether they had ever consumed any drinks containing alcohol and, (if yes), the frequency of alcohol intake during the 4 weeks before the survey. Table 4.7 reveals that nearly three-fourths of all the IDU interviewed reported alcohol consumption. The proportion of respondents reporting intake of alcohol was significantly lower in Manipur (20%) compared to all other four locations. However as high as 62% of the IDUs who had ever consumed alcohol in Manipur reported drinking alcohol every day during the last 4 weeks before the survey. In all other four locations the proportion of respondents reporting alcohol consumption on a daily basis (in the last 4 weeks) was significantly lower than in Manipur (Delhi-5%, Kolkata-7%, Mumbai-9%, Chennai-12%).

The proportion of respondents drinking infrequently was as low as 11% in Manipur, compared with 85% in Mumbai, 73% in Kolkata, 72% in Chennai and 67% in Delhi.

**Table 4.7: Alcohol Intake by the Respondents** 

(All figures are in percentages)

City/ State	% Reporting Ever Drinking	Drinking Daily		
		*	once a week *	infrequently *
Chennai	84.1	11.9	16.3	71.8
Delhi	91.6	5.6	26.3	66.6
Kolkata	94.8	7.3	19.7	72.5
Manipur	20.3	61.9	27.0	11.1
Mumbai	85.6	8.7	6.1	85.3
Total	73.1	11.7	17.9	69.9

Base: All Respondents

\* Base : Respondents Reporting Ever Drinking

Note: Drinking infrequently refers to those respondents who consumed alcohol less than once a week and those who did not consume alcohol in the last 4 weeks

#### 4.3 DRUG USE

All the IDUs interviewed across five locations were asked their age when they first started taking any addictive drug. They were also asked how long they had been injecting drugs, how old they were when they first took any injectable drug, frequency of injection (of addictive drugs) in past one month before the survey and type of drugs taken during past one month. The following sub-sections present detailed findings on the drug use pattern of all the respondents across all five study locations.

# 4.3.1 Age at which Started Using Addictive Drugs

Table 4.8 presents the findings on age at which the respondents started using addictive drugs. The median and mean age of starting the use of addictive drugs was 20 years. The mean was lowest in Delhi (19 years) and highest in Chennai (21 years). Nearly one-fifth of the respondents reported starting age of using any addictive drug to be below 16 years and about 45% started between 16 years and 20 years.

There was considerable variation in reported age of starting using addictive drugs across five study locations. The proportion of the respondents who reported that they started using any addictive drug below 16 years was as high as 27% and 29% in Mumbai and Delhi respectively, as compared to only 7% in Chennai. Respondents reporting use of any addictive drug after 25 years was as low as 6% in Manipur as against 15% in Kolkata.

Table 4.8: Age at which started using Addictive Drugs

(All figures are in percentages)

						(7 311 11)	,ui c	5 arc III	per cer	ruges	
City/State	Age at which started using Addictive Drugs										
	Upto	Upto   16-20   21-25   26-35   36+   Mean   SD   Median   Range									
	15								Min	Max	
Chennai	7.4	48.1	31.9	11.9	0.7	21.3	4.3	20	12	40	
Delhi	27.4	43.4	17.2	11.3	0.7	18.9	5.4	18	10	41	
Kolkata	16.1	40.9	26.5	14.8	1.7	20.9	5.8	20	10	46	
Manipur	15.4	52.4	26.0	5.8	0.3	19.5	4.2	19	10	51	
Mumbai	28.5	37.4	17.8	13.7	2.6	19.7	6.6	19	10	55	
Total	19.0	44.8	23.8	11.2	1.2	20.0	5.4	20	10	55	

Base: All Respondents

# 4.3.2 Time Since Injecting Drugs

Overall, the mean duration of injecting drugs at the time of survey, was observed to be 56 months (approximately), i.e. four years and eight months. The mean varied from 92.6 months in Kolkata to around 35 months in Mumbai. Nearly one-third of the respondents reported that they started injecting drugs more than five years back, about 27% started injecting within last 12-24 months. The proportion of respondents reporting injection of drugs during last one year was about 8% (Table 4.9).

Table 4.9 also presents significant variations in reported duration of injection of drugs across five study locations. The proportion of respondents who reported that they

started injecting drugs during last 12 months before the survey was as high as 20% in Mumbai and as low as less than 1% in Kolkata. Similarly, the proportion of respondents who reported that they started injecting drugs more than five years back varied from 63% in Kolkata to 14% in Mumbai.

**Table 4.9: Drug Use - Time since Injecting Drugs** 

(All figures are in percentages)

	(Fin right to the in personninges)										
City/		Time since injecting drugs (in months)									
State	<12	12-24	25-36	37-48	49-60	61+	Mean	SD	Median	Ra	nge
	months									Min	Max
Chennai	6.3	28.9	10.4	8.1	21.5	24.8	46.3	26.8	48	3	96
Delhi	11.3	25.2	15.7	15.3	10.9	21.5	45.6	33.8	36	0	180
Kolkata	0.9	11.3	6.1	10.4	8.7	62.6	92.6	85.6	78	3	840
Manipur	1.9	30.3	15.2	8.1	10.6	33.9	63.3	54.2	48	0	321
Mumbai	20.4	34.8	16.3	9.3	5.2	14.1	34.8	33.4	24	0	216
Total	8.2	26.7	13.0	10.2	11.4	30.5	55.6	53.6	48	0	840

Base: All Respondents

# 4.3.3 Age at which Started Injecting Drugs

Nearly a quarter of all the IDUs interviewed reported that they started injecting drugs before 21 years of age while 20% started after 30 years of their age. The overall mean age of starting injection (of drugs) was 25.7 years while median was 25 years. (Table 4.10)

The age at first initiation of injecting addictive drugs was lowest in Manipur where 46.8% had started by 20 years of age. In Chennai, Delhi and Kolkata, more than a quarter started injecting after 30 years of age.

Table 4.10 Drug Use - Age at which started using Injecting Drugs
(All figures are in percentages)

City/State		Ag	ge at w	hich s	tarted	using i	njecting	drugs		/
	Upto	16-20	21-25	26-30	31+	Mean	SD	Medi	Ra	nge
	15							an	Min	Max
Chennai	0.4	5.9	31.5	36.7	25.6	27.9	5.5	27.5	10	50
Delhi	1.5	19	25.5	23.4	30.7	27.5	7.7	27.0	14	60
Kolkata	2.2	12.2	32.6	27.8	25.2	27.2	7.3	26.0	12	60
Manipur	2.6	44.4	38.6	12.5	1.9	21.3	3.9	21.0	14	40
Mumbai	5.2	21.9	32.2	23.3	17.4	25.3	7.7	24.0	13	60
Total	2.4	21.6	32.3	24.3	19.5	25.7	7.0	25.0	10	60

Base: All Respondents

### 4.3.4 Frequency of Injecting Drugs in the past One month

Nearly half the respondents (45.2%) injected 2-3 times a day while an additional 16.1% injected more frequently (Table 4.11). This pattern was observed in all the sampling units.

Table 4.11: Drug Use - Frequency of Injecting Drug Use in the Past One Month

(All figures are in percentages)

City/Sta	]	Frequency of Injecting Drug Use in the Past One Month										
te	Only	2-3 times a	About	2-6 times a	About	2-3 times	4 or more					
	once a	month	once a	week	once a	a day	times a					
	month		week		day		day					
Chennai	1.9	4.8	1.1	12.2	18.9	40.4	20.4					
Delhi	1.8	10.6	0.4	17.9	12.0	44.9	12.4					
Kolkata	2.2	3.0	2.6	10.0	19.6	52.6	9.1					
Manipur	2.9	2.6	2.9	16.4	32.8	34.4	8.0					
Mumbai	0.7	3.3	0.4	3.8	4.8	56.3	30.7					
Total	1.9	4.9	1.5	12.3	18.0	45.2	16.1					

Base: All Respondents

# 4.3.5 Type of Drugs injected in the past One month

Table 4.12 indicates that over half the respondents reported injecting buprenorphine (53%), followed by 34% who injected heroin, 22% who injected crack, around 6% who injected dextroproxyphene, 3% who injected tranquilizers and 1% who injected a cocktail of heroin and cocaine.

There were wide variations in the type of drugs injected across the five locations. In Manipur 97% respondents reported injecting heroin. All respondents in Mumbai injected crack, while high proportions in Kolkata (97%), Delhi (95%) and Chennai (77%) injected buprenorphine. Buprenorphine and Crack were most commonly injected as a cocktail with Avil or Phenergan.

**Table 4.12 Drug Use - Type of Drugs Injected in the Past One Month** 

(All figures are in percentages)

City/State	Buprenorphine	Heroin	Crack	Dextroprooxyphene	Tranquilizers	Heroin and cocaine
						together
Chennai	77.0	55.9	8.1	7.8	1.5	1.9
Delhi	95.3	0.7	0.7	4.0	11.3	0.7
Kolkata	97	2.6	3.5	2.2	0.4	0.9
Manipur	8.4	96.5	0.0	12.2	2.3	1.0
Mumbai	0.0	0.0	100.0	0.0	0.0	0.4
Total	53	33.9	22.3	5.5	3.2	1.0

Base: All Respondents

#### 4.4 NEEDLE AND SYRINGE SHARING BEHAVIOUR

This section provides information on needle and syringe sharing behavior. The discussion will be centered on sharing behavior, types and number of partners with whom shared and needle/syringe cleaning behavior. It will also focus on frequency of using clean needles, awareness of availability of new/unused needles/syringes and other sharing behavior like, giving/renting/selling used needles/syringes, using pre-filled syringes, squirting from one needle to another, sharing utensils for cleaning, sharing utensils for drawing drugs and finally the drug related treatment status of the respondents.

### 4.4.1 Last time shared (previously used) needles/syringes

Overall, around 41% respondents reported sharing i.e. using previously used needles/syringes. This proportion was the highest in Chennai where 62% respondents reported this behavior, followed by Manipur (55%) and was the lowest in Kolkata where 23% respondents reported sharing behavior. The proportions in Delhi (31%) and Mumbai (30%) were similar. (Table 4.13)

# 4.4.2 Frequency of sharing (previously used) needles/syringes in the past One month

Overall, 4% respondents reported sharing every time they injected in the past one month, 14% shared most times, 8% shared almost half the time, nearly a third (29%) shared occasionally and 44% never shared needles/syringes while injecting in the past 1 month.

Across locations, Chennai had the highest proportion of respondents who shared every time they injected. Around 78% respondents in Kolkata never shared needle/syringe when they injected in the past month, compared with lower proportions in Mumbai (31%) and Chennai (30%). (Table 4.13)

Table 4.13: Needle and Syringe Sharing Behavior - Needle/Syringe Previously used by Someone Else

(All figures are in percentages)

City/	Last time	Frequ	Frequency of Needle Sharing in Past One Month					
State	injected	Every	Most	Almost half		Never		
	drugs	time	times	the time	lly			
Chennai	61.5	13	21.9	10.0	24.8	30.4		
Delhi	30.7	1.8	11.3	4.0	34.7	48.2		
Kolkata	22.6	2.2	6.5	5.2	8.3	77.8		
Manipur	55.3	3.2	15.8	8.0	33.1	39.9		
Mumbai	29.6	0.7	13.7	14.1	40.7	30.7		
Total	40.9	4.2	14.1	8.3	29.1	44.3		

Base: All Respondents

#### 4.4.3 Frequency of cleaning shared needles/syringes in the past One month

Overall, 43% respondents reported cleaning every time they injected in the past one month, 22% cleaned most times and 3% never cleaned needles/syringes while injecting in the past 1 month. (Table 4.14)

There were wide variations in the frequency of cleaning behavior across the five locations. In Kolkata a fourth of all respondents never cleaned their needles/syringe before injecting. Over a third of the respondents in Delhi (37%) and Manipur (35%) reported cleaning occasionally. (Table 4.14)

Table 4.14: Frequency of Cleaning shared Needles in the past One Month (All figures are in percentages)

City/State Frequency of Cleaning Shared Needles in the past one month

	<b>Every time</b>	Most times	Almost half	Occasionally	Never
			the time		
Chennai	67.0	18.6	6.9	5.3	2.1
Delhi	44.4	11.3	1.4	37.3	4.9
Kolkata	39.2	15.7	5.9	9.8	25.5
Manipur	34.8	19.3	10.2	35.3	0.5
Mumbai	26.2	35.8	23.0	14.4	0.5
Total	42.8	21.5	10.6	21.3	3.4

Base: Respondents reporting sharing Behavior in Past One Month

# 4.4.4 Method of cleaning shared needles/syringes in the past One month

Overall, nearly 83% respondents who cleaned needles in the past 1 month reported using cold water for cleaning, 8% used hot water, around 2% used bleach or alcohol respectively and 1% boiled the needles/syringes.

Among alternative methods, in Chennai, 15% respondents used hot water for cleaning and 11% respondents in Kolkata used boiling as a method of cleaning their needles/syringes.

Table 4.15: Cleaning Behavior - Method of Cleaning Used Syringes / Needles (All figures are in percentages)

City/State	Method of Cleaning used Syringes/Needles					
	Cold	Hot	Boiling	Bleach	Alcohol	
	water	water				
Chennai	75.0	15.2	0.5	1.6	1.6	
Delhi	82.8	6.7	0.0	2.2	0.0	
Kolkata	75.0	8.3	11.1	2.8	2.8	
Manipur	81.2	8.1	1.6	3.8	4.3	
Mumbai	93.5	4.3	0.5	0.0	0.5	
Total	82.8	8.7	1.2	1.9	1.8	

Base: Respondents reporting sharing Behavior in Past 1 Month

### 4.4.5 Frequency of Using Unused Clean Needles/Syringes in the past One month

Table 4.16 presents the findings on the frequency of injecting with a needle that no one else had used other than the respondent in the past month.

Overall, little less than half the respondents (45%) reported using an unused needle (other than self used) every time, and nearly a fourth (24%) reported using most times and 5% never used an unused needle/syringe in the past 1 month.

Nearly three fourth of the respondents in Kolkata (76%) used unused needle/syringe every time. The proportion of respondents who never used unused needle/syringe in the past 1 month in Chennai was nearly 11%.

Table 4.16: Needle and Syringe Sharing Behavior - Frequency of Using Unused Syringes/Needles in the Past One Month

(All figures are in percentages)

City/State	Frequen	Frequency of Using Unused Syringes/Needles in the Past							
	Every time	Most times	One Month Almost half the time	Occasionall	Never				
Chennai	28.9	27.8	17.4	15.2	10.7				
Delhi	47.1	16.1	5.5	27.0	4.4				
Kolkata	76.1	4.3	5.2	10.9	3.5				
Manipur	41.2	27.7	9.3	20.3	1.6				
Mumbai	37.4	40.4	11.5	7.8	3.0				
Total	45.1	23.9	9.9	16.5	4.6				

Base: All Respondents

# 4.4.6 Frequency of Giving/Renting/Selling Used Needle/Syringe in the Past One month

Overall, nearly 44% of respondents never gave/rented/sold used needles/syringes in the past 1 month. This is in consonance with the data in the previous sub-section, where it was reported that 45 percent of the respondents only used unused needles/syringes. (Table 4.17)

In Kolkata 73% used unused syringes/ needles regularly Even though over a fourth of respondents in each location reported that they never gave/rented/sold used needles/syringes in the past month, high proportions of respondents reportedly occasionally practiced this risk behaviour in Mumbai (50%), Manipur (42%), Delhi (37%) and Chennai (26%). This proportion was significantly lower in Kolkata (8%) (Table 4.17).

Table 4.17: Needle and Syringe Sharing Behavior - Frequency of Lending/Renting/Selling Used Syringes/Needles in the Past One Month

(All figures are in percentages)

	(Till ligates are in percentages)								
City/State	Frequency	Frequency of Lending/Renting/Selling Used Syringes/Needles in							
		the Past One Month							
	Every time	Most times	Never						
	-		the time						
Chennai	14.4	22.2	9.6	25.9	27.8				
Delhi	2.2	12.8	4.0	36.5	44.5				
Kolkata	8.7	3.9	6.1	8.3	73.0				
Manipur	3.2	5.5	5.8	41.5	44.1				
Mumbai	2.6	4.8	9.3	49.6	33.7				
Total	6.1	9.9	6.9	33.4	43.8				

Base: All Respondents

### 4.4.7 Awareness of Availability of New/Unused Needles/Syringes

On being asked whether they could obtain new/unused needles/syringes when they needed them, as high as 97 percent of respondents, at an all India level, answered in the affirmative.

On being asked if they knew a person/place from where they could obtain new/unused needles/syringes when they needed them nearly all respondents (99%) responded positively. (Table 4.18)

Across states, all respondents in Delhi and Kolkata responded positively to both the variables and in the remaining units this proportion was over 90%. The level of knowledge about the access to unused syringes clearly shows that the lack of knowledge is not the bottleneck to the required behaviour change.

At an overall level, the spontaneous responses on place/person from where to obtain new/unused needles or syringes show that most respondents reported pharmacist/chemist (94%) as a source, 40% reported NGO worker, 10% friends, 7% from drug dealers and 4% from other drug users. (Table 4.18)

Over 90% of respondents in all locations reported that they would obtain new needles/syringes from pharmacist/chemist. In Kolkata the ID users avail it mostly from NGO workers, which is part of a targeted intervention. In Manipur and Mumbai nearly 50% of respondents reported NGO workers as a source. In Manipur the proportion of respondents reporting friends, as a source was 18%, significantly higher than the other units.

Table 4.18: Needle and Syringe Sharing Behavior - Knowledge of Availability of New/Unused Needles/Syringes

(All figures are in percentages)

City/State	Obtainable	Know	Person/place where Available					
		person/place where available	Pharmacist / Chemist	NGO worker	Friends	Drug Dealer	Other drug users	
Chennai	95.9	98.9	96.7	23.3	14.1	3.7	4.4	
Delhi	100.0	100.0	96.4	7.7	8.8	5.5	1.1	
Kolkata	100.0	100.0	85.7	71.3	1.3	17.8	0.9	
Manipur	95.2	97.4	92.3	49.8	18.3	8.4	9.6	
Mumbai	94.4	99.3	98.5	51.1	5.2	0.4	2.2	
Total	97.0	99.0	94.1	39.9	10.0	6.9	3.9	

Base: All Respondents

#### 4.4.8 Ever Injected Drugs from a Pre-filled Needle/Syringe in the past One-month

Pre-filled syringe refers to a syringe that was filled without the respondent witnessing it. For the entire country, nearly 20% respondents had injected drugs from a pre-filled needle/syringe

in the past 1-month. This proportion was significantly lower in Kolkata (9%) but nearly a third of the respondents in Chennai (29%) and Manipur (29%) reported this behaviour. (Table 4.19)

**Table 4.19: Needle and Syringe Sharing Behavior - Ever Used pre filled Syringe** in the Past One Month

(All figures are in percentages)

City/State	Ever Used pre filled	<b>Ever Used pre filled Syringe in the Past 1 Month</b>				
	Yes	No				
Chennai	28.5	71.1				
Delhi	14.2	85.8				
Kolkata	9.1	90.9				
Manipur	28.9	70.4				
Mumbai	13.7	86.3				
Total	19.5	80.3				

Base: All Respondents

# 4.4.9 Frequency of Injecting Drugs after Squirting from another Used Syringe in the past One month

Overall, nearly two thirds of respondents reported that they never injected drugs by squirting from another used syringe in the past 1 month (69%). However, almost 20% reported occasionally squirting drugs from another used syringe in the past one month (Table 4.20).

Most respondents in Kolkata (90%), Mumbai (80%) and Delhi (71%) reported never injecting drugs by squirting from another syringe. (Table 4.20).

**Table 4.20: Needle and Syringe Sharing Behavior - Frequency of Using Syringe with Drugs Squirted from Another Used Syringe in the Past One Month** 

(All figures are in percentages)

City/State	Frequency of Using Syringe with Drugs Squirted from Another Use							
	1 0	Syringe in the Past One Month						
	<b>Every time</b>	Most times	Most times   Almost half   Occasionall   Ne					
			the time	y				
Chennai	3.0	14.8	10.4	23.7	48.1			
Delhi	0.0	2.6	2.2	24.5	70.8			
Kolkota	0.0	2.2	2.6	5.2	90.0			
Manipur	1.0	5.5	6.8	28.6	58.2			
Mumbai	0.4	1.1	1.9	16.3	80.4			
Total	0.9	5.3	4.9	20.4	68.6			

Base: All Respondents

# 4.4.10 Frequency of Sharing Cooker/Vial/Container/Filter/Rinse water for boiling Needles/Syringes in the Past One Month

Overall, over half the respondents reported never sharing cooker/vial/container/filter/rinse water for boiling in the past 1 month (Table 4.21).

Among those who shared a cooker / vial / container / filter / rinse water for boiling, Delhi reported this highest incidence (15%) followed by Kolkata (13%) and Chennai (10%).

Table 4.21: Needle and Syringe Sharing Behavior - Frequency of Sharing Cooker/Vial/Container/ Filter/ Rinse Water when Injecting Drugs in the Past One Month

(All figures are in percentages)

City/State		tainer/Filter/ Rinse Past 1 Month			
	<b>Every time</b>	Most times	Almost half the time	Occasionally	Never
Chennai	10.4	21.9	7.8	24.4	35.6
Delhi	15.3	6.9	1.8	20.1	54.4
Kolkota	12.6	3.5	3.0	4.3	76.5
Manipur	4.8	14.5	10.0	37.3	33.4
Mumbai	3.7	3.7	3.7	14.8	74.1
Total	9.2	10.4	5.5	21.2	53.5

Base: All Respondents

# 4.4.11 Frequency of Drawing Drugs from a Common Container in the past One month

Across the country, around 43% respondents reported the risk behavior of drawing drugs from a common container in the past 1-month. 7% respondents reported drawing up from a common container every time.

Across locations there were wide variations in this behavior. In Mumbai over a fifth reported this behavior every time (21%) whereas in Kolkata none of the respondents consistently used a common container for drawing drugs in their syringes.

Table 4.22: Needle and Syringe Sharing Behavior - Frequency of Drawing Drug Solution from a Common Container in the Past One-Month
(All figures are in percentages)

City/State	Frequency of Drawing Drug Solution from a Common Container in the Past One Month						
	Every time	Most times	Almost half the time	Occasionally	Never		
Chennai	8.5	22.2	11.1	19.6	38.5		
Delhi	0.4	8.0	4.4	39.8	47.4		
Kolkota	0.0	4.8	2.6	7.4	84.8		
Manipur	5.1	19.9	12.5	30.5	31.8		
Mumbai	21.1	32.6	10.0	18.1	18.1		
Total	7.2	17.9	8.4	23.8	42.6		

Base: All Respondents

# 4.4.12 Status of Treatment for Drug Use

For the country as a whole, over half the respondents had never received treatment for drug use (55%). However, high proportions of respondents' underwent treatment at some point of time but were not currently receiving any treatment (37%). The proportion currently receiving treatment was very low (8%). (Table 4.23)

Across the cities, the proportion of respondents who had never received any treatment for drug use was the highest in Mumbai (70%), followed by Delhi (55%). The highest proportion of respondents who were currently under treatment was in Kolkata (14%) and Manipur (13%) and the highest proportion of respondents who had been in treatment but not currently was in Chennai (44%).

**Table 4.23: Treatment for Drug Use** 

(All figures are in percentages)

City/State	<b>Current Status of Treatment</b>						
	Currently under treatment	Was ever under in treatment but not now	Have never received treatment				
Chennai	4.1	44.1	51.9				
Delhi	7.7	37.6	54.7				
Kolkata	13.5	35.7	50.9				
Manipur	12.9	37.9	49.2				
Mumbai	1.1	28.5	70.4				
Total	7.8	36.8	55.4				

Base: All Respondents

# 4.4.13 Type of Treatment/Help Received

Respondents who had ever received treatment were asked what type of treatment or help they had received.

Overall, among all respondents who had ever received treatment most reported either counseling (41%) or detoxification (39%). The other types of treatment reported were helped/forced to quit cold turkey (27%), residential rehabilitation (20%), drug substitution (13%), and treatment of abscess and health education at 12% each. Interestingly 10% reported going to self help groups for economic rehabilitation. (Table 4.24)

Across the states, the combination of approaches to treat ID users seemed to be unique. In Chennai over half the respondents received detoxification as a form of treatment (56%) and 49% received counseling. In Delhi 47% of the respondents received detoxification and nearly a third received drug substitution (30%). Little less than half the respondents in Kolkata were helped/forced to quit cold turkey (49%) and 43% received detoxification as a form of treatment. In Manipur almost all the forms of treatment were quite popular. The highest proportions received counseling (64%), followed by residential rehabilitation at 59% and around a third received detoxification (34%) and were helped/forced to quit cold turkey (37%). Nearly a fourth of the respondents received health education (25%). In Mumbai, treatment for abscess was the commonest type of treatment (56%). Nearly a fifth of respondents in Mumbai were helped/forced to quit cold turkey and undertook harm reduction through drug substitution. (Table 4.24)

Table 4.24: Treatment for Drug Use - Type of Treatment / Help Received (All figures are in percentages)

City/State	Type of Treatment / Help Received							
	Counseling	Self help groups	Residential rehabilitation	Treat- ment for abscess	Health education	Detoxific ation	Helped/ forced to quit cold turkey	Drug substitution
Chennai	48.5	15.4	7.7	5.4	3.8	56.2	22.3	14.6
Delhi	12.1	8.1	12.9	6.5	2.4	46.8	3.2	29.8
Kolkata	37.2	0.9	0.0	4.4	16.8	43.4	48.7	4.4
Manipur	63.9	18.4	58.9	3.8	24.7	34.2	36.7	0.6
Mumbai	36.3	3.8	0.0	57.5	7.5	2.5	21.3	20.0
Total	41.3	10.4	19.7	11.9	11.9	39.0	26.9	12.9

Base: All Respondents who have ever received treatment

#### 4.5 AWARENESS OF HIV/AIDS

The following sections highlight the awareness level among the respondents regarding different issues pertaining to the prevention of HIV/AIDS and common myths pertaining to HIV/AIDS.

#### 4.5.1 Ever Heard of HIV/AIDS

The proportion of respondents who had ever heard of HIV/AIDS was significantly high across the country (97%) (Table 4.25).

# 4.5.2 Awareness of transmission through needle sharing

Table 4.25 presents data on awareness of HIV transmission through needle sharing among all respondents. The proportion of respondents who were aware of the transmission of HIV through the use of needles used by someone infected with HIV was very high across the country (93%).

### 4.5.3 Awareness of vertical transmission

Vertical transmission refers to transmission of the virus from mother to her unborn child or newly born child during childbirth. The proportion of respondents who were aware of vertical transmission was 83% across the country.

# 4.5.4 Awareness of transmission through breast feeding

Table 4.25 presents data on transmission of HIV from an infected mother through breast-feeding to her child among all respondents. 74% respondents were aware of transmission through breast-feeding.

Table 4.25: Awareness of HIV/ AIDS and its routes of transmission (All figures are in percentages)

City/	Ever heard of	Awareness about different routes of transmission *					
State	HIV/AIDS	Needle sharing	Vertical transmission	Breast-feeding			
Chennai	97.8	95.6	95.9	90.0			
Delhi	94.2	85.4	66.4	63.5			
Kolkata	95.7	92.2	81.3	71.7			
Manipur	100.0	96.8	89.1	77.2			
Mumbai	95.2	92.6	78.9	66.3			
Total	96.7	92.6	82.5	73.9			

Base: All Respondents

#### 4.5.5 Awareness of prevention through consistent condom use

For the entire country 84 percent of the respondents were aware that consistent condom use could prevent HIV. Awareness levels were 90% in Manipur and Mumbai. In Chennai 88% of respondents were aware that consistent condom use could prevent HIV and this proportion was 77% in Delhi. (Table 4.26)

### 4.5.6 Awareness of Prevention by having one faithful uninfected sex partner

Nearly three fourth of all respondents were aware that HIV can be prevented by having one, faithful and uninfected partner (71%). This proportion was significantly higher in Mumbai (83%) (Table 4.26).

### 4.5.7 Awareness of Prevention through sexual abstinence

For the entire country awareness of this method of prevention was lower than the other two methods.

Around two thirds of all respondents reported that sexual abstinence could prevent HIV (65%). (Table 4.26)

## 4.5.8 Awareness of Prevention by switching to non-injecting drugs

Switching to non-injecting drugs is a form of harm reduction, whereby, even though drug-taking behavior continues, the risk of contracting HIV is reduced.

At an overall level, among all respondents, the proportion aware that switching to non-injecting drugs protects against HIV transmission was 55%. There were wide variations in awareness levels among different locations. The proportion aware of harm reduction was higher in Chennai (74%) and Mumbai (71%) and lower in Manipur (42%) and Delhi (36%) (Table 4.26).

## 4.5.9 Knowing two Methods of Prevention - condom use and uninfected sex partner

This section pertains to the knowledge of the two methods of prevention i.e. consistent condom use and faithful sex partnership. Table 4.26 highlights the proportion of respondents correctly aware of both methods of prevention.

For the entire country around two third of all respondents had correct knowledge of both methods of prevention (65%). Awareness levels were 80% in Mumbai, but were significantly lower than the all India proportion in Kolkata (45%) and Delhi (53%). In Manipur 74% of the respondents had correct knowledge of the two methods of prevention and this proportion was 67% in Chennai. (Table 4.26)

Table 4.26: Awareness of methods of preventing HIV infection

(All figures are in percentages)

City/State	A	wareness abo	ut differen	t methods of	prevention
	Consistent condom use	Having one uninfected faithful partner	Sexual Abstinence	Switching to non injecting drugs	Knowing first two methods of prevention i.e. consistent condom use and uninfected faithful partnership
Chennai	88.1	73.7	71.9	74.1	66.7
Delhi	77	59.9	51.8	36.1	52.6
Kolkata	69.6	59.6	53.0	53.0	45.2
Manipur	90.0	78.1	67.2	41.8	74.0
Mumbai	90.4	82.6	80.4	70.7	80.0
Total	83.6	71.3	65.2	54.8	64.5

Base: All respondents

# 4.5.10 Respondents aware that mosquitoes and sharing food does not transmit HIV and that a healthy looking person maybe suffering from HIV

Table 4.27 presents the proportion of respondents who correctly identified the two most common misconceptions associated with the transmission of HIV and were also aware that a healthy looking person may be suffering from HIV.

The two most common misconceptions are:

- 1. HIV can be transmitted through sharing a meal with an infected person
- 2. HIV can be transmitted through mosquito bites

For the entire country, the proportion of respondents who were aware that HIV could not be transmitted through sharing a meal with an infected person was 69%. There were wide variations among awareness levels in the five locations. Nearly 91% respondents in Manipur and 82% in Chennai correctly identified that sharing a meal with an infected person is not a route of transmission of HIV. (Table 4.27)

Overall, the proportion of respondents aware that HIV cannot be transmitted through mosquito bites was 67%. Within locations wide variations were observed. The highest awareness levels were recorded in Chennai (91%). This proportion was the lowest in Mumbai (49%) (Table 4.27).

Overall, the proportion of respondents who were aware that a healthy looking person could be infected with HIV was 71%. Across States, awareness levels were high. Awareness was significantly higher in Mumbai (83%). It was significantly lower in Delhi (54%). (Table 4.27)

Less than half the respondents could correctly identify all three issues (43%). This proportion was higher in Chennai (62%) and Manipur (61%). The least awareness was observed in Delhi (25%). (Table 4.27)

Table 4.27: Correct Beliefs about HIV transmission
(All figures are in percentages)

City/State	is not transmitted through		Proportion aware that a healthy	Proportion of respondents
	Sharing a meal	Mosquito bites	looking person may be suffering from HIV	correctly identifying all three issues
Chennai	81.5	91.1	75.6	61.9
Delhi	54.7	50.7	53.6	24.8
Kolkata	51.7	53.0	68.3	29.6
Manipur	90.7	87.8	71.4	60.8
Mumbai	60.0	48.9	83.3	31.1
Total	68.9	67.3	70.5	42.5

Base: All respondents

# 4.6 AWARENESS OF STD, SELF REPORTED STD PREVALENCE AND TREATMENT SEEKING BEHAVIOUR

The section related to STD awareness, STD prevalence and treatment seeking behavior comprise an important part of the survey. The following sections provide an insight into the above-mentioned issues for all the locations where the survey was carried out.

#### 4.6.1 Ever heard of STD

A prompted question on whether the respondent had "heard of problems like genital discharge or genital ulcer/sore or burning while passing urine which people get through sexual intercourse" was asked to all the respondents. Interviewers had to make sure that the respondents understood the symptoms and they also used local or popular terminologies to clarify the question. Table 4.28 presents the findings on the above question.

For the entire country around three fourth of the respondents had ever heard of STD (76%). This proportion was significantly higher in Kolkata (88%) and Manipur (84%) (Table 4.28).

## 4.6.2 Awareness of STD symptoms

Respondents were asked two prompted questions on awareness of other STD symptoms (apart from the three mentioned earlier) for both men and women.

For awareness of other STD among women the symptoms included lower abdominal pain, swellings in the groin area, pain during sexual intercourse and warts.

Overall, less than a third of the respondents aware of STD were aware of other STD symptoms among women (59%). Kolkata was the location with the highest proportion of respondents who had ever heard of STD and it also had the highest proportion aware of STD symptoms in women (77%). Similarly, Mumbai had the lowest proportion that had ever heard of STD and the lowest proportion aware of other STD symptoms in women (43%).

For awareness of Other STD symptoms among men, the symptoms included swellings in the groin area, warts, and can't retract foreskin.

Overall, around a third of the respondents aware of STD were aware of other STD symptoms among men (67%). Like in awareness of symptoms among women, Kolkata had the highest proportion of respondents who had ever heard of STD and it also had the highest proportion aware of other STD symptoms in men (82%). Similarly, Mumbai had the lowest proportion that had ever heard of STD and the lowest proportion aware of other STD symptoms in men (51%). (Table 4.28).

Table 4.28: Awareness of STD and STD symptoms among WOMEN and MEN (All figures are in percentages)

City/State	Ever heard of STD	Aware of other STD symptoms among WOMEN	Aware of other STD symptoms among MEN	
Chennai	73.7	69.3	64.8	
Delhi	74.5	49.6	68.2	
Kolkata	88.3	77.4	81.7	
Manipur	83.6	60.8	70.7	
Mumbai	58.5	42.6	51.1	
Total	75.6	59.4	67.0	

Base: All Respondents

## 4.6.3 Self Reported STD prevalence

Table 4.29 presents the findings on STD prevalence (self reported) among the respondents. During the survey the respondents were asked if they ever suffered the following symptoms in the past 12 months:

- 1. Genital discharge
- 2. Ulcer / Sore in the Genital area
- 3. Burning Pain during Urination

Table 4.29 presents the proportion of respondents who suffered from any of the symptoms.

Overall, 11 percent of respondents in the entire country reported genital discharge in the past 12 months. This proportion was significantly higher in Delhi (16%) and was the lowest in Manipur (8%). For the entire country the proportion of respondents reporting ulcer/sore in the genital area in the past 12 months was similar to those reporting genital discharge. Similarly, Delhi had the highest proportion reporting ulcer/sore in the genital area (18 %) while low proportions were reported in Manipur and Kolkata (8%).

Overall, the most prevalent STD symptom was burning/pain during urination (20%). This proportion was significantly higher in Mumbai (31%) and Delhi (26%) and lower in Manipur (9%) and Kolkata (10%) (Table 4.29).

Overall, 17% respondents reported that they suffered from ulcer/sore or genital discharge in the past 12 months. This proportion was significantly higher in Delhi (22%).

A fourth of all respondents had suffered from at least one STD symptom in the past 12 months (26%). This proportion was significantly higher in Mumbai (36%) and Delhi (32%) and lower in Kolkata (17%) and Manipur (16%).

Nearly 12% of all respondents had suffered from more than one symptom in the past 12 months. This proportion was significantly higher in Delhi (18%). In Kolkata (8%) and Manipur (7%) lower proportions of respondents reported suffering from more than one symptom (Table 4.29).

**Table 4.29: Self-Reported STD Prevalence in last Twelve months** 

(All figures are in percentages)

City/Sta te	Had a genital discharge in past 12 months	Had ulcer/sore in past 12 months	Had burning pain during urination in past 12 months	Had more than one symptoms	least one	Had Ulcer/Sore or Genital discharge
Chennai	12.2	10	22.2	11.1	27.4	15.6
Delhi	16.4	17.9	26.3	18.2	32.1	22.3
Kolkata	10.4	8.3	10.4	8.3	17.4	13.9
Manipur	7.7	8.4	9.0	6.8	16.4	13.5
Mumbai	8.9	13.0	30.7	13.3	35.9	17.0
Total	11.1	11.5	19.7	11.5	25.8	16.5

Base: All Respondents

## 4.6.4 STD Treatment Seeking Behaviour

Those respondents who reported any symptom of STD in the last 12 months were asked where they had gone for treatment of their last episode STD. Table 4.31 presents the 5 commonest treatment choices reported.

At the national level, about 37 percent of the respondents, who reported any symptoms of STD, did not take any treatment during the last episode, while 20 percent respondents reported purchasing medicines from a chemist shop. The proportion of respondents who visited any private hospital / clinic and government hospital / clinic last time were 18% and 17% respectively. About 13% of the respondents reported taking some home based remedy.

There were considerable inter-state variations. Across states, it can be seen that over a fourth of the respondents took no treatment at the last episode of STD. In Mumbai 54% did not take any treatment for the last episode. In Manipur and Chennai, a significantly high proportion of respondents purchased medicine from a chemist shop (37% and 35% respectively) compared with 8% in Mumbai. In Kolkata 40 percent respondents went to a private hospital/clinic. In Manipur a higher proportion of respondents went to private hospital/clinic (31%) than to a government hospital/clinic (22%). The proportion of respondents taking home based remedy in Manipur (20%) and Mumbai (18%) was significantly high.

**Table 4.30: STD Treatment Seeking Behavior** 

(All figures are in percentages)

City/State		Purchased medicine from a chemist shop	-	Went to Government	Took home based remedy
				hospital/clinic	
Chennai	28.4	35.1	4.1	6.8	6.8
Delhi	34.1	18.2	27.3	30.7	9.1
Kolkata	25.0	20.0	40.0	0.0	12.5
Manipur	29.4	37.3	31.4	21.6	19.6
Mumbai	53.6	8.2	4.1	15.5	17.5
Total	36.6	22.0	18.0	16.6	12.9

Base: Those who reported any symptom of STD in last 12 months

Table 4.31 indicates that more than half the respondents reported that they would seek treatment from a government hospital/clinic (61%) as compared to about 23% of respondents reporting private hospital/clinic as their preference if they suffered from any symptom of STD in the future. Manipur recorded the highest proportion of respondents who preferred to seek treatment from a private hospital/clinic (36%).

Around 7% of all respondents reported that they would seek treatment from an NGO peer educator. Only 2% in Chennai and Mumbai stated this option.

Table 4.31: Treatment Source Proposed to be utilized for future Episodes
(All figures are in percentages)

City/ State	Government hospital/clinic	Private hospital/clinic	NGO peer educator	Medicine from chemist shop	Home based remedy
Chennai	62.6	21.9	2.2	1.5	2.2
Delhi	52.9	26.3	8.4	3.3	2.2
Kolkata	76.1	13.9	7.8	1.3	0.0
Manipur	43.7	36.3	11.6	4.8	0.6
Mumbai	74.4	14.4	1.9	1.5	4.8
Total	61.0	23.2	6.5	2.6	2.0

Base: All Respondents

#### 4.7 SEXUAL BEHAVIOR AND CONDOM USAGE

This section deals with the sexual history of injecting drug users. This section includes information on age at first sex, sex with commercial, non-regular and regular female partners and the mean number of female sex partners in the last twelve months. This also includes last time condom use and consistent condom use with different types of female partners, persons who suggested condom use at last sex, type of condom brands used at last sex, source of condom used at last sex and reasons for not using condom at last sex with any female partner.

## 4.7.1 Ever had sex and Age at first sex with any partner

All respondents were asked if they ever had sexual intercourse. Sexual intercourse was defined as penetrative vaginal or anal sex.

Overall, nearly 87 percent of all respondents ever had sexual intercourse.

Table 4.32 presents the age at first sex of all respondents who ever had sexual intercourse across the various locations.

Overall, 66% reported that they first had sex when they were aged 16-21 years. 12% reported sex before the age of 16 years. The mean age at first sex was 19.4 years (SD 3.6), while the median age was 19 years (Range 10-36 years).

Across locations, there were considerable variations in the proportion of respondents reporting age at first sex below 16 years. In Mumbai (27%) and Delhi (17%) a significant proportion reported sex below 16 years of age. (Table 4.32)

Table 4.32: Ever had Sexual Intercourse and Age at First Sex with any Partner (All figures are in percentages)

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City/State	Ever had	A	Age groups (in years)				Mean	Median	SD	Rar	ige
	sexual intercourse	Upto 15	16-18	19-21	22-25	>25				Max.	Min
Chennai	86.7	3.0	31.2	42.7	17.9	5.1	20.0	20.0	2.9	14	31
Delhi	91.6	16.7	39	27.1	12.7	4.4	18.7	18.0	3.6	10	33
Kolkata	92.2	6.6	36.3	30.7	18.9	7.5	19.9	19.5	3.7	14	34
Manipur	77.2	3.8	25.4	35.0	28.3	7.5	20.7	20.0	3.5	14	37
Mumbai	87.0	26.8	43.4	18.7	6.8	4.3	17.7	17.0	3.4	12	35
Total	86.5	11.5	35.1	30.8	16.9	5.7	19.4	19.0	3.6	10	37

Base: All Respondents

#### 4.7.2 Sex with Commercial/Non-regular/Regular female partners

A "commercial partner" was defined as a partner with whom the respondent had sex in exchange for money. Overall, 16% of all respondents had sex with a commercial partner in the last 12 months. (Table 4.33)

A "non-regular partner" was defined as a sexual partner to whom the respondent was not married or had never lived with and did not pay for sexual intercourse. Overall, 10% of the respondents reported sex with "non-regular partners" in the last 12 months. (Table 4.33)

A "Regular Partner" was defined as spouse or live-in partners. Over one fourth of the respondents (27%) reported having sex with any regular partner in the last 12 months. (Table 4.33)

The proportion of respondents reporting sex with commercial partners was nearly a fourth of all respondents in Delhi (25%) and Manipur (23%), compared with only 8% in Mumbai.

The proportion of respondents reporting non-regular non-paying partners in the last 12 months was considerably higher in Delhi (18%) and in Manipur (14%), but was considerably lower in Kolkata (4%) and Mumbai (3%).

In Chennai, the proportion of respondents reporting sex with regular partners was 46% as against 9% in Mumbai. (Table 4.33)

Table 4.33: Sex with Commercial/ Non-Regular/ Regular Sex Partners in last twelve months

(All figures are in percentages)

City/State	Had sex with any commercial partner in last 12 months	Had sex with any non regular partner in last 12 months	Had sex with any regular partner in last 12 months
Chennai	11.9	9.6	46.3
Delhi	25.2	17.5	30.7
Kolkata	10.9	4.3	24.3
Manipur	22.5	13.5	23.5
Mumbai	7.8	3.3	8.9
Total	16.0	10.0	26.7

Base: All Respondents

## 4.7.3 Mean Number of Commercial/Non-Regular/Regular Female Partners in Last Twelve Months

The mean number of commercial, non-regular and regular female partners was reported as 4.6, 2.0 and 1.0 respectively. The median number was 3.0, 1.0 and 1.0 respectively (Table 4.34). The multiplicity of partners significantly increases the probability of risk of HIV/AIDS infection, especially as the respondent group faces the risks related to injecting drug use.

Respondents in Delhi reported the highest mean number of commercial partners (7.0) and non-regular non-paying partners (2.8) (Table 4.34).

Table 4.34: Number of Commercial/ Non-Regular/ Regular Partners in Last 12 Months

(All figures are in percentages)

City/ State	No. Of commercial partners *		ate commercial sexual partners **			No. Of regular partners ***		
	Mean	Median	Mean Median		Mean	Median		
Chennai	4.1	1.5	2.3	1.5	1.0	1.0		
Delhi	7.0	4.0	2.8	2.8 2.0		1.0		
Kolkata	4.7	2.0	1.7	1.0	1.0	1.0		
Manipur	3.1	2.0	1.2	1.0	1.0	1.0		
Mumbai	2.3	2.0	1.7	2.0	1.0	1.0		
Total	4.6	3.0	2.0	1.0	1.0	1.0		

\* Base: Those who had sex with any commercial partner in last 12 months

<sup>\*\*</sup> Base: Those who had sex with any non regular partner in last 12 months

<sup>\*\*\*</sup> Base: Those who had sex with any regular partner in last 12 months

## 4.7.4 Last time condom use with Commercial/Non-Regular/Regular Female Partners

Overall, around 60% respondents' who had sex with any commercial partner in the last 12 months reported using a condom at last sex. Around a third of the respondents' who had sex with any non-regular partner in the last 12 months reported using a condom at last sex (34%) and the proportion was similar for those who had sex with their regular partners (34%). (Table 4.35).

Across locations it can be seen that among respondents in Delhi condom usage among commercial, non-regular and regular partners was significantly lower (42%, 15% and 24% respectively). Condom usage with all types of partners was higher in Manipur where it was 80% among commercial partners, 50% in non-regular partners and 56% among regular partners.

Last time condom use with non-regular partners was highest on Kolkata (70%).

Table 4.35: Last Time Condom Use with Commercial/ Non-Regular/ Regular Partners

(All figures are in percentages)

City/ State	Last time condom use with commercial partner	Last time condom use with non regular partner **	Last time condom use with regular partner
Chennai	56.3	26.9	28.0
Delhi	42.0	14.6	23.8
Kolkata	64.0	70.0	37.5
Manipur	80.0	50.0	57.5
Mumbai	57.1	44.4	20.8
Total	60.4	34.1	34.0

<sup>\*</sup> Base: Those who had sex with any commercial partner in last 12 months

## 4.7.5 Consistent condom use with Commercial/Non-Regular/Regular Female Partners

Overall, around a third of those respondents' who had sex with any commercial partner in the last 12 months reported using a condom at last sex (32%). Consistent condom use was 12% in sex with non-regular partners and only 6% with regular partners.

Across locations it can be seen that among respondents in Delhi consistent condom usage among commercial and non-regular partners was significantly lower than other cities. Condom usage was highest in Kolkata.

<sup>\*\*</sup> Base: Those who had sex with any non regular partner in last 12 months

<sup>\*\*\*</sup> Base: Those who had sex with any regular partner in last 12 months

Table 4.36: Consistent Condom Use with Commercial/ Non-Regular/ Regular Partners in Last Twelve Months

(All figures are in percentages)

City/State	Consistent condom use with commercial partner *	Consistent condom use with non regular partner **	Consistent condom use with regular partner ***
Chennai	37.5	11.5	8.0
Delhi	17.4	8.3	4.8
Kolkata	40.0	20.0	1.8
Manipur	34.3	14.3	6.8
Mumbai	52.4	11.1	8.3
Total	31.8	11.9	6.1

<sup>\*</sup> Base: Those who had sex with any commercial partner in last 12 months

## 4.7.6 Person suggested condom use with Commercial/Non-Regular/Regular Female Partners

Table 4.37 present data on persons who suggested condom use at last sex with commercial, non-regular and regular female partners.

About 60% of the respondents reported that they themselves suggested the use of condom last time while having sex with any commercial female partner (Table 4.37).

In Manipur a considerably high proportion of respondents reported that they themselves suggested the use of condom last time (77%) compared to other locations. Delhi was the only location where the proportion of respondents who reported that it was their commercial partner who suggested condom use last time was high (52%).

Overall, slightly more than two thirds of the respondents reported that they themselves suggested the use of condom last time with their non-regular female partners (67%).

All respondents in Chennai reported that the suggestion to use a condom at last sex with non-regular partner was their own. Half the respondents in Mumbai reported that that it was their non-regular partner who suggested condom use last time (Table 4.37).

More than two thirds of the respondents reported that they themselves suggested condom use with regular partners (69%). In Kolkata, a significantly high proportion of respondents reported that they themselves suggested condom use with regular partners (91%) while in Mumbai, a significantly high proportion of respondents reported that it was their partner's suggestion to use condom (20%) (Table 4.37).

<sup>\*\*</sup> Base: Those who had sex with any non regular partner in last 12 months

<sup>\*\*\*</sup> Base: Those who had sex with any regular partner in last 12 months

Data should be interpreted with caution, as the bases are small.

Table 4.37: Person Suggesting Condom Use with Commercial/ Non-Regular/ Regular Partners

(All figures are in percentages)

				(An figures are in percentages)						
City/ State	With commercial partners *				With non regular partners **			With regular partners  ***		
	Myself	My partner	Joint decisio	Myself	<u> </u>			My partner	Joint decision	
			n			n				
Chennai	61.1	27.8	11.1	100.0	0.0	0.0	51.4	11.4	37.1	
Delhi	31.0	51.7	17.2	71.4	14.3	14.3	70.0	10.0	20.0	
Kolkata	50.0	43.8	6.3	85.7	0.0	14.3	90.5	0.0	9.5	
Manipur	76.8	17.9	3.6	57.1	28.6	14.3	73.8	9.5	16.7	
Mumbai	66.7	16.7	16.7	25.0	50.0	25.0	60.0	20.0	20.0	
Total	60.3	29.8	9.2	67.4	19.6	13.0	69.1	8.9	22.0	

<sup>\*</sup> Base: Those who used condom last time with any commercial partner in last 12 months

## 4.7.7 Type of Condom Brands used at last sex with Commercial/Non-Regular/Regular Female Partners

Table 4.38 represents the data on type of condom brands used at last sex with commercial/non-regular/regular sex partner. To confirm the type of condom brands used the interviewers showed the package covers of all popular brands to the respondents.

Overall, slightly less than a third of respondents who had sex with a commercial partner used Nirodh brand (31%), followed by 28% respondents who used Delux and 18% who used Kamasutra.

There were considerable variations in the type of condoms used in different locations. Nearly two-thirds of respondents used Nirodh in Mumbai (67%) and Kolkata (63%), whereas nearly a third in Manipur used Kamasutra (32%) and over half the respondents in Delhi used Delux Nirodh (55%).

Overall, slightly more than a third of respondents who had sex with a non-regular partner used Nirodh brand (39%), followed by 26% respondents who used Masti and 13% who used Delux Nirodh.

There were considerable variations in the type of condoms used in different locations. Over half of the respondents used Nirodh in Delhi (57%) and high proportions in Chennai and Manipur used Nirodh (43% each). Over half the respondents in Delhi used Masti (57%) and half the respondents in Manipur used Delux Nirodh.

<sup>\*\*</sup> Base: Those who used condom last time with any non-regular partner in last 12 months

<sup>\*\*\*</sup> Base: Those who used condom last time with any regular partner in last 12 months

Overall, around a third of respondents who had sex with regular partners used Delux Nirodh brand (31%), followed by 29% respondents who used Nirodh and 13% who used Kamasutra and Kohinoor.

Overall, there were considerable variations in the brands of condoms used with different types of sexual partners. Among commercial and non-regular partners Nirodh was the most common condom used used, whereas with regular partners Delux Nirodh was the most common brand.

Table 4.38: Type of Condom Brands Used at Last Sex with Commercial/ Non-Regular/ Regular Partners

(All figures are in percentages)

		(i iii iigui ee ui e iii per een engee)								
City/	Comr	nercial	Partner *	Non Regular			Regular Partner ***			***
State				Pa	artner	**				
	Nirodh	Delux	Kamasutra	Nirodh	Masti	Delux	Delux	Nirodh	Kamasutra	Kohinoor
		Nirodh				Nirodh	Nirodh			
Chennai	16.7	22.2	11.1	42.9	14.3	0.0	20.0	31.4	11.4	22.9
Delhi	27.6	55.2	3.4	14.3	57.1	28.6	40.0	15.0	10.0	5.0
Kolkata	62.5	6.3	12.5	57.1	0.0	0.0	23.8	33.3	19.0	14.3
Manipur	21.4	25.0	32.1	42.9	28.6	9.5	33.3	31.0	14.3	9.5
Mumbai	66.7	16.7	0.0	25.0	25	50.0	80.0	20.0	0.0	0.0
Total	31.3	28.2	17.6	39.1	26.1	13.0	30.9	28.5	13.0	13.0

<sup>\*</sup> Base: Those who used condom last time with any commercial partner in last 12 months

## 4.7.8 Source of condom used at last sex with Commercial/Non-Regular/Regular Female Partners

All respondents who used condoms last time were asked to report on the source of condom at last sex with commercial, non-regular and regular partners (Table 4.39).

Slightly less than half the respondents who had sex with a commercial partner reported that they obtained this condom from the person they had sex with (45%), followed by 40% respondents who purchased it from a chemist shop and 6% who obtained it from a friend.

In Manipur 59% obtained condoms from chemist shop. Over two-third of the respondents obtained condom from the person they had sex with in Delhi (69%), Kolkata (69%) and Mumbai (67%), compared with only 23% in Manipur.

Overall, around 41 percent of the respondents who had sex with a non-regular partner reported that they purchased condoms from a chemist shop, followed by 15% who obtained it from a friend and 11 percent who obtained this condom from the person they had sex with.

<sup>\*\*</sup> Base: Those who used condom last time with any non-regular partner in last 12 months

<sup>\*\*\*</sup> Base: Those who used condom last time with any regular partner in last 12 months

There were wide variations between the cities. In Kolkata and Mumbai around a fourth of the respondents obtained it from the person they had sex with (29% and 25% respectively), Around 43% respondents in Kolkata obtained condoms from a friend and 71% respondents in Delhi reported that they purchased it from a chemist shop.

Overall, over half the respondents who had sex with a regular partners reported that they purchased condoms from a chemist shop (55%), followed by 18% who purchased it from a pan shop and 8% who obtained it from the person they had sex with and an additional 8% from a health/worker/clinic.

Respondents in Chennai (43%) and Mumbai (33%) cited pan shop as a source more frequently. Most respondents in Delhi (85%) Manipur and Mumbai (60% each) who had sex with a regular partner reported that they purchased condoms from a chemist shop.

Table 4.39: Source of Condom Used at Last Sex with Commercial/ Non-Regular/Regular Partners

(All figures are in percentages)

City/	Witl	h Commei	cial	With	Non re	gular	Wi	th Regula	r Partn	er
State		Partner		Ţ	oartner					
	Person had sex with	Purchased at chemist shop		Purchased at chemist shop		Person had sex with	Purchased at chemist shop	Purchased at pan shop	Person had sex with	Health worker/ clinic
Chennai	38.9	27.8	5.6	14.3	14.3	0.0	42.9	42.9	2.9	11.4
Delhi	69.0	17.2	6.9	71.4	0.0	0.0	85.0	0.0	10.0	5.0
Kolkata	68.8	12.5	6.3	28.6	42.9	28.6	38.1	33.3	14.3	4.8
Manipur	23.2	58.9	7.1	47.6	14.3	9.5	59.5	0.0	7.1	9.5
Mumbai	66.7	16.7	0.0	25.0	0.0	25.0	60.0	0.0	20.0	0.0
Total	45.0	35.9	6.1	41.3	15.2	10.9	55.3	17.9	8.1	8.1

<sup>\*</sup> Base: Those who used condom last time with any commercial partner in last 12 months

#### 4.8 OTHER SALIENT OBSERVATIONS

### 4.8.1 Risk perception of getting infected with HIV/AIDS

Respondents' perceptions of perceived risk of contracting HIV was also assessed on a four-point scale varying from "very high" to "no chance" (Table 4.40).

Overall, about 55 percent respondents perceived themselves to be at very high or moderate risk. Slightly over a fourth felt that they had a low chance of contracting HIV/AIDS, and 17% felt that they had no chance of contracting HIV/AIDS.

<sup>\*\*</sup> Base: Those who used condom last time with any non-regular partner in last 12 months

<sup>\*\*\*</sup> Base: Those who used condom last time with any regular partner in last 12 months

There were wide variations across sampling units. 47% in Kolkata perceived that they had no chance of contracting HIV while 72% in Mumbai felt that they had a very high chance of contracting HIV.

Table 4.40: Perception regarding Risk of Contracting HIV/AIDS

(All figures are in percentages)

City/State	Very high	Moderate	Low	No chance
Chennai	38.1	19.6	27	14.8
Delhi	30.7	14.6	39.1	11.3
Kolkata	4.3	17.8	26.5	47
Manipur	24.1	26.0	33.1	15.8
Mumbai	72.2	20.0	6.3	1.1
Total	34.5	19.9	26.6	17

Base: All Respondents

## 4.8.2 Possibility of Confidential Testing in the Area

Table 4.41, indicates that about 60 percent of the respondents reported that it was possible for them to get a confidential test to find out if they were infected with HIV. This proportion was significantly higher in Chennai (77%) but considerably lower in Kolkata (35%).

## 4.8.3 HIV Testing

Table 4.41, indicates that one fourth of the respondents reported that they had ever undergone an HIV test (26%). This proportion was higher in Kolkata (33%) and lower in Delhi (16%).

Over half the respondents who had an HIV test undertook it voluntarily (56%). Overall, around 79% respondents found out the result of their HIV test.

**Table 4.41: HIV Testing** 

(All figures are in percentages)

			(AII)	iigui es ai e ii	n percentages
City/ State	Possibility of confidential	Ever had HIV test	Voluntary HIV	Ever found out result of	
	HIV testing		Voluntary	Required	test *
Chennai	77.0	30.4	51.2	48.8	78.0
Delhi	63.9	16.4	64.4	31.1	68.9
Kolkata	34.8	33.0	63.2	36.8	86.8
Manipur	56.9	20.3	76.2	23.8	88.9
Mumbai	62.6	29.3	31.6	55.7	70.9
Total	59.7	25.5	55.7	40.9	79.1

Base: All Respondents

<sup>\*</sup> Base: Those respondents who have had a HIV test

### 4.8.4 Interpersonal communication on STD/HIV/AIDS

Overall around half the respondents reported that were approached by someone to be educated on STD/HIV/AIDS (50%). This proportion was considerably higher in Chennai (75%) and Manipur (63%), and considerably lower in Mumbai (22%) (Table 4.42).

## 4.8.5 Attendance/Participation in any campaign/meeting on STD/HIV/AIDS

The proportion of respondents attending /participating in any campaign / meeting on STD/HIV/AIDS was lower (27%) than those who received interpersonal communication on STD/HIV/AIDS (50%) (Table 4.42).

#### 4.8.6 Received free medical treatment on STD/HIV/AIDS

At an overall level, around 13 percent respondents reported receiving free medical treatment for STD/HIV/AIDS. This proportion was considerably higher in Kolkata where a fourth of all respondents had received free medical treatment (25%), but this proportion was considerably lower in Delhi (10%) and Mumbai (5%).

Table 4.42: Exposure to STI/HIV /AIDS Programme Interventions and Received Free Medical Treatment in the Past One year

(All figures are in percentages)

City/State	Interpersonal communication on STD/HIV/AIDS	Participated in campaign/meeting on STD/HIV/AIDS	Received free medical treatment on STD/HIV/AIDS
Chennai	74.8	38.9	11.5
Delhi	45.3	20.8	9.9
Kolkata	40.0	19.6	25.2
Manipur	63.3	37.9	15.8
Mumbai	21.9	15.2	5.2
Total	49.7	27.0	13.2

Base: All Respondents

#### **CHAPTER - V**

## COMPARISON OF KEY RESPONDENT PROFILES AND INDICATORS ACROSS DIFFERENT TARGET GROUPS

As a part of monitoring and evaluation of NACP-II, ORG CSR carried out the national baseline behavioral surveillance survey among general population as well as some key high risk and bridge groups including female sex workers, men who have sex with men, injecting drug users and clients of female sex workers. This chapter presents a comparative analysis on some key respondent profiles and indicators across different target groups.

#### 5.1 KEY RESPONDENT PROFILES

This section presents some of the key respondent profiles e.g. literacy, marital status, age at marriage, mobility, alcohol intake and drug use of different target groups.

### 5.1.1 Literacy

Table 5.1 indicates that the proportion of literate respondents was significantly higher among MSM (90%), male respondents of the general population (85%) and clients of FSW (79%) compared to other target groups. The literacy level was particularly low among brothel based FSW (23%).

## 5.1.2 Ever Married and Age at Marriage

The proportion of ever-married respondents was significantly higher among female respondents of the general population (82%) and non-brothel based FSW (71%) compared to all other target groups. The mean age at marriage was significantly low among brothel based FSW (16.5 years).

#### 5.1.3 Mobility

A very high proportion of non-brothel based FSW (42%) reported that they frequently traveled to other places for sex work during last 12 months prior to the survey. Even a considerable proportion of brothel based FSW (20%), MSM (17%) and clients of FSW (15%) also reported traveling to other places at least once in a week or fortnight, though not specifically for sex work.

## 5.1.4 Alcohol Intake and Drug Use

Table 5.1 indicates that 68% of clients of FSW and 60% of brothel based as well as non-brothel based FSW consumed alcohol frequently during last four weeks before the survey. The proportion was also significantly high among MSM (51%). The proportion of respondents reporting ever use of any drug was significantly higher among clients of FSW (22%) and MSM (13%) compared to all other target groups.

**Table 5.1: Key Respondent Profiles** 

(figures in percentages)

Profiles			Clients of FSW	FSW		MSM	IDU
	Male	Female		BB	NBB		
Literate	85.0	65.4	78.8	23.1	49.5	90.8	68.7
Ever married	65.5	81.7	54.3	48.1	70.7	33.5	41.2
Age at marriage (in years)	-	-	22.2	16.5	18.5	23.0	22.5
Frequently traveling to other places (weekly/fornightly)	-	-	14.5	20.2*	41.8*	16.6	_
Frequent alcohol intake in past 4 WK (every day/weekly)	-	-	67.6	60.3	59.7	50.8	29.6
Ever tried any drug	-	-	21.7	2.9	8.1	12.5	100.0

<sup>\*</sup> Travel to other places for sex work

### 5.2 KNOWLEDGE INDICATORS

All the respondents interviewed during the national baseline behavioral surveillance survey were asked whether they had heard of HIV/AIDS, whether they were aware of different routes of transmission and methods of prevention, awareness of STD and STD symptoms. This section presents findings on key knowledge indicators for each target group covered during the national baseline behavioral surveillance survey.

#### 5.2.1 Ever Heard of HIV/AIDS

Table 5.2 indicates that awareness of HIV/AIDS was significantly higher among high risk and bridge groups as compared to general population target groups. The proportion of respondents among men who have sex with men (97%), injecting drug users (97%) and clients of female sex workers (96%), brothel based female sex workers (95%) and non-brothel based female sex workers (92%) who had ever heard of HIV/AIDS was significantly higher compared to the general population (Table 5.2).

#### **5.2.2** Awareness of Prevention Methods

Awareness of consistent condom use and faithful sex partnership as two methods of preventing HIV infection was found to be considerably higher among high risk and bridge groups as compared to general population target groups. Table 5.2 reveals that 90% of brothel based female sex workers were aware of consistent condom use as a method of prevention. However, only 48% of female respondents and 70% of male respondents interviewed during the general population survey were found to be aware of consistent condom use as a method of prevention. Similarly, 71% to 78% of respondents covered under high risk and bridge group categories were aware of faithful sex partnership as a method of HIV prevention as compared to only 52% of female respondents and 62% of male respondents from general population (Table 5.2).

The proportion of respondents knowing both the methods of prevention i.e. consistent condom use and faithful sexual partnership ranged from 63% to 70% among high risk and bridge groups as compared to 38% among female respondents and 56% among male respondents from the general population.

#### 5.2.3 Correct beliefs about HIV transmission

The proportion of respondents having correct perception regarding transmissibility through mosquito bites and sharing food with an infected individual and accepting that a healthy looking person may be suffering from AIDS was found to be significantly low in the general population (20% to 23%) compared to other groups. Among high-risk groups, MSM had better awareness in this regard (Table 5.2).

## 5.2.4 Awareness of STD and STD symptoms

Table 5.2 indicates that awareness of STD was significantly better among high risk and bridge groups compared to general population target groups. More than three-fourths of the respondents among high risk and bridge groups mentioned that they heard of STD. Only 32% of male as well as female respondents covered during the general population survey reported that they had ever heard of STD (Table 5.2).

 Table 5.2: Key Knowledge Indicators
 (figures in percentages)

Table 3.2. Rey Knowledge III		<u> gures in f</u>	, <b>01 0 0</b> 111000	<del>(</del> 5)			
Knowledge Indicators	General		Clients	FSW		MSM	IDU
	Popula	tion	of FSW				
	Male	Female		BB	NBB		
Ever heard of HIV/AIDS	82.4	70.0	95.9	95.3	92.4	97.0	96.7
Aware of methods of preventi	on						
Consistent condom	70.0	48.1	85.1	89.6	78.1	82.8	83.6
use							
<ul> <li>Faithful partnership</li> </ul>	62.4	51.8	74.2	77.8	75.0	72.8	71.3
Knowing both the methods	55.5	38.3	68.2	70.4	62.7	68.6	64.5
Correct belief about HIV	22.7	19.9	38.5	29.8	28.5	53.6	42.5
transmission							
Aware of STD	31.8	32.4	75.6	81.9	83.5	79.0	75.6

#### 5.3 BEHAVIORAL INDICATORS

Table 5.3 present findings on certain key behavioral indicators for each target group covered under the national behavioral surveillance survey. It includes median age at first sex, last time and consistent condom use with commercial sex partners (non-regular partner for the general population target groups), HIV risk perception and STD prevalence rates across different target groups.

#### 5.3.1 Median Age at First Sex

The median age at first sex varied from 16 years among brothel based female sex workers as well as MSM to 21 years among male respondents covered under the general population survey. Females in the general population experienced sex later than their counterparts engaged in sex work (Table 5.3).

#### **5.3.2** Last Lime Condom Use

Nearly three-fourths of the brothel based as well as non-brothel based female sex workers and their clients reported that they used a condom during their last sexual intercourse with commercial partners. The proportion of IDUs reporting condom use at last sex with their commercial partners was about 60%. Last time condom use with

non-regular sex partners was reported by only 40% of female respondents and 51% of male respondents covered in the general population survey. Surprisingly condom use rates among MSM were lower than the general population and this is a cause for concern (Table 5.3).

### 5.3.3 Consistent Condom Use

Consistent condom use with commercial partners was significantly low among MSM (13%) compared to brothel based female sex workers (57%); clients of sex workers (57%) and non-brothel based female sex workers (46%). This was lower than the rates reported for the general population where 27% of female respondents and 34% of male respondents reported consistent condom use with all their non-regular sex partners. The proportion of IDUs reporting consistent condom use with their commercial partners was also low (31%) as compared to other high-risk groups (Table 5.3).

## **5.3.4** Self Reported STD Prevalence

The prevalence of genital discharge during past 12 months was as high as 19% among non-brothel based FSWs, 16% among MSM and 12% among IDUs. The proportion of respondents reporting genital ulcer/sore was also significantly higher among MSM (24%) and non-brothel based FSWs compared to other target groups covered during the survey. The proportion of respondents reporting more than one STD symptom was as high as 39% among non-brothel based FSW and 22% among MSM and 19% among brothel based FSW (Table 5.3).

### 5.3.5 STD Treatment Seeking Behaviour

The proportion of respondents seeking STD treatment from any government health facility was found to be significantly lower than the proportion of respondents seeking treatment at any private clinic or hospital during their last episode across all the target groups excepting non-brothel based FSW and IDU. The difference between the above two proportions was particularly high among brothel based FSW, MSM and male respondents of the general population.

 Table 5.3: Key Behavioural Indicators
 (figures in percentages)

Behavioral Indicators		General Clients Population of FSW		FSW		MSM	IDU
	Male	Female		BB	NBB		
Median age at first sex	21	18	19	16	17	16	19
Last time condom use*	51.2	39.8	74.5	75. 2	76.5	39.3	60.4
Consistent condom use*	33.6	26.6	57.3	57. 2	45.8	12.6	31.8
STD prevalence (self-reported)							
<ul> <li>Genital discharge</li> </ul>	1.5	5.4	9.1	8.2	18.3	15.9	11.1
<ul> <li>Genital ulcer/sore</li> </ul>	1.9	2.1	13.5	9.1	17.0	24.1	11.5
• More than one STD	2.8	6.3	12.8	19. 0	39.1	21.5	11.5
Source of STD treatment – last time							
Government health facility	28.6	19.6	27.6	21.	30.1	27.6	16.6
Private health facility	35.9	33.9	38.3	45. 5	31.6	43.9	18.0
No treatment	17.4	30.5	18.0	11. 8	14.1	10.1	36.6

<sup>•</sup> For general population target groups last time and consistent condom use have been presented for non-regular sex partner(s), whereas for other target groups last time and consistent condom use data presented in the table pertains to commercial sex partner(s).

#### 5.4 EXPOSURE TO PROGRAM INTERVENTION INDICATORS

Table 5.4 presents the degree of exposure to program intervention across different target groups. The table clearly indicates that brothel based FSWs and MSM had a higher degree of exposure to on-going program intervention during last 12 months before the survey compared to all other target groups covered under national baseline behavioral surveillance survey. Scaling up interventions among Non-brothel based FSW, Clients of FSW and initiation of innovative IEC approaches in the general population are warranted.

Table 5.4: Exposure to Program Interventions on STI/HIV/AIDS

(Figures in percentages)

Population Groups	Proportion exposed to interpersonal communication on STI/HIV/AIDS
0General Population – Male	15.1
General Population – Female	13.6
Clients of FSW	20.7
Brothel based Female Sex Workers	61.8
Non Brothel based female sex workers	37.2
Men who have sex with Men	52.1
Injecting Drug Users	49.7

#### **IMPLICATIONS...**

- 1. The baseline survey showed that the level of awareness regarding HIV/AIDS was high among both MSM and IDUs across all five study locations. More than 90% of all the respondents interviewed during the survey reported that they had heard of HIV/AIDS. However, the level of awareness regarding prevention of HIV/AIDS was not very high among MSM and IDUs. Only 66% of IDUs and 71% of MSM could mention both consistent condom use and faithful sex partnership as methods of prevention.
- 2. A significant proportion of MSM in Kolkata and IDUs in Mumbai, Delhi and Kolkata had misconceptions on the mode of transmission. These included 'myths' like transmission through a mosquito bite and sharing of meals with an infected person.
- 3. Awareness of STD and its common symptoms was particularly low among MSM in Kolkata as well as Chennai and IDUs in Mumbai. Prevalence of STD was reported being significantly high among MSM in Bangalore and Delhi. As high as 63% of MSM in Bangalore and 57% of MSM in Delhi reported at least one STD symptom during last one year before the survey. Only 28% of MSM and 17% of IDUs who reported at least one STD symptom in the past one year visited any government health center/hospital for their treatment during their last episode. It is very important to improve service delivery from government health facilities, particularly for these two target categories.
- 4. The frequency of injection of drugs as well as needle/syringe sharing behavior among IDUs presents a challenging scenario for future intervention projects. Nearly three-fifths of IDUs reported that they injected drugs at least 2 to 3 times in a day during past one month before the survey, highest being nearly 87% in Mumbai. As high as 70% of IDUs interviewed in Chennai as well as Mumbai reported that they shared a needle at least once in past one month before the survey. Nearly 25% of IDUs in Kolkata reported that they never cleaned shared needles/syringes before taking drug in past one month. Very few IDUs cleaned their needles/syringes with hot water / boiling/bleach/alcohol.
- 5. Nearly one-third of MSM interviewed during the survey reported to have sexual intercourse with any female partner in past six months before the survey. Only 16% of them used condom consistently with all their female partners during the reference period. It indicates a high possibility of HIV transmission from/to MSM to/from other community.
- **6.** As high as 36% of MSM reported to have any commercial male sex partner during last one month prior to the survey. The mean number of commercial male partners was as high as 9.1 in past month before the survey. But only 13% of MSM, who reported any commercial male partner in last one month, used condom consistently with all their commercial partners.
- 7. Last time and consistent condom use with non-commercial male partners was also reported to be considerably low among MSM in most of the study locations. Only

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- 52% of MSM used condom last time with non-commercial partner and 30% used condom consistently with all their non-commercial partners in past six months.
- 8. Nearly one-fifths of IDUs reported having any commercial partner during last 12 months prior to the survey, the mean number being as 4.6 across all study locations. However, only 32% of IDUs who had any commercial partner in last 12 months before the survey used condom consistently with all their commercial partners.
- 9. Condom use with non-regular partner, both last time as well as consistent condom use, was reported by a low proportion of IDUs interviewed during the survey. Also, a very low proportion of IDUs who reported to have any regular partner in last 12 months before the survey reported using condom last time or consistently with their regular sex partners.
- 10. Nearly 35% of IDU and 27% of MSM interviewed during the survey felt that they had very high chances of getting infected with HIV. The proportion was particularly high among IDUs in Mumbai and MSM in Chennai and Mumbai. As high as 72% of IDUs in Mumbai, 44% of MSM in Chennai and 40% of MSM in Mumbai felt that they had very high chances of getting infected with HIV.
- 11. About 70% of MSM and 60% of IDUs reported the possibility of confidential HIV test in their area. Nearly one-third of MSM and one-fourth of IDUs reported that they ever had an HIV test.
- 12. Around 52% of MSM and 50% of IDUs reported that they had exposure to interpersonal communication on STD/HIV/AIDS in past one year before the survey, the proportion being very low among MSM in Kolkata (12%) and IDUs in Mumbai (21%).
- 13. The proportions of MSM and IDUs reporting attendance in any meeting or campaign on STD/HIV/AIDS during last one year prior to the survey were 26% and 27% respectively. The proportion was particularly low among MSM in Bangalore as well as Kolkata and IDUs in Mumbai.

Study on Monitoring and Evaluation of National AIDS Control Project, Phase II

## NATIONAL HIV/AIDS RISK BEHAVIORAL SURVEILLANCE SURVEY (BSS) 2001 - 2002

#### FOR USE WITH THE MEN WHO HAVE SEX WITH MEN (MSM)

#### **Operational definition of the respondent**

Men who have sex (manual/ oral / anal) with other men in the past six months

Introduction: "My name is... I'm working for a social research organization. We're interviewing people here in [name of city, region or site] in order to find out about the present health scenario in your (State/UT). We are trying to understand peoples' common health problems, health seeking behavior and their knowledge, attitude, opinion and practice regarding some specific diseases. Importantly, the results of this study would help us in designing appropriate strategies for the future. Have you been interviewed in the past few weeks for a study on sexual health? IF THE RESPONDENT HAS BEEN INTERVIEWED DURING BASELINE SURVEY, DO NOT INTERVIEW THIS PERSON AGAIN. Tell him you cannot interview him a second time, thank him, and end the interview. If he has not been interviewed before, continue:

Confidentiality and Consent: I am going to ask you some very personal questions that some people find difficult to answer. Your answers are completely confidential. Your name will not be written on this form, and will never be used in connection with any of the information you tell me. You do not have to answer any questions that you do not want to answer and you may end this interview at any time you want to. However, your honest answer to these questions will help us better understand what people think, say and do about certain kinds of behaviors. We would greatly appreciate your help in responding to this survey. However, if you feel uncomfortable at any point of time, you could discontinue the proceedings. The interview will take about 30 minutes to ask the questions. Would you be willing to participate?

I certify that the nature and purpose, the potential be research have been explained to the volunteer.	nefits and possible risks associated with participating in this
Signature of interviewer	Date

INSTRUCTION 1: The identification section has to be filled up for all the respondents approached for an interview. That means even in case of refusal, in-complete interview or non-availability of respondents the identification page must be filled up.

INSTRUCTION 2: Before administering the questionnaire confirm if the respondent has sex (manual/oral/anal) with other men in the past six months.

### **IDENTIFICATION**

	SI. No.	Details	For office use
	001	SCHEDULE NUMBER	
	002	STATE	
	003	CITY	
	004	SITE	
Result			pondent not dilable for the rview
	006 INTE	RVIEWER: Name	
	007 DATI	E OF INTERVIEW:  D D M M Y Y	
	008 TIME	E: Starting Time Completion Time	Hrs Min
	009. PLA	CE OF INTERVIEW	
	010. INTE	ERVIEW SETTING: One to One Interview 1 Interview in presence of others	2
	011 SUPE	ERVISOR: Name Signature	
	012 ACC	OMPANIED INTERVIEW? 1. Yes 2. No	

## **SECTION 1: BACKGROUND CHARACTERISTICS**

Q No.	Questions and filters	Coding categories		Skip to	Coding Boxes
Q101	How old are you? (Use probe questions to estimate age)	Age in completed years Others (specify)			
Q102	What has been your highest level of educational attainment?  What is your main occupation?	Illiterate Literate with no formal education 1-5th 6-8th 9-10 th 11-12 th 12 + Others (specify)  Unemployed/not working/retired Student Non-agricultural /casual labourer Domestic servant Agricultural labour Skilled/semi-skilled labourer in manufacturing/processing industry Cultivator Petty business/small shop owner Small artisan in HH and cottage industry Truck drivers/Cleaners Local transport worker (auto/ taxi driver, handcraft pullers, rikshaw pullers etc.	1 2 3 4 5 6 7 01 02 03 04 05 06 07 08		
Q104	Do you live in this city?	Self employed professional Service (pvt. / govt.) Large business/medium to large shop owner Other (Specify)  Yes	12 13 14		
Q10T	Do you live in this city:	No Others (specify)	2		

Q105	How	v long have you been living in this?	If Si	o. of completed years less than 1 yearRecord 00 ince BirthRecord 97 thers (specify)					
Q No.		Questions and filters		Coding categories			S	Skip to	Coding
Q106	W	7ith whom do you stay?	W W W W	lone Vith spouse / Live in partner Vith parents Vith other relatives Vith employer Vith co-worker / students thers (Specify)	1 2 3 4 5 6				Boxes
Q107	W	here do you stay?	H L Fe	esidence fostel / Mess abour Camp ootpath / Railway Stn / Bus terminus other public places thers (specify)	1 2 3 4				
Q 108	(I W B	o you often travel from this place to ther town or villages?  OON'T INCLUDE THOSE VORKING AWAY FROM HOME UT RETURNING HOME EVERY VENING)	N O (I	thers (specify) f "No response" is found out in thers, skip to Q111)	1 2		<b>→</b>	·Q111	
Q 109	•	If yes, how frequently do you travel from this place to other places?		Weekly Fortnightly Monthly Once in 3 months Once in 6 months Once in a year Not been away from home Others (specify)		1 2 3 4 5 6 7			
Q110		or what purpose do you generally avel?	Si Si M	usiness ervice tudy Ieeting relatives/friends leasure trips ther (Specify)	1 2 3 4 5				

Q111	Have you ever had drinks containing alcohol?	Yes No Others (specify) (If "Do not remember" or "No response" is found out in Others, skip to Q114)	1 2	—Q∏A	

Q No.	Questions and filters	Coding categories		Skip to	Coding Boxes
Q112	During the last 4 weeks how often have you had drinks containing alcohol?  (READ RESPONSES AND CIRCLE ONE)	Every day At least once a week At least once a fortnight Did not drink in last 4 weeks Others (specify)	1 2 3 4		
Q113	How frequently do you take alcoholic drinks before having sex with your sex partners?	Always Sometimes Rarely Never Others (specify)	1 2 3 4		
Q114	Some people take different types of intoxicating drugs. Have you ever tried any?	Yes No Others (specify) (If "No response" is found out in Others, skip to Q116)	1 2	<del></del>	
Q115	Which ones have you tried?  (DON'T READ OUT THE LIST.  MULTIPLE RESPONSES  POSSIBLE)	Charas Ganja Bhang Affim Brown-sugar Heroin Others (specify)	01 02 03 04 05 06		

Q116	Some people also inject drugs using a syringe. Did you ever inject any drug without a doctor's prescription in the last 12 months?	Yes No Others (specify)	1 2	
	(DO NOT COUNT DRUGS INJECTED FOR MEDICAL PURPOSES OR TREATMENT OF AN ILLNESS)			

## SECTION 2: KNOWLEDGE, OPINION AND ATTITUDE TOWARDS STI / HIV / AIDS

Q.No.	Questions and Filters	Coding Categories				Skip to	<b>Coding Boxes</b>
Q201	Have you heard of problems like genital discharge or genital ulcer/genital sore or burning while passing urine which people get through sexual intercourse?  (IT'S A PROMPTED QUESTION. PLEASE MAKE SURE THAT THE RESPONDENT UNDERSTANDS THE SYMPTOMS WE ARE TALKING ABOUT. USE LOCAL /POPULAR TERMINOLOGIES, IF ANY)	Yes No Others (Specify)  (If "Can not remember" or "No response" is mentioned in Others, skip to Q204)	1 2			Q2 <b>0</b> 4	
Q202	Can you describe any other (beside the three symptoms mentioned in the earlier question) symptoms of STI in WOMEN? Any others?  (PLEASE READ OUT ALL THE OPTIONS AND CIRLE THE APPROPRIATE CODE)	Lower abdominal pain Swellings in groin area Pain during sexual intercourse Itching/reddening Warts Skin rashes Other (Specify)	Y 1 1 1 1 1 1 1 1	N 2 2 2 2 2 2 2 2	DK 8 8 8 8 8 8	NR 9 9 9 9 9	

Q.No.	Questions and Filters	Coding Categories			Skip to	<b>Coding Boxes</b>	
Q203	Can you describe any other (beside the three symptoms mentioned in the	Swellings in groin area	Y 1	N 2	DI 8	K NR 9	
	earlier question) symptoms of STI in MEN? Any others?	Itching/reddening	1	2	8	9	
	(PLEASE READ OUT ALL THE	Warts	1	2	8	9	
	OPTIONS AND CIRLE THE APPROPRIATE CODE)	Skin rashes	1	2	8	9	
		Can't retract foreskin	1	2	8	9	
		Other (Specify)	1	2	8	9	

Q.No.	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q204	Have you ever heard of HIV/AIDS?	Yes No Others (Specify) (If "Can not remember" or "No response" is mentioned in Others, skip to Q213)	1 2	→Q 213	
Q205	Can a person get HIV/AIDS from mosquito bites?	Yes No Others (Specify)	1 2		
Q206	Can people protect themselves from HIV/AIDS by having one uninfected faithful sex partner?	Yes No Others (Specify)	1 2		
Q207	Can people protect themselves from HIV/AIDS by abstaining from sexual intercourse?	Yes No Others (Specify)	1 2		
Q208	Can a person get HIV/AIDS by sharing a meal with someone who is infected?	Yes No Others (Specify)	1 2		

Q.No.	Questions and Filters	Coding Categories	Coding Categories		<b>Coding Boxes</b>		
Q209	Can a person get HIV/AIDS by getting injections with a needle that was already used by someone else who was infected?	Yes No Others (Specify)	1 2				
Q210	Do you think that a healthy-looking person can be infected with HIV, the virus that causes AIDS?	Yes No Others (Specify)	1 2				
Q211	Can a pregnant woman infected with HIV or AIDS transmit the virus to her unborn child?	Yes No Others (Specify)	1 2				
Q212	Can a woman with HIV or AIDS transmit virus to her newborn child through breastfeeding?	Yes No Others (Specify)	1 2				
Q.No.	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>		
Q213	Have you had a genital discharge in the past 12 months?	Yes No Others (Specify)	1 2				
Q214	Have you had an <b>ulcer/sore</b> in your genital/anal area during the <b>past 12 months?</b>	Yes No Others (Specify)	1 2				
Q215	Have you had burning pain during urination in the past 12 months?	Yes No Others (Specify)	1 2				
	FILTER: CHECK Q213 to	Q215 Not reporte	d any syn	nptom of [ STI	_2_]→ <b>→</b> Q219		
	Reported any symptom of STI [_1]						

Q.No.	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q216	What did you do the last time you had any of these problems?  (MULTIPLE RESPONSES POSSIBLE)  (READ OUT ALL THE CONDING OPTIONS)	No treatment Took home based remedy Borrowed prescription from friend/relative Took medicine I had at home Purchased medicine from a Chemist Shop Went to a traditional healer/quack Went to NGO Peer Educator/ NGO clinic Went to Health Worker Went to a Private hospital / clinic Went to a Govt. Hospital /clinic Others (Specify)	01 02 03 04 05 06 07 08 09 10	→Q219	
Q217	What type of medicine did you take last time?  (MULTIPLE RESPONSES POSSIBLE)	Allopathic Homoeopathic Ayurvedic / Herbal Other (Specify)	1 2 3		
Q218	How much time did you take to visit a health practitioner last time after you experienced an STI symptom?	1 week or less  Less than 1 month but more than 1  week  One month or more  Other (Specify)	1 2 3		

Q.No.	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q219	In case you have any of the	No treatment	01		
	symptoms of STI whom would you prefer to approach?	Take home based remedy	02		
		Borrow prescription from			
	(Please readout STI symptoms to make respondent understand	friend/relative	03		
	clearly about STI).	Take medicine I had at home	04		
	(Read out all the coding options and circle one response)	Purchase medicine from a Chemist			
		Shop	05		
		Go to a traditional healer/quack	06		
		Go to NGO Peer Educator/ NGO	07		
		clinic	08		
		Go to Health Worker	09		
		Go to a Private hospital / clinic	10		
		Go to a Govt. Hospital /clinic			
		Others			
		(Specify)			

## SECTION 3: SEXUAL HISTORY, NUMBER AND TYPES OF PARTNER

Q No.	Questions and filters	Coding categories		Skip to	Coding Boxes
Q301	Have you ever been married to a female partner?	Yes No Others (Specify) (If "No response" is mentioned in Others, skip to Q303)	1 2	→Q303	
Q302	How old were you when you first got married to a female partner?	Age in Completed Years Others (Specify)			
Q303	Are you currently married or living with / having a female sexual partner?	Currently married, living with wife (female) Currently married, having or living with female sexual partner Currently married, not living with wife or having any other female sexual partner Not currently married, living with/ having female sexual partner Not currently married, not living with/ having female sexual partner	1 2 3 4		

		Other (specify)			
Q304	At what age did you first have sexual intercourse with a female partner (either pa or unpaid)?	Age in Completed Years  Others (Specify)			
Q305	Did you have sexual intercourse with any female partner in the past 6 months?	Yes No Others (Specify) (If "No response" is mentioned in Others, skip to Q308)	1 2	→ 309	
Q306	With how many female partners have you sex in the past 6 months?	Others (Specify)			
Q307	The last time you had sex with any of your female partners, did you use a condom?	Yes No Others (Specify)	1 2		
308	How frequently did you use condom with any of your female partner in the past six months?	Always 1 Most Often 2 Sometimes 3 Never 4 Others (Specify)			

	Q No.	Questions and filters		Coding categories		Skip to	Coding Boxes
Q309	ex	what age did you first have sexual perience (manual / oral / anal) with any alle partner?		ers (Specify)			
Q310	/ a:	hat type of sexual experience (manual / oral nal) you had?  IULTIPLE RESPONSES POSSIBLE)	Oral Ana	[	1 2 3		
Q311	W	ho was your first male partner?	Frie Rela Neig Con Any	worker  nd  ative ghbour  nmercial partner other person ecify)	01 02 03 04 05		
Q312	2 W	hat was the age of your first male partner?	Age	in completed			

		years		
		Others (Specify)		
		cultic (epochy)		
Q313	Was your first sexual experience with the	Yes	1	_
Q313	male partner a forced one?	No	2	
		Others (Specify)		
Q314	Think about the <i>male</i> sexual partners you've			
	had in the last 1 month.	MALE COMMERCIAL		
	How many were:	Can't remember	88	
	- MALE COMMERCIAL PARTNER	No response	99	
	Male partner with whom the respondent			
	had sex in exchange for money	MALE NON-COMMERCIAL		
		(Non paying)		
	- MALE NON -COMMERCIAL	Can't remember	88	
	PARTNER  Male partner who is not commercial partner	No response	99	
Q315	Think about the <i>male</i> sexual partners you've			
(	had in the last 7 days?			
	How many were:	MALE COMMERCIAL		
	MALE COMMEDCIAL DADENED	Can't remember	88	
	- MALE COMMERCIAL PARTNER  Male partner with whom the respondent	No response	99	
	had sex in exchange for money			
		MALE NON-COMMERCIAL		
		(non paying)		
	- MALE NON -COMMERCIAL	Can't remember	88 99	
	PARTNER  Male partner who is not commercial partner	No response	99	
	male parties who is not commercial parties			

## SECTION 4: COMMERCIAL MALE PARTNER (S)

Q No.	Questions and Filters	Coding categories	Skip to	Coding Boxes
Q401	At what age did you have sexual intercourse with any commercial male partner?	Age in completed year Other (specify)		
Q402	FILTER: CHECK Q314 and Q315  HAD SEX WITH COMMERCIAL MALE PARTNER DURING PAST 1 MONTH OR 7  DAYS [_1_]	DID NOT HAVE SEX WITH COMMERCIAL MALE PARTNER DURING <u>PAST</u> 1 MONTH OR 7 DAYS [2]	<b>→</b> Q415	

Q403 Q404	With how many commercial male partners did you have oral sex in the past 30 days?  With how many commercial male partners did you have oral sex in the past 7 days?	Number Others (Specify)  Number Others (Specify)			
Q405	Have you had anal sex with your commercial male partner (s) in the past 30 days?	Yes No Others (Specify) (If "No response" is mentioned in Others, skip to Q501)	1 2	→Q501	
Q406	With how many commercial male partners you had anal sex in last 30 days?	Number Others (Specify)			
Q407	With how many commercial male partners you had anal sex in last 7 days?	Number Others (Specify)			
Q408	In the past seven days, how many times did your commercial male partner penetrate you?	Number Others (Specify)			

Q No.	Questions and Filters	Coding categories		Skip to	Coding Boxes
Q409	In the past seven days, how many times did you penetrate your commercial male partner?	Number Others (Specify)			
Q410	The last time you had anal sex with any of your commercial male partners, did you/your partner use condom?	Yes No Others (Specify) (If "No response" is mentioned in Others, skip to Q414)	1 2	→Q414	[

Q No.	Questions and Filters	Coding categories		Skip to	Coding Boxes
Q411	Who suggested condom use that time?	Myself My partner Joint decision Others (specify)	1 2 3		
Q412	Which brand of condom did you use last time? [SHOW PACKAGE COVERS OF POPULAR BRANDS]	Nirodh Kamsutra Delux Masti Kohinoor Others (specify)	01 02 03 04 05		
Q413	From where did you get this condom?	Person had sex with Health worker/ clinic Friend Purchased at chemist shop Purchased at Pan shop Purchased at other type of outlet (grocery etc) NGO/NGO Peer Educator Other (specify)	01 02 03 04 05 06 07	→Q415 →Q415 →Q415 →Q415 →Q415 →Q415 →Q415	
Q414	Why was condom not used last time?  (MULTIPLE RESPONSES POSSIBLE)	Not available Too expensive Partner objected Don't like them Didn't think it was necessary Didn't think of it Haven't heard of condom before There was no time Place was inapproprite Others (specify)	Y N DK NR 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9 1 2 8 9		

Q No.	Questions and Filters	Coding categories		Skip to	Coding Boxes
Q415	Do you generally use condom with your commercial male partners?	Yes No Others (Specify)	1 2		
Q416	With what frequency in the last six months did you and your commercial male partners use condoms?	Always Most often Sometimes Never Others (Specify)	1 2 3 4	<b>→</b> Q418	
Q417	With what frequency in the last one month did you and your commercial male partners use condoms?  Instruction: Do not ask this question to those respondents who did not have any Commercial Male partner in the last 1 month	Always Most often Sometimes Never Others (Specify)	1 2 3 4	→Q501 →Q501 →Q501	
Q418	Have you ever heard or seen a condom? (SHOW PICTURE OR SAMPLE OF ONE)	Yes No Others (Specify)	1 2		

# SECTION 5: NON-COMMERCIAL MALE PARTNER (S)

Q No.	Questions and Filters	Coding categories	Skip to	Coding Boxes
Q501	At what age did you first have sexual intercourse with any non-commercial male partner?	Age in completed years Others (specify)		
Q502	FILTER: CHECK Q314 and Q315  HAD SEX WITH NON- COMMERCIAL MALE PARTNER DURING PAST 1 MONTH OR 7 DAYS [1]	DID NOT HAVE SEX WITH NON- COMMERCIAL MALE PARTNER DURING PAST 1 MONTH OR 7 DAYS [_2]	<b>→</b> Q514	
Q503	With how many non-commercial male partners did you have oral sex in the past 30 days?	Number Others (Specify)		
Q504	With how many non-commercial male partners did you have oral sex in the past 7 days?	NumberOthers (Specify)		

Q505	With how many non-commercial male partners you had anal sex in last 30 days?	Number Others (Specify)			
Q506	With how many non-commercial male partners you had anal sex in last 7 days?	NumberOthers (Specify)			
Q507	In the past seven days, how many times did your non-commercial male partner penetrate you?	NumberOthers (Specify)			
Q508	In the past seven days, how many times did you penetrate your non-commercial male partner?	NumberOthers (Specify)			
Q509	The last time you had anal sex with any of your non- commercial male partners, did you/your partner use a condom?	Yes No Others (Specify) (If "No response" is mentioned in Others, skip to Q514)	1 2	→Q513	
Q510	Who suggested condom use that time?	Myself My partner Joint decision Others (specify)	1 2 3		
Q511	Which brand of condom did you use last time? [SHOW PACKAGE COVERS OF POPULAR BRANDS]	Nirodh Kamsutra Delux Masti Kohinor Others (specify)	01 02 03 04 05		
Q512	From where did you get this condom?	Person had sex with Health worker/ clinic Friend Purchased at chemist shop Purchased at Pan shop Purchased at other type of outlet (grocery etc) NGO/NGO Peer Educator Other (specify)	01 02 03 04 05 06 07	→Q514 →Q514 →Q514 →Q514 →Q514 →Q514 →Q514	

Q513	Why was condom not used last time?		Y	N	DK			
		Not available	NR					
	(MULTIPLE RESPONSES	Too expensive	1	2	8	9		
	POSSIBLE)	Partner Objected	1	2	8	9		
		Don't like them	1	2	8	9		
		Didn't think it was necessary Didn't think of it	1	2	8 8 8	9		
		Haven't heard of condom	1	2	8	9		
		before	1	2 2	8	9		
		There was no time						
			1	2 2	8	9		
		Place was inappropriate Others (specify)	1	2	8	9		
		1 2/	1	2	8	9		
			1	2	8	9		
Q514	Do you generally use condom with	Yes				1		
	your non-commercial male partners?	No				2		
		Others (Specify)						
Q515	With what frequency in the <b>last three</b>	Always				1		
QJIJ	months did you and your non-	Most often				2		
	commercial male partners use	Sometimes				3		
	condoms?	Never				4	<b>→</b> Q517	
		Others (Specify)					. 2221	

Q.No.	Questions and Filters	Coding Categorie	s	Skip to	Coding Boxes
Q516	With what frequency in the last one month were condoms used by you and your non-commercial male partner (Ask with respect to all non-commercial partners)  Instruction: Do not ask this question to those respondents who did not have any Non Commercial Male partner in the last 1 month	Always Most often Sometimes Never (Specify)	1 2 3 4	→Q601 →Q601 →Q601	
Q517	Have you ever heard or seen a condom? (SHOW PICTURE OR SAMPLE OF ONE)	Yes No (Specify)	1 2		

# SECTION6: RISK PERCEPTION AND EXPOSURE TO INTERVENTION

Q.No.	Questions and Filters	Coding Categories	Skip to	Coding Boxes
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Q.No.	Questions and Filters	Coding Categories		Skip to	Coding Boxes
Q601	Can people protect themselves from HIV by using a condom correctly every time they have sex?	No	1 2 7		
Q602	In your opinion, what are the chances of a person like you contracting HIV/AIDS infection?  (READ OUT ALL THE OPTIONS AND CIRCLE ONE)	Moderate Low	1 2 3 4		
Q603	Is it possible for someone like you to get a confidential test to find out whether you are infected with HIV?  By confidential, I mean that no one will know the result if you don't want them to know it.	No Others (Specify)	1 2		
Q604	I do not want to know the result, but have you ever had an HIV test?		1 2	→Q607	
Q605	Did you voluntarily undergo the HIV test, or were you required to have the test?	1	1 2		
Q606	Please do not tell me the result, but did you find out the result your test?		1 2		
Q607	Did anyone in the past one year approach you to educate you on spread or prevention of STI/HIV/AIDS?		1 2		
Q608	Did you attend / participate in any campaign / meeting on STI / HIV / AIDS in the past one year?		1 2		
Q609	If we ask you to recall only one message about HIV / AIDS, which one would you easily remember? (RECORD THE ANSWER IN VERBATIM)	Message:			

would you easily remember? CORD THE ANSWER IN RBATIM)	
	THANK YOU
Interview Completion Time	
Signature of the Interviewer	

#### Study on Monitoring and Evaluation of National AIDS Control Project, Phase II

NATIONAL HIV/AIDS RISK BEHAVIOURAL SURVEILLANCE SURVEY (BSS) 2001-2002

### FOR USE WITH INJECTING DRUG USERS (IDUs)

#### Operational definition of the respondent

Men and Women who have injected addictive drugs in the past three months

Introduction: "My name is... I'm working for a social research organisation. We're interviewing people here in (name of city, region or site) in order to find out about the present health scenario in your (State/UT). We are trying to understand peoples' common health problems, health seeking behaviour and their knowledge, attitude, opinion and practice regarding some specific diseases. Importantly, the results of this study would help us in designing appropriate strategies for the future. Have you been interviewed in the past few weeks for a study on sexual health? IF THE RESPONDENT HAS BEEN INTERVIEWED DURING BASELINE SURVEY, DO NOT INTERVIEW THIS PERSON AGAIN. Tell him/her you cannot interview him/her a second time, thank him/her, and end the interview. If he/she has not been interviewed before, continue:

Confidentiality and consent —I am going to ask you some very personal questions that some people find difficult to answer. Your answers are completely confidential. Your name will not be written on this form, and will never be used in connection with any of the information you tell me. You do not have to answer any questions that you do not want to answer and you may end this interview at any time you want to. However, your honest answer to these questions will help us better understand what people think, say and do about certain kinds of behavior. We would greatly appreciate your help in responding to this survey. However, if you feel uncomfortable at any point of time, you could discontinue the proceedings. The interview will take about 30 minutes to ask the questions. Would you be willing to participate?

(Signature of interviewer certifying that informed consent has been given verbally by the respondent)

<u>INSTRUCTION 1:</u> Before administering the questionnaire confirm if the respondent has been taking drugs through injections during the past three months.

<u>INSTRUCTION 2:</u> The identification section has to be filled up for all respondents approached for an interview. This means that even in case of a refusal, in-complete interview or non-availability of respondents the identification page must be filled up.

#### **IDENTIFICATION**

Sl. No.	Details	For office use	
001	SCHEDULE NUMBER		
002	STATE		
003	CITY / TOWN		
004	SITE		
	JLT CODE:  des : Completed 1 ; Partially completed 2 ; Refused 3	available for	not the
	ERVIEWER: Name D D M M Y Y	interview	
008 TIME	E: Starting Time Completion Time	Hrs Min	
009. PLA	CE OF INTERVIEW		
010. INTI	ERVIEW SETTING: One to One Interview 1 Interview in presence of other	rs 2	
011. SUF	PERVISOR: Name Signature		
012. ACC	COMPANIED INTERVIEW 1. Yes 2. No		
CECTIO	N. 1. D. ACKCDOLIND, CH. 4.D. ACKEDISCHICS		

#### SECTION 1: BACKGROUND CHARACTERISTICS

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q101	Record gender of the Respondent	Male	1		
		Female	2		

Q102	How old are you? (Use probe questions to estimate age)	Age in completed years Others (Specify)		
Q103	What has been your highest level of educational attainment?	Illiterate Literate but no formal education 1-5th 6-8th 9-10th 11-12th 12+ Others (Specify)	1 2 3 4 5 6 7	
Q104	What is your main occupation?	Unemployed/not working/retired Student Non-agricultural /casual labourer Domestic servant Agricultural labour Skilled/semi-skilled labourer in manufacturing/processing industry Cultivator Petty business/small shop owner Small artisan in HH and cottage industry Transport worker/ driver Self employed professional Service (pvt. / govt.) Large business/medium to large shop owner Other (Specify)	01 02 03 04 05 06 07 08 09 10 11 12 13	
Q105	Do you live in this city / town / village?	Yes No Others (Specify)	1 2	
Q106	How long have you been living in this place or visiting this location?	No. of completed years If less than 1 yearRecord 00 Since BirthRecord 97 Others (Specify)		

Q No.	Questions and filters	Coding categories		Skip to	Coding Boxes
Q107	With whom do you stay?	Alone With spouse / Live in partner With parents With other relatives With employer With co-worker / students Others (Specify)	1 2 3 4 5 6		
Q108	Where do you stay?	Residence Hostel / Mess Labour Camp Footpath / Railway Stn / Bus terminus / other public places Others (specify)	1 2 3 4		
Q109	Have you ever had any drinks containing alcohol?	Yes No Others (Specify) (If 'Can not remember' or 'No response' is mentioned in Others skip to Q201	1 2	→Q201	
Q110	During the last 4 weeks how often have you had drinks containing alcohol? Would you say (READ OUT AND CIRCLE ONE)	Every day At least once a week Less than once a week Did not drink in the last 4 weeks Others (Specify)	1 2 3 4		

# Section 2: Drug use

Q No.	Questions and filters	Coding categories	Skip to	Coding Boxes
Q201	For how long have you been using <i>addictive</i> drugs?	Months Record '00' for less than one month Others (Specify)		
Q202	At what age did you start taking addictive drugs?	Age in completed years Others (Specify)		
Q203	For how long have you been injecting drugs?  (Convert into months)	Months Record '00' for less than one month Others (Specify)		
Q204	How old were you when you first injected addictive drugs?	Age in completed years		
	(Includes self injection or injection by another)	Others (Specify)		

Q205	During the <b>past month</b> how often did you inject addictive drugs?	Only once a month 2 – 3 times a month About once a week 2 – 3 times a week 4 – 6 times a week About once a day 2 – 3 times a day 4 or more times a day Others (Specify)	01 02 03 04 05 06 07 08	
Q206	Which of the following types of drugs have you injected in the past one month? (MULTIPLE RESPONSES POSSIBLE)	Heroin (not in combination with cocain) Cocain (not in combination with heroin) Heroin and cocain together Crack Buprenorphine (Tidigesic) Dextroprooxyphene (Proxy) Amphetamines (Such as) Tranquillisers (Such as) Barbiturates (Such as) Anything else (Such as) Others (Specify)	01 02 03 04 05 06 07 08 09	

Section 3: Needle and syringe sharing behavior

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q301	Think about the <i>last time</i> you had injected drugs. Did you use a needle or syringe that had previously been used by someone else?	Yes No Others (Specify)	1 2		
Q302	Think about the times you have injected drugs during the <i>past one-month</i> . How often was it with a needle or syringe that had previously been used by some one else?	Every time Most times Almost half the time Occasionally Never Others (Specify)	1 2 3 4 5	→Q307	
Q303	In the <i>past one month</i> , did you ever share needles and syringes with any of the following: (READ OUT THE OPTIONS. MULTIPLE RESPOSES POSSIBLE)	Your usual sexual partner A sexual partner who you do not know well A friend A dealer A professional injector A co-worker Others (Specify)	1 2 3 4 5 6		
Q304	With how many different injecting partners did you share needles or syringes in the past one month?	Number of partners Others (Specify)			

Q305	In the past one month, when you injected yourself with needles or syringes that had previously been used, how often did you clean them first?	Every time Most times Almost half the time Occasionally Never Others (Specify)	1 2 3 4 5	
Q306	How did you usually clean them?	Cold water Hot water Boiling Bleach Alcohol Other (Specify)	1 2 3 4 5	
Q307	When you injected in the past one month, how often was it with a needle that no one else had ever used other than yourself?	Every time Most times Almost half the time Occasionally Never Others (Specify)	1 2 3 4 5	

# SECTION 3: NEEDLE AND SYRINGE SHARING BEHAVIOUR (Continued)

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q308	In the past one month how often did you give / lend / rent / sell a needle or syringe to some one else after you had already used it?	Every time Most times About half the time Occasionally Never Others (Specify)	1 2 3 4 5		
Q309	Can you obtain new, unused needles and syringes when you need them?	Yes No Others (Specify)	1 2		
Q310	Do you know any person or place from where you can obtain new, unused needles and syringes when you need them?	Yes No Others (Specify) (If "No response" is found in Others, skip to 312)	1 2 9	→Q312	
Q311	Where can you obtain new, unused needles and syringes?  DO NOT READ OUT LIST.  MULTIPLE RESPONSES POSSIBLE. PROBE WITH 'ANYWHERE ELSE?'	Pharmacist / chemist Any other shop Health worker Hospital NGO worker Sex partners Friends Other drug users Drug dealer Buy on streets Other (Specify)	01 02 03 04 05 06 07 08 09		

Q312	In the past one month, did you	Yes	1	
	ever inject drugs using a pre-	No	2	
	filled syringe (by that I mean a			
	syringe that was filled without	Others (Specify)		
	your witnessing it)?			

# SECTION 3: NEEDLE AND SYRINGE SHARING BEHAVIOUR (Continued)

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q313	In the past one month, how often did you inject drugs using a syringe after someone else had squirted drugs into it from his / her used syringe (Front loading / back loading / splitting)	Every time Most times Almost half the time Occasionally Never Others (Specify)	1 2 3 4 5		
Q314	In the past one month when you injected drugs, how often did you share a cooker, vial, container, filter or rinse water for the needles/syringes?	Every time Most times Almost half the time Occasionally Never Others (Specify)	1 2 3 4 5		
Q315	In the past one-month how often did you draw up your drug solution from a common container shared by others?	Every time Most times Almost half the time Occasionally Never Others (Specify)	1 2 3 4 5		
Q316	Are you currently under treatment (or receiving help) or have you ever received treatment (or help) because of your drug use?	Currently under treatment Was undergoing treatment but not now Have never received treatment Others (Specify)	2 3	→Q318 →Q401	
Q317	How many months ago did you last receive treatment or help for your drug use?	Number of months  Record '00' if less than 1 month  Others (Specify)			
Q318	What kind of treatment or help have you received? DO NOT READ OUT RESPONSES.  Probe by asking, "Are there any kind of treatment that you have received?"  MULTIPLE RESPONSES POSSIBLE	Counselling Self help groups Residential Rehabilitation Treatment for abscess Health education Detoxification Helped / forced to quit cold turkey Drug substitution Other (Specify)	01 02 03 04 05 06 07 08		

# SECTION 4: KNOWLEDGE, OPINION AND ATTITUDE TOWARDS STI / HIV / AIDS

Q.No.	Questions and Filters	Coding Categories				Skip to	<b>Coding Boxes</b>
Q401 -	Pave you heard of problems like genital discharge or genital ulcer/genital sore or burning while passing urine which people get through sexual intercourse?  (IT'S A PROMPTED QUESTION. PLEASE MAKE SURE THAT THE RESPONDENT UNDERSTANDS THE SYMPTOMS WE ARE TALKING ABOUT. USE LOCAL /POPULAR TERMINOLOGIES, IF ANY)	Yes No Others (Specify) (If "Can not remember" or "No response" is mentioned in Others, skip to Q404)	1 2			Q404	
Q402	Can you describe any other (beside the three symptoms mentioned in the earlier question) symptoms of STI in WOMEN? Any others?  (PLEASE READ OUT ALL THE OPTIONS AND CIRLE THE APPROPRIATE CODE)	Lower abdominal pain Swellings in groin area Pain during sexual intercourse Itching/reddening Warts Skin rashes Other (Specify)	Y 1 1 1 1 1 1 1	N 2 2 2 2 2 2 2 2	DK 8 8 8 8 8 8 8 8	9 9 9 9 9 9	
Q403	Can you describe any other (beside the three symptoms mentioned in the earlier question) symptoms of STI in MEN? Any others?  (PLEASE READ OUT ALL THE OPTIONS AND CIRLE THE APPROPRIATE CODE)	Swellings in groin area Itching/reddening Warts Skin rashes Can't retract foreskin Other (Specify)	Y 1 1 1 1 1 1	N 2 2 2 2 2 2 2	DK 8 8 8 8 8 8 8	NR 9 9 9 9 9	

Q.No	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q404	Have you ever heard of HIV/AIDS?	Yes  No Others (Specify) (If "Can not remember" or "No response" is mentioned in Others, skip to Q414)	1 2	→Q 414	
Q405	Can a person get HIV/AIDS from mosquito bites?	Yes No Others (Specify)	1 2		
Q406	Can people protect themselves from HIV/AIDS by having one uninfected faithful sex partner?	Yes No Others (Specify)	1 2		
Q407	Can people protect themselves from HIV/AIDS by abstaining from sexual intercourse?	Yes No Others (Specify)	1 2		
Q408	Can a person get HIV/AIDS by sharing a meal with someone who is infected?	Yes No Others (Specify)	1 2		
Q409	Can a person get HIV/AIDS by getting injections with a needle that was already used by someone else who was infected?	Yes No Others (Specify)	1 2		
Q410	Can people who inject drugs protect themselves from HIV, the virus that causes AIDS, by switching to non- injecting drugs?	Yes No Others (Specify)	1 2		
Q411	Do you think that a healthy-looking person can be infected with HIV, the virus that causes AIDS?	Yes No Others (Specify)	1 2		
Q412	Can a pregnant woman infected with HIV or AIDS transmit the virus to her unborn child?	Yes No Others (Specify)	1 2		

Q.No		Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q413	transn	woman with HIV or AIDS nit virus to her newborn child th breastfeeding?	Yes No Others (Specify)	1 2		
Q414		you had a <b>genital discharge</b> in ast 12 months?	Yes No	1 2		
	1		Others (Specify)			
Q415		you had an <b>ulcer/sore</b> in your l area during the <b>past 12</b> hs?	Yes No Others (Specify)	1 2		
Q416		you had burning pain during tion in the past 12 months?	Yes No Others (Specify)	1 2		
		FILTER: CHECK Q414 to Q4	Not reported any s		n of [_2_ STI	]→ <b>→</b> Q420
		Reported any symptom of	f STI [_1_] ↓	•	y <b>11</b>	
Q.No		Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q417		did you do the last time you had	No treatment	01	→Q420	
	any o	f these problems?	Took home based remedy	02	<b>→</b> Q419	
		LTIPLE RESPONSES	Borrowed prescription from	03	<b>→</b> Q419	
	POSS	SIBLE)	friend/relative			
		NO TREATMENT" IS	Took medicine I had at home	04	<b>→</b> Q419	
	MEN	TIONED, SKIP TO Q420)	Purchased medicine from a Chemist	05	<b>→</b> Q419	
			Shop			
			Went to a traditional	06		
			healer/quack	07		
			Went to NGO Peer Educator	08		
			Went to Health Worker	09		
			Went to a Private hospital / clinic	10		
			Went to a Govt. Hospital /clinic			
			Others			
			(Specify)			
Q418		much time did you take to visit a practitioner last time after you	1 week or less Less than 1 month but more than 1	1 2		
		ienced an STI symptom?	week			
			One month or more	3		
			Others (Specify)			

Q.No	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q419	What type of medicine did you take	Allopathic	1		
	last time?	Homoeopathic	2		
	(MULTIPLE RESPONSES	Ayurvedic / Herbal	3		
	POSSIBLE)	Other (Specify)			
Q420	In case you have any of the symptoms	No treatment	01		
	approacn?	Take home based remedy	02		
		Borrow prescription from	03		
		friend/relative	04		
		Take medicine I had at home	05		
		Purchase medicine from a Chemist	06		
		Shop	07		
		Go to a traditional healer/quack	08		
		Go to NGO Peer Educator	09		
		Go to Health Worker	10		
		Go to a Private hospital / clinic			
		Go to a Govt. Hospital /clinic			
		Others(Specify)			

### **SECTION 5: MARRIAGE AND LIVE IN PARTNERS**

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q501	Have you ever been married?	Yes No Others (Specify) (If "Can not remember" or "No response" is mentioned in Others, skip to Q503)	1 2	→Q503	
Q502	How old were you when you first married?	Age in years Others (Specify)			

Q503	Are you currently married or living with a man / woman	Currently married, living with spouse	1		
	with whom you have a sexual relationship?	Currently married, living with other sexual partner	2		
		Currently married, not living with spouse or any other sexual partner	3		
		Not married, living with sexual partner	4		
		Not married, not living with sexual partner	5		
		Others (Specify)			

### SECTION 6: SEXUAL HISTORY - NUMBER OF PARTNERS

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q601	Have you <i>ever</i> had sexual intercourse?  [For the purposes of this survey, "sexual intercourse," is defined as penetrative vaginal or anal sex.]	Yes No Others (Specify)	1 2	→Q1001	
Q602	At what age did you first have sexual intercourse?	Age in years Others (Specify)			
Q603	Have you had sexual intercourse in the last 12 months?	Yes No Others (Specify)	1 2	→Q1001	
Q604	For WOMEN: Think about the male sexual partners you've had in the last 12 months.				
	For MEN: Think about the female sexual partners you've had in the last 12 months.				
	In total, how many different sexual partners have you had in the last 12 months?	TOTAL [_ _] DON'T KNOW NO RESPONSE	88 99		
	Among these partners that you have had in the last 12 months, how many were:				
	- Your spouse(s) or live-in sexual partners ("regular" partners)	REGULAR [_ _] DON'T KNOW	88 99		

2	

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
	- "Commercial" (partners with whom you bought or sold sex in exchange for money or drugs)	NO RESPONSE  COMMERCIAL [_ _]  DON'T KNOW  NO RESPONSE	88 99		
	- Sexual partners that you are not married to and have never lived with and did not have sex in exchange for money ("non-regular" partners) –DO NOT INCLUDE CURRENT SPOUSE (S) OR LIVE-IN SEXUAL PARTNERS	NON-REGULAR [  DON'T KNOW NO RESPONSE	88 99		

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q605	(ASK FOR MEN ONLY):				
	We've just talked about your female sexual partners. Have you ever had any male sexual partners?	YES NO NO RESPONSE	1 2 9	<b>→</b> Q701	
	Have you had sexual intercourse with any of your male partners in the last 12 months? (Sexual intercourse defined as penetrative anal sex)	YES NO NO RESPONSE	1 2 9	<b>→</b> Q701	
	With how many different male partners have you had anal intercourse in the last 12 months?	Male partners [ _] DON'T KNOW NO RESPONSE	88 99		
	Did you or your partner use a condom last time you had anal sex with a male partner?	YES NO NO RESPONSE	1 2 9		
	How frequently did you use a condom with your male partners in the last 12 months?	EVERYTIME MOST TIMES SOMETIMES OCCASIONALLY NEVER	1 2 3 4 5		
		OTHER (SPECIFY)			

# **SECTION 7: SEXUAL HISTORY - REGULAR PARTNER**

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q701	FILTER: CHECK Q604  HAD SEX WITH REGULAR PARTNER DURING LAST 12 MONTHS		ING	<b>→</b> Q801	
Q702	The last time you had sex with a regular partner did you and your partner use a condom?	Yes No Not Aware of Condom Others (Specify) (If "Can not remember" or "No response" is mentioned in Others, skip to Q707)	1 2 3	→Q706 →Q801	
Q703	Who suggested using a condom that time?  CIRCLE ONE	Myself My partner Joint decision Others (Specify)	1 2 3		
Q704	Which brand of condoms did you use last time? (SHOW PACKAGE COVERS OF ALL BRANDS)	Nirodh Kamasutra Delux Masti Kohinor Others (Specify)	1 2 3 4 5		
Q705	From where did you get this condom?  AFTER ASKING THIS QUESTION GO TO Q707	Person had sex with Health worker / Clinic Friend Purchased at Chemist shop Purchased at Pan shop Purchased at other type of outlet (grocery etc.) Others (Specify)	1 2 3 4 5 6		

Q No.	Questions and filters	Coding categories				S	kip to	<b>Coding Boxes</b>
Q706	Why was condom not used last time?  (MULTIPLE RESPONSES	Not available Too expensive Partner Objected	NR 1	2	DK 8 8	9		
	POSSIBLE)	Don't like them Didn't think it was necessary Didn't think of it Haven't heard of condom before There was no time  Place was inappropriate Others (specify)		2 2 2 2 2 2 2 2 2 2	8 8 8 8 8 8	9 9 9 9 9		
Q707	Do you generally use a condom with your regular partner?	Yes No Others (Specify)	1	2	8 1 2	9		
Q708	With what frequency did you use a condom with your regular partner during the last 12 months?	Every time Most times Sometimes Occasionally Never Others (specify)			1 2 3 4 5			

# SECTION 8: SEXUAL HISTORY - COMMERCIAL PARTNER

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q801	FILTER: CHECK Q604  HAD SEXUAL INTERCOURS A COMMERCIAL PARTNER LAST 12 MONTHS[_1_]			→Q901	
Q802	Think about the commercial partners you have had in the past one month. In total, how many were:  Partners to whom you sold sex in exchange for money or drugs	SOLD DON'T KNOW NO RESPONSE	88 99		
	Partners from whom you     bought sex in exchange     for money or drugs	BOUGHT DON'T KNOW NO RESPONSE	88 99		
Q803	The last time you had sex with a commercial partner, did you and your partner use a condom?	Yes No Not aware of Condom Others (specify) (If "Can not remember" or "No	1 2 3	→Q807 →Q901	

		response" is mentioned in others, skip to Q808)		
Q804	Who suggested condom use that time? (CIRCLE ONE)	Myself My partner Joint decision Others (Specify)	1 2 3	
Q805	Which brand of condoms did you use last time? (SHOW PACKAGE COVERS OF ALL BRANDS)	Nirodh Kamasutra Delux Masti Kohinor Others (Specify)	1 2 3 4 5	
Q806	From where did you get this condom?  AFTER ASKING THIS QUESTION GO TO Q808	Person had sex with Health worker / Clinic Friend Purchased at Chemist shop Purchased at Pan shop Purchased at other type of outlet (grocery etc.) Others (Specify)	1 2 3 4 5 6	

Q No.	Questions and filters	Coding categories	Skip to	<b>Coding Boxes</b>
Q807	Why was condom not used last time?  (MULTIPLE RESPONSES POSSIBLE)	Not available Too expensive Partner Objected Don't like them Didn't think it was necessary Didn't think of it Haven't heard of condom before There was no time  Place was inappropriate Others (specify)	Y N DK NR 1 2 8 9 1 2 8 9	
Q808	Do you generally use a condom with your regular partner?	Yes No Others (Specify)	1 2	
Q809	With what frequency did you use a condom with your commercial partner during the last 12 months?	Every time Most times Sometimes Occasionally Never Others (specify)	1 2 3 4 5	

# SECTION 9: SEXUAL HISTORY - NON-REGULAR AND NON-PAYING SEXUAL PARTNER

Q No.	Questions and filters	Coding categories		Skip to	<b>Coding Boxes</b>
Q901	FILTER: CHECK Q604  HAD NON-REGULAR NON- COMMERCIAL SEX PARTN DURING LAST 12 MONTHS	ER REGULAR NON-		→Q1001	
Q902	Think of the times you have had sex with a non regular sex partner - the last time you had sex with a non-regular partner, did you and your partner use a condom?	Yes No Not aware of Condom Others (Specify) (If "Can not remember" or "No response" is mentioned in Others, skip to Q907)	1 2 3	→Q906 →Q1001	
Q903	Who suggested condom use that time?  CIRCLE ONE	Myself My partner Joint decision Others (Specify)	1 2 3		
Q904	Which brand of condoms did you use last time? (SHOW PACKAGE COVERS OF ALL BRANDS)	Nirodh Kamasutra Delux Masti Kohinor Others (Specify)	1 2 3 4 5		
Q905	From where did you get this condom?  AFTER ASKING THIS QUESTION GO TO Q907	Person had sex with Health worker / Clinic Friend Purchased at Chemist shop Purchased at Pan shop Purchased at other type of outlet (grocery etc.) Others (Specify)	1 2 3 4 5 6		

Q No.	Questions and filters	Coding categories		Skip	to	<b>Coding Boxes</b>
Q906	Why was condom not used last time?  (MULTIPLE RESPONSES POSSIBLE)	Not available Too expensive Partner Objected Don't like them Didn't think it was necessary Didn't think of it Haven't heard of condom before There was no time Place was inappropriate Others (specify)	Y NR 1 1 1 1 1 1 1 1 1	DK 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	9 9 9 9 9 9 9	
Q907	Do you generally use a condom with your regular partner?	Yes No Others (Specify)	1 2			
Q908	Think of the times you had sex with a non-regular partner  With what frequency did you use a condom with all your non-regular partners during the last 12 months?	Every time Most times Sometimes Occasionally Never Others (specify)	1 2 3 4 5			

SECTION 10: RISK PERCEPTION AND EXPOSURE TO INTERVENTION

Q.No.	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q1001	Can people protect themselves from HIV by using a condom correctly every time they have sex?	Yes No Others (Specify)	1 2		
Q1002	In your opinion, what are the chances of a person like you contracting HIV/AIDS infection?  (READ OUT ALL THE OPTIONS AND CIRCLE ONE)	Very high Moderate Low No chance Others (Specify)	1 2 3 4		
Q1003	Is it possible for someone like you to get a confidential test to find out whether you are infected with HIV?  By confidential, I mean that no one will know the result if you don't want them to know it.	Yes No Others (Specify)	1 2		

Q.No.	Questions and Filters	Coding Categories		Skip to	<b>Coding Boxes</b>
Q1004	I do not want to know the result, but have you ever had an HIV test?	Yes No Others (Specify)	1 2	→Q1007	
Q1005	Did you voluntarily undergo the HIV test, or were you required to have the test?	Voluntary Required Others (Specify)	1 2		
Q1006	Please do not tell me the result, but did you find out the result your test?	Yes No Others (Specify)	1 2		
Q1007	Did anyone in the past one year approach you to educate you on spread or prevention of STI/HIV/AIDS?	Yes No Others (Specify)	1 2		
Q1008	Did you attend / participate in any campaign / meeting on STI / HIV / AIDS in the past one year?	Yes No Others (Specify)	1 2		
Q1009	Did you receive any free medical treatment for STI / HIV / AIDS in the past one year?	Yes No Others (Specify)	1 2		
Q1010	If we ask you to recall only one message about HIV / AIDS, which one would you easily remember? (RECORD THE ANSWER IN VERBATIM)	Message:			

Completion time _		
Signature of the I	ıvestigator	

THANK THE RESPONDENT AND TERMINATE THE INTERVIEW