# **Bio-behavioral surveillance surveys among female**

# sex workers in Georgia

# (Tbilisi, Batumi, 2008 - 2009)

**Study report** 

Prepared by:

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# Acronyms:

AIDS	Acquired Immune Deficiency Syndrome
BSS	Behavioral Surveillance Survey
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BSS	Behavioral Surveillance Survey
CIF	Curatio International Foundation
FSW	Female Sex Worker
GEL HIV	Georgian Lari (exchange rate of 1.6525 GEL/1 USD in December 15, 2008; 1.6780 GEL/1 USD in March 15, 2009) Human Immunodeficiency Virus
IDP	Internally Displaced Person
IDUs	Injecting Drug Users
NG	Neisseria Gonorrhea
PCR	Polymerase Chain Reaction
SPSS	Statistical Package for the Social Sciences
STIs	Sexually Transmitted Infections
TG	Tanadgoma
TLS	Time-Location Sampling
TPHA	Treponema Pallidum Hemagglutination Assay
UNGASS	United Nations General Assembly Special Session
USAID	United States Agency for International Development
VCT	Voluntary Counseling and Testing

# Definitions

**Anonymous-linked testing** – testing where no names are taken but results are linked to a number that only the participant knows.

**Consistent Condom Use** – use of condoms every time sexual relations occur, which includes vaginal, anal, or oral sex.

**FSW client** – a person with whom the FSW has established sexual relations in exchange for money or goods.

**High-Risk Behavior** – any behavior that puts an individual or individuals at increased risk of contracting STIs/HIV or transmitting STIs/HIV to another individual (e.g., having multiple sex partners without using condoms consistently; sharing used non-sterile needles among IDUs).

**Permanent Client** – a client who often uses sexual services of one particular FSW.

**Regular sexual partner** – a spouse/lover/boyfriend with whom the FSW cohabitates and has established regular sexual contacts without exchange of money.

**Street-based female sex workers** – women who seek to provide sex in exchange for money by walking or standing on streets.

**Time-Location Sampling** – based on tendency of some group members to gather at certain locations, different sites are enumerated and mapped through observation, then a list of sites is used as sampling frame from which to select a sample of sites.

### **Executive Summary**

This report presents findings from two Behavior Surveillance Surveys (BSS) conducted in Tbilisi and Batumi, Georgia, among Female Sex Workers (FSWs). The surveys were carried out under the project "Expanding HIV/AIDS prevention, Treatment, Care and Support Activities", component I "Establishment of evidence base for national HIV/AIDS program by strengthening of HIV/AIDS surveillance system in the country", which is funded by The Global Fund to fight AIDS, TB and Malaria and implemented by Curatio International Foundation in partnership with NCDC, Infectious Diseases, AIDS & Clinical Immunology Research Center, Association Tanadgoma and Bemoni Public Union. In Batumi the BSS was conducted in December, 2008 and in Tbilisi - in March, 2009.

The main purpose of the surveys was to provide an understanding of behavioral, social and demographic factors contributing to the spread of STIs and HIV/AIDS among FSWs. Since 2002, prior to the surveys presented in this report, three BSSs among FSWs had been conducted in Tbilisi and two – in Batumi. Those surveys were carried out under the USAID-funded "STI/HIV Prevention Project". In particular, the BSSs in Tbilisi took place among street-based FSWs in 2002, 2004 and 2006. As for Batumi, they were conducted among facility-based FSWs in 2004 and 2006. As far as the methodology and instrument used during all these surveys were basically the same, the data and findings can be easily compared. So, researchers can track what, if any, changes have occurred in the prevalence of diseases and risk behaviors since 2002 in Tbilisi and 2004 – in Batumi.

#### Methods

Time-Location Sampling (TLS) Methodology was used in both BSSs. TLS takes advantages of the fact that some hidden populations tend to gather or congregate in certain types of locations. To develop a survey sampling frame, in December 2008 (Batumi) and in March 2009 (Tbilisi) preliminary mapping exercises were undertaken to identify the numbers, sites and working hours of FSWs (For more detailed account see the Methodology section). In Tbilisi a total of 160 and in Batumi – a total of 120 FSWs agreed to participate and were interviewed.

The interviews were conducted face-to-face, in the offices of Tanadgoma, by experienced interviewers. The FSWs were asked questions regarding high-risk behaviors, knowledge of STIs and HIV/AIDS, and their use of health services. After the interview, each respondent was asked if

she would provide both urine and blood specimens for an anonymous-linked test for sexually transmitted infections (STIs) and HIV.

#### **Study Findings**

On average, FSWs in the survey were of 36 years of age in Tbilisi and of 35.5 years of age in Batumi. Majority of FSWs at both survey sites are Georgian: 88.8% in Tbilisi and 92.5% in Batumi. On average, they reported attending schooling for 11.2 years in Tbilisi and 10.71 in Batumi. In both studies most of the FSWs had completed secondary or vocational level education (81.9% in Tbilisi and 86.7% in Batumi). 13.1% (Tbilisi) and 8.3% (Batumi) of FSWs have completed higher education.

In both surveys most FSWs are divorced or separated (70.6% in Tbilisi and 60.8% in Batumi). Very few of them were married (9.4% in Tbilisi and 10.8% in Batumi). The overwhelming majority (87.9% in Tbilisi and 90.8% in Batumi) of FSWs have dependents (children, parents) that they financially support. Mean number of financial dependents is 2.7.

Very few FSWs from both studies (6.9% in Tbilisi and 9.2% in Batumi) are internally displaced persons (IDPs) from Abkhazia or South Ossetia.

As for drug and alcohol use reported by FSWs, it is very low: about 13% of everyday alcohol consumption at both survey sites. Also, only 4.1% of Batumi respondents reported having ever injected drugs. More FSWs reported smoking marijuana – 10% in Tbilisi and 6.7% in Batumi.

Overall, the average age at which FSWs first exchanged sex for money is around 29 years of age at both survey sites. On average, the FSWs have been involved in commercial sex for 6.9 years in Tbilisi and 6.4 in Batumi. The percentage of FSWs having other sources of income is over 85%.

Average number of clients on the last working day for FSWs is 1.74 in Tbilisi and 2.06 in Batumi. The fees received by the FSWs for commercial sex vary from 39.40 GEL (23.5 USD) in Tbilisi to 56.97 GEL (34 USD) in Batumi.

More than 92% of FSWs reported use of condom with the last paying client in both surveys, and more than three-quarters (81.6% in Tbilisi and 79.3% in Batumi) of FSWs reported that the use of condom was at their initiative. However, the percentage of FSWs who reported consistent use of a condom with paying client during the last month is 77.5% in Tbilisi and 80% in Batumi.

As for condom use with the permanent clients, 80.6% of FSWs in Tbilisi and 66.7% - in Batumi reported having them. 94.7% in Tbilisi and 88.8% in Batumi used condom during the last sexual intercourse with the permanent client. Percentages of FSWs that consistently used condoms with the permanent clients during the last 12 months is quite high – 84.1% in Tbilisi and 72.5% in Batumi.

About half of FSWs in Tbilisi and about two thirds in Batumi have permanent partners. 12.8% in Tbilisi and 8.9% in Batumi used condom during the last sexual intercourse. As a prevalent reason for not using condom FSWs report that they did not think of it. Percentages of FSWs reporting consistent condom use during the last year are 9% in Tbilisi and 7.6% in Batumi.

15.6% of FSWs in Tbilisi and 8.3% - in Batumi had experienced either physical violence, rape or sexual violence through blackmailing in the last year.

Almost all FSWs (98.9% in Tbilisi and 100% in Batumi) were aware of sexually transmitted infections (STIs). 70.9% of FSWs in Tbilisi and 85.8% in Batumi could name at least one STI symptom in women. About one fourth of respondents at both survey sited reported having some STI symptom over the last 12 months. Half out of these FSWs referred to the state-owned hospital/clinic for the treatment of STIs, but 36.8% of the respondents in Tbilisi and 55.2% in Batumi applied self-treatment.

More than 90% of FSWs at both sites are aware about HIV/AIDS, but only 10% in Tbilisi and 5.1% in Batumi could correctly answer 6 questions about HIV/AIDS. In both studies more than half of the FSWs (27.5% in Tbilisi and 23,3% in Batumi) have been tested for HIV and got their results during the last year.

FSWs at both survey sites were tested for syphilis, gonorrhea and HIV. 45.5% of FSWs in Tbilisi and 35.8% in Batumi were identified with the lifetime syphilis, more than 5% were diagnosed with gonorrhea. As for the prevalence of HIV, in Tbilisi it was 1.9% and in Batumi – 0.8%.

#### Conclusions

From 2002 the sex workers become more and more aged. In Tbilisi the median age was 26 in 2002, 30 in 2004 and 32.5 in 2006; in Batumi it was 33 in both 2004 and 2006. So this trend is kept in Tbilisi and has become prevalent also in Batumi.

In terms of education level of FSWs, in Tbilisi it had not changed during the last several years. As for Batumi, percentage of FSWs with higher education has increased.

Percentages of visitor FSWs have been increasing since 2002 both in Tbilisi and Batumi.

FSWs have come from different cities/villages, where some of them have done sex work as well. For the moment majority of FSWs report that their only income is sex business, and they have to support financially 2-3 family members.

FSWs both in Tbilisi and Batumi do not report high percentages of alcohol use, especially everyday use. As for drug use, extremely small percentages report having ever used injecting drugs. The most prevalent drug that FSWs, especially young ones, report using is marihuana.

The vast majority of FSWs reported condom use with the last client and consistent condom use with the clients during the last 30 days. In most of the cases condom use with the last client is initiated by FSWs.

Very low percentages of FSWs at both survey sites reported using condom during the last intercourse with their regular partners, with slightly lower proportion in Batumi.

Condoms are quite accessible for FSWs, they can get or buy them in not more than 15 minutes.

Almost all FSWs from both survey sites are aware about sexually transmitted Infections, out of which big majority knows at least one STI symptom among women.

FSWs tend to refer to state clinics or hospitals in case of STI symptom manifestation. It is noteworthy that data of behavior patterns when having STI symptoms demonstrate increased rates of applying self-treatment, compared to 2006.

The vast majority of FSWs are aware of HIV/AIDS. It is interesting that still there are several FSWs at both survey sites (10 in Tbilisi, 3 in Batumi) that are not aware of HIV/AIDS. Also, very small percentages of FSWs could correctly answer 6 questions on ways of HIV transmission.

Majority of FSWs know where they can receive HIV testing in their community. 27.5% (Tbilisi) and 23,3% (Batumi) have been tested during the last year and received their results.

FSWs at both survey sites were tested for syphilis, gonorrhea and HIV. The survey found alarmingly high rates of syphilis particularly among Tbilisi respondents. Very small proportion of FSWs showed positive result on Gonorrhea test. As for HIV, the survey found only 3 HIV positive cases in Tbilisi and only 1 – in Batumi.

#### Recommendations

- FSWs in these studies had low rates of use of condoms with regular partners; high levels
  of syphilis; low levels of knowledge on HIV transmission/prevention; and ineffective and
  harmful health seeking practice (self-treatment). Prevention interventions must address
  all these potential high-risk behaviors. New, tailored strategic approaches of work with
  FSWs should be implemented in order to address specific gaps in their knowledge,
  attitudes and practices.
- Behavior change communication interventions should be targeted at FSWs and their sexual partners - regular partners, clients, and permanent clients - because the responsibility for condom use should not rest solely on the FSW. Involving FSWs in the development of relevant messages and the dissemination of these messages within their networks will increase effectiveness.
- Health services with a specialization for dealing with sex workers and their clients should be upgraded and promoted. In addition to providing diagnosis and treatment for STIs, these services should provide prevention counseling, HIV counseling and testing, and other sexual health services that are needed by FSWs. These services should be expanded to include regular partners of sex workers as a way to access this group.
- Since television, social workers and newspapers were cited as the main sources of STI/HIV/AIDS information by FSWs, prevention and educational messages should be disseminated primarily through these channels. Television information campaigns should address educational issues that are appropriate for the general population. In addition, specific and more explicit HIV prevention messages and materials for FSWs, their clients and regular partners should be provided at the interpersonal level through outreach workers and peer educators rather than through mass media outlets. The interventions should target the gaps in knowledge and attitudes revealed through the surveys.
- Efforts should be made to expand prevention services to other sex worker groups, such as high-rate facility-based and cell phone-based sex workers. This may involve working with "gatekeepers" for access.

- Voluntary HIV testing, with adequate pre- and post-test counseling, should continue and expand. Piloting of rapid HIV testing through mobile laboratories has proved effective and acceptable for the FSWs and their clients. Bringing STI/HIV testing services to the commercial sex settings should expand in order to offer testing possibilities to more beneficiaries of prevention programs. VCT services should be made available through sites that provide other HIV prevention and health services to FSWs.
- Interventions for FSWs must be extended beyond Tbilisi, Batumi and Kutaisi. High-risk sites should be identified and prevention interventions begin. Typical sites include urban areas, ports and commercial transit areas, cross-border areas, and military sites where large numbers of workers without their families reside.
- About 1 of every 3 FSW in Batumi reported traveling abroad for sex work and a low percentage (45%) of them reported always using a condom. Even more disturbing is that 55% of the FSWs that traveled abroad for sex work reported getting an injection that they were told prevented STIs and HIV. Educational work in this direction should continue. Specially designed IEC materials need to be developed for FSWs about working abroad and the ineffectiveness of injections to prevent STIs and HIV.
- Non-coercive, anonymous, ethical and systematic surveillance of FSWs (and other high risk groups), both behavioral and of selected biological markers, should be conducted throughout Georgia and repeated on a regular basis to provide early warning of a possible dramatic increase in the prevalence rate. In addition, surveys can provide invaluable information for designing focused interventions as well as for monitoring whether STI/HIV prevention and reduction interventions are working.

# Table 1: UNGASS Indicators

Indicators	Tbilisi	Batumi
HIV testing in most-at-risk populations		
Percentage of most-at-risk populations who received an HIV test in the last 12 months and who knows their results	27.5% (44/160)	23.3% (28/120)
≤24	0%(0/11)	0%(0/13)
≥25	29.5%(44/149)	26.2%(28/107)
Exposure to Prevention Programs		
Percentage of most-at-risk populations reached with HIV prevention programs	66.9%(107/160)	85.8%(103/120)
≤24	27.3% (3/11)	69.2% (9/13)
≥ 25	69.8% (104/149)	87.9% (94/107)
Knowledge about HIV prevention		
Percentage of most-at-risk populations who correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission	8.1%(13/160)	5.8%(7/120)
<u>≤</u> 24	0% (0/11)	7.7%(1/13)
≥25	8.7%(13/149)	5.6%(6/107)
Condom use		
Percentage of female sex workers reporting the use of a condom with their most recent client	98.8%(158/160)	92.5%(111/120)
≤24	100%(11/11)	100%(13/13)
≥ 25	98.7%(147/149)	91.6%(98/107)
Biomarker		
Positive for HIV	1.9% (3/154)	0.8% (1/119)
≤ 24	0% (0/11)	7.7% (1/13)
≥ 25	2.1% (3/143)	0% (0/106)

Come to discharge	Tbilisi	Batumi
Core indicators	N=160	N=120
Participation in previous BSS		
Participated in 2002	12.5 % (20/160)	NA
Participated in 2004	17.5% (28/160)	7.5% (9/120)
Participated in 2006	43.1% (69/160)	36.7% (44/120)
Participated in all surveys	10% (16/160)	5.8%(7/120)
Biomarker		
Neisseria gonorrhea	5.7% (9/157)	5.8% (7/120)
Syphilis	45.5% (71/156)	35.8% (43/120)
Percentage with no STI	50.3% (77/153)	60.8% (73/120)
Percentage with 1 STI	48.3% (74/153)	36.7% (44/120)
Percentage with 2 STIs	1.3% (2/153)	2.5% (3/120)
HIV (Confirmation)	1.9% (3/154)	0.8% (1/119)
Demographic Characteristics		
Median age	36	35.5
Level of education (secondary)	81.9% (131/160)	86.7% (104/120)
Marital status (divorced)	70.6% (113/160)	60.8% (73/120)
Sole source of income	88.1% (141/160)	86.7% (104/120)
Have financial dependents	87.9% (138/157)	90.8% (109/120)
Average # of dependents for FSWs with dependents	2.64 (N=138)	2.67 (N=109)
Alcohol and Drug Use		
Consume alcohol at least once a week	33.7% (54/160)	36.6% (44/120)
Ever taken "pills"	0.6% (1/160)	1.7%(2/120)
Ever use of "inhalants"	0% (0/160)	0% (0/120)
Ever injected drugs	0% (0/160)	4.1% (5/120)
Study Population Characteristics		
Median age at 1st sexual contact	17.0	17.0
Median age 1st received money in exchange for sex	28.0	27.0
Mean years working as sex worker	6.99 (Range: <1 to 23)	6.43 (Range: <1 to 26)
Sexual Risk Behavior		
Has non-paying/regular partner	48.8% (78/160)	65.8 % (79 /120)
Condom use during last sexual intercourse with non- paying/regular partner	12.8% (10/78)	8.9% (7/79)
Consistent (always) condom use with non-paying/regular partner over last 12 months	9.0%(7/78)	7.6%(6/79)
Condom use with last client	98.8% (158/160)	92.5% (111/120)
Consistent (always) condom use with clients over last month?	77.5% (124/160)	80.0% (96/120)
Condom use with last permanent partner	94.7 % (125/132)	88.8 % (71/80)
Consistent condom use with permanent partner over the last 12 month	84.1% (111/132)	72.5% (58/80)
Experienced physical violence in the past year (Beating, bothering, etc.)	14.4%(23/160)	4.2%(5/120)
Experienced sexual violence through blackmailing or threatening in the past year	2.5%(4/160)	5.0%(6/120)
Experienced forced sexual intercourse/rape in the past year	1.9%(3/160)	0.8%(1/120)

Core indicators	Tbilisi	Batumi
	N=160	N=120
Experienced either physical violence, rape or sexual violence through blackmailing during the last year	15.6%(25/160)	8.3%(10/120)
Condoms		
Place where condoms are obtained (drug store)	91.8% (146/159)	91.7% (110/120)
Less than 5 minutes is needed to obtain a condom	62.5% (100/160)	71.7% (86/120)
If condom not used with last client, why? (clients refusal)	0% (0/2)	33.3% (3/9)
STI/HIV Knowledge, Experience and Practices		
Do not know any symptom in women	0.6% (1/158)	3.3% (4/120)
Had abnormal vaginal discharge in the last 12 months	23.8% (38/160)	23.3% (28/120)
Had vaginal ulcer/boil in the last 12 months	1.9% (3/160)	2.5% (3/120)
Places sought treatment:		
State clinic/hospital	52.6% (20/38)	48.3% (14/29)
Self-treatment	36.8% (14/38)	55.2% (16/29)
Aware of HIV/AIDS	93.8% (150/160)	97.5% (117/120)
Know person with HIV/AIDS	8.0% (12/150)	4.3% (5/117)
Received information about STI/AIDS	98.8% (158/160)	100.0% (120/120)
Main sources of HIV/AIDS information:		
Television	67.7% (107/158)	83.3% (100/120)
Social Worker	46.8% (74/158)	72.5% (87/120)
Correctly responds to six questions on HIV	10.0% (15/150)	5.1% (6/117)
Voluntary Counseling and Testing		
Voluntary HIV testing in the community	86.7% (130/150)	94.9% (111/117)
Had an voluntary HIV test	71.3% (107/150)	65.8% (77/117)
Received HIV test result	94.4% (101/107)	85.7% (66/77)

# Introduction

Georgia is among the countries with low HIV/AIDS prevalence but high potential for developing a widespread epidemic. In its early stage HIV epidemics in Georgia showed similarities with the epidemics in most Eastern European countries with injecting drug use being the major transmission mode. However, over the last several years while transmission through intravenous drug use is still the prevailing route for HIV spread, it is gradually declining and heterosexual transmission is increasing.

As of December, 2009, 34 % of all HIV-positive cases with a known route of transmission have been infected through heterosexual contacts. This percentage has been steadily increasing during the recent years. However, the epidemiological data requires further analysis. Available information through routine reporting is not sufficient to draw explicit conclusions. In-depth studies, such as bio-behavioral surveys (BBS) among risk groups are necessary to understand the infection spread among groups at risk as well as link the infection rates with the behavior factors. Also better epidemiology is needed to draw conclusions about changing epidemics.

In years 2002-2007 Save the Children Georgia Country Office under the USAID funded STI/HIV Prevention (SHIP) project had introduced second generation surveillance studies in the country and conducted BSSs among various most-at-risk populations (Injecting Drug Users, Female Sex Workers, Men who have Sex with Men) in three major cities of Georgia – Tbilisi, the capital city, Batumi (Adjara Autonomous Republic) and Kutaisi (Imereti region).

This report represents the subsequent wave of behavioral and biological surveillance studies (Bio-BSS) undertaken among FSWs in 2008-2009 with the same sampling techniques.

Objective of the 2008-2009 Bio-BSS in Georgia was to measure prevalence of HIV, Gonorrhea and Syphilis among FSWs, provide measurements of key HIV risk behaviors and generate evidence for advocacy and policy-making. The studies were implemented within the GFATMfunded project on the HIV/AIDS surveillance system strengthening implemented by Curatio International Foundation (CIF) and partner organizations.

This report presents analysis of the data gathered through the surveys. Special focus is made on some core indicators; indicators related to UNGASS Declaration of Commitment on HIV/AIDS are presented separately as a table. Analysis includes a breakdown by five age groups for each indicator, which is presented in the data tables in the appendix; however, due to brevity of

presentation age group similarities and/or differences will not be discussed. In the end, conclusions and recommendations are provided; some of them are derived from comparison with previous BSSs.

# Methods

## **Ethical Issues**

The survey investigators were cognizant of the fact that the individuals participating in this study were at some risk for social harm should they be identified as part of the target group. These surveys were designed to provide maximum protection for the participants, yet at the same time provide individual and community benefits.

The ethical issues that have been taken into consideration are:

- Participation in these surveys was voluntary. Participants were free to withdraw at any time and were informed that refusal or withdrawal would not affect services they would normally receive.
- No names were recorded. All documentation is anonymous, linked only by a study number.
- Staff conducting the survey was trained in discussing sensitive issues and protecting participants' confidentiality and human rights.
- All individuals identified with a curable sexually transmitted infection were offered counseling and referred to the "Healthy Cabinet" for treatment.
- All individuals identified with HIV infection were offered counseling and referred to the Infectious Diseases, AIDS & Clinical Immunology Research Center for further testing and, if necessary, treatment.
- Protocols and instruments of the surveys were submitted to and approved by the Ethical Committee of the HIV/AIDS Patients Support Foundation.

## Description of target group at each location

### Tbilisi

There are several categories of FSWs in Tbilisi: a) street-based; b) sauna (or bathhouse) based; c) hotel based; and d) "mobile-phone" based. Generally, each category of FSWs is found in different locations and serves different types of clients. Thus, each category represents a type or "status" among FSWs. Tanadgoma is working with street-based, sauna (bathhouse) and hotelbased FSWs. For the BSS in Tbilisi street-based FSWs were selected since they are:

- Easier to locate;
- Less educated and less likely to be aware of the dangers associated with high-risk behaviors;
- Easier to access because there are no pimps;
- Likely to be at higher risk of STIs/HIV, due to having a greater number of clients; and
- Least likely to be able to afford testing and treatment.

In the BSS, presented in this report, in addition to street-based FSWs, 23 (14.4%) sauna-based FSWs were recruited or came on their own.

#### Batumi

In Batumi the categories of the FSWs are the same except the first, street-based FSWs. The lowest layer of FSWs is located at so-called "bars" that represent small facilities which are not exactly the bars, but the places where sex services could be purchased. So, in Batumi Tanadgoma works mainly with bar-, restaurant-, sauna- and hotel-based FSWs. Therefore, in order to obtain a representative sample of the target population, the study was conducted among FSWs working at these facilities.

#### Sampling

Over the past two to three decades several methods for recruiting hidden populations for surveillance and other survey research purposes have been developed. Time Location Sampling (TLS), qualified as a probability sampling method, is strongly recommended for surveillance surveys among hidden population. This approach, which is being used more frequently in recent years, takes advantage of the fact that some hidden populations tend to gather or congregate in certain types of locations. In TLS, through preliminary mapping exercises, potential survey sites are observed during a pre-defined time interval. Because the locations where members of particular subgroups congregate change over time, it is necessary to repeat sampling frame development exercise before each round of surveillance data collection. Tanadgoma conducted the mapping exercise in Tbilisi in March 2009, and in Batumi in December 2008.

## Mapping

The mapping exercise, designed to identify the sites, approximate numbers, and working hours of FSWs, was conducted prior to both surveys. The exercise involved the use of a detailed street maps of Tbilisi and Batumi. TG divided Tbilisi into 28 sections and Batumi – into 8 sections (see Picture 1and Picture 2). In Tbilisi the size of a section was determined by the number of streets that could be easily observed within a short period of time. In Batumi the size of a section was determined by the number of facilities that could be easily observed within a short period of time.



Picture 1: Sections of Tbilisi Used for Observation and Mapping of FSWs



Picture 2: Sectional Grids to Map Facility-Based FSWs in Batumi.

For each section an observation route map was made. In unmarked cars, five teams in Tbilisi and two teams in Batumi comprised of two TG observers toured each section twice: once during the daytime (Tbilisi and Batumi 13:00 to 16:00) and once at night (Tbilisi 20:00 to 23:00, Batumi 19:00 – 22:00). Data of the mapping exercise are as follows:

Tbilisi: FSWs were found on 7 out of 28 sections; in total – 173 FSWs: 48 – on day sites and 125 – on night sites.

Batumi: Out of 158 facilities (98 bars, 43 hotels and 17 restaurants) observed FSWs were found in 16 bars, 9 hotels (25 facilities) and 1 square; in total – 106 FSWs.

Based upon the mapping exercise, a decision was made to recruit 160 FSWs in Tbilisi and 120 – in Batumi.

## **Recruitment of Study Participants and interviewing**

Recruitment process was conducted in Tbilisi on 23-30 March, 2009 and in Batumi on 11-16 December, 2008.

Recruitment consisted of teams of a driver and two TG social workers going to each section identified through the mapping exercise and offering FSWs participation in the survey. As incentives for participation FSWs received 20 GEL and condoms.

If the FSW agreed to take part in the survey, she was brought by car to TG's office for the interview. Interviews were conducted face-to-face by experienced TG interviewers at two private rooms. Immediately following the interview FSWs were asked to provide a blood and urine sample. Professional nurses working in the mobile laboratories of TG drew the blood. Screening was conducted for syphilis, gonorrhea and HIV. Each FSW was given a card with their ID number. All FSWs were asked to call in two weeks to find out the results of their test. After the interview, FSWs were driven back to the site where they were recruited.

The staff of TG contacted 99 street-based FSWs in Tbilisi and 188 facility-based FSWs in Batumi. It should be noted that in Tbilisi 67 FSWs came on their own as they heard about the survey. As for Batumi, 11 FSWs came on their own.

Subject duplication was overcome by using a subject identification features such as FSW's age, ethnicity, and physical characteristics, such as height, weight, scars, tattoos, and some biometric measures.

The refusal rate during the recruitment was very low: in Tbilisi it was 3,75% (6); in Batumi – 6.6% (8). This refusal rate was calculated for the flat refusals. Some of the FSWs refused for some reasons when first contacted by social workers and postponed their participation for several days.

In Tbilisi a total of 157 urine and blood samples were collected for testing on NG, syphilis and HIV; in Batumi number of specimens collected is 120.

In addition, Curatio carried out quality control and observed the interviewing process. On average, the interview took 20 minutes to complete in Tbilisi and 27 minutes – in Batumi.

The Infectious Diseases, AIDS & Clinical Immunology Research Center provided TG with a list containing the tests results by ID number. A FSW telephoned to Tanadgoma, gave her ID number and she was told whether her result was ready or not. If the result was already received from the Infectious Diseases, AIDS & Clinical Immunology Research Center, the FSW was invited to TG, and the results were given to her along with post-test counseling.

In Tbilisi 19.4% and in Batumi 48,33% of FSWs referred for their results and were notified by Tanadgoma staff.

#### **Survey Instrument**

The survey instrument used in both surveys was a behavior study questionnaire for FSWs provided in the manual "Behavioral Surveillance Surveys: Guidelines for Repeated Behavioral Surveys in Populations at Risk for HIV by Family Health International (FHI)". This tool has been used for the study of risky sexual and related behavior among FSWs in several countries. The questionnaire was used in previous BSSs conducted in 2002, 2004 and 2006 under the USAID-funded STI/HIV Prevention Project. However, the instrument was again revised and modified by the researchers in order to make sure that all necessary indicators were included into it.

A final version of the questionnaire was translated into Russian for those FSWs who were Russian-speaking.

#### **Biomarker Testing**

Biomarker component involved the analyses of blood specimens for HIV and Syphilis and Urine specimens for Neisseria gonorrhea at the laboratory of Infectious Disease, AIDS and Clinical immunology Research Center in Tbilisi. The Genscreen Ultra HIV rapid test was used for HIV screening. HIV positive samples were tested with Western Blot (HIV Blot 2.2, Genelabs Diagnostics) confirmatory test. For Syphilis the samples were tested using Treponema Pallidum Hemagglutination Assay (IMMUTREP-TPHA OD081, Omega Diagnostics) test system. For Neisseria gonorrhea the urine specimens were tested by Polymerase Chain Reaction PCR test systems,( NG PCR, Roche) PCR-positive cases were considered as confirmed infections of NG.

#### **Data Entry and Statistical Analysis**

Data entry and analyses took place at the CIF office. Data were entered into SPSS software (version 13.0). Any discrepancies were resolved by examining frequencies and cross-tabs and checking logic of all variables in the datasets. Hard copies of the completed questionnaires were kept at the CIF office.

The final report was completed by Tanadgoma in collaboration with CIF.

# **Study findings**

### **Demographic characteristics of FSWs**

Median age of FSWs is 36 in Tbilisi and 35.5 in Batumi. Most of the FSWs are older than 25 years of age in both survey locations with the greatest proportion for "40+" age group (36.9% in Tbilisi and 38.3% in Batumi).



#### Figure 1: FSWs distribution by age groups

The vast majority of respondents are ethnic Georgians (88.8% in Tbilisi and 92.5% in Batumi). However, survey found very limited number of FSWs (18 out of 160 in Tbilisi and 9 out of 120 in Batumi) representing different ethnic groups, e.g. Jewess, Kurd, Ossetian, Russian, Armenian etc.

The highest level of achieved education for majority of FSWs is secondary/vocational (81.9% in Tbilisi and 86.7% in Batumi). It is worth mentioning that survey found about 8-13% of FSWs who reported having higher education (13.1% in Tbilisi and 8.3% in Batumi).

At both survey sites less than 10% of interviewed FSWs are internally displaced.

More than three fourths of FSWs are from other cities of Georgia. Only 11.7% in Batumi and 23.1% in Tbilisi reported they work in the same area where they were born. At present all 100%

of FSWs live in the city where they work. Mean years the FSWs live in Tbilisi and Batumi is 18.5 and 9.6, respectively. In Batumi three times more FSWs reported having commercial sex activity in any other city compared to Tbilisi FSWs (13.8% in Tbilisi and 37.5% in Batumi).

It is noteworthy that in Tbilisi 10% (16) of interviewed FSWs reported their participation in all three previous surveys; 15.6% reported their participation in BSSs of 2004 and 2006 and 43.1% - only in 2006. As for Batumi, only 5.8% of respondents reported having participated in BSSs of 2004 and 2006 and 36.6% - in 2006.

#### Living Arrangements of FSWs

More than 60% of FSWs in both survey locations are divorced or live separately from their spouses. Survey found about 10% of FSWs who are married at present. Median age at marriage is 17 at both survey sites.

About one third of FSWs from Tbilisi and more than half – from Batumi are not married, but live with partners. Besides, 57.5% among Batumi FSWs and 33.3% among Tbilisi FSWs who are not married at present, live alone.

Three fourths of married FSWs in Tbilisi and half in Batumi said their spouses/ partners do not have other partners/lovers.

#### Drug and Alcohol Use

About one third of FSWS in Tbilisi and one fourth in Batumi reported not consuming alcohol at all. Proportion of those who consumes alcohol beverages every day is about 13% in both survey sites.

Number of FSWs who ever took pills does not exceed 1.7% (this figure is twice less in Tbilisi). In Batumi only 5 out of 120 (4.1%) interviewed FSWs reported having ever injected drugs, while none of respondents reported the same practice in Tbilisi. Besides, 10% in Tbilisi and 6.7% in Batumi have ever smoked marijuana and this behavior is prevailing in younger ones. None of the FSWs have ever used inhalants.

#### Aspects of Sex Work for FSWs

Median age at first sexual contact is 17 in both survey sites, while the median age when first received money in exchange for sex is significantly higher (28 for Tbilisi and 27 for Batumi FSWs). It is worth mentioning that for vast majority of FSWs in both survey locations commercial sex

represents the only source of income (88.1% in Tbilisi and 86.7% in Batumi). FSWs who reported having another source of income at the same time mainly work as waitresses, sellers, shop owners, cleaners, bar owners etc. Besides, the vast majority of FSWs (87.9% in Tbilisi and 90.8% in Batumi) has financial dependents mean number of which equals to 2.7.

#### Sexual Behavior of FSWs with different types of clients/partners

#### **Paying clients**

About three fourth of FSWs reported they had paying clients in the past seven days. This proportion is slightly greater among Batumi FSWs (79.2%). Mean number of clients per week is 5.6 in Tbilisi and 7.9 in Batumi. Mean number of clients during last business day does not exceed 2.

Mean amount of money (in local currency) FSWs received from their last paying client is 39.4 GEL (25\$) in Tbilisi, and much more - 56.97 GEL (34.5 \$) in Batumi.

The vast majority of FSWs in both survey sites reported condom use with the last client. The proportion of those who did not use condom is greater among Batumi CSWs (7.5% in Batumi vs. 1.3% in Tbilisi). In majority of cases FSWs use condom by their own initiative without being under pressure from their clients (79.3% in Batumi and 81.6% in Tbilisi). Only 14-18% of FSWs reported condom use by mutual initiative.

Among various reasons for not using condoms during last paid sex partner are absence of condom, partners' refusal, considering it as not necessary etc., however, it should be kept in mind that the survey found only 2 out of 160 in Tbilisi and 9 out of 120 in Batumi who reported having unprotected sex.

77.5% of Tbilisi FSWs and 80% of Batumi FSWs reported consistent condom use with their paying clients during last 30 days. About one fifth in Tbilisi and significantly less (12.5%) in Batumi mentioned they often used condoms during last 30 days. Survey found very limited number of FSWs (4 in Tbilisi and 9 in Batumi) who reported occasional or no use of condoms with their paid partners during last 30 days.

Figure 2: Consistent condom use with paying clients during last 30 days and condom use at the last sexual contact



Consistent condom use during the last month Condom use at the last contact

#### **Permanent clients**

Majority (80.6%) among Tbilisi FSWs reported having permanent client. This proportion is lower among Batumi respondents (66.7%), however mean number of permanent clients is greater for Batumi FSWs compared to Tbilisi FSWs(11.84 vs. 9.84).

Most of the interviewed FSWs (71.2% in Tbilisi and 85% in Batumi) had up to 5 sexual contacts with their permanent clients over the last 30 days. More than 10% said they had 5-10 sexual contacts with permanent clients during last 30 days in both survey locations.

More than 88% of FSWs in Batumi and about 95% in Tbilisi reported use of condom during their last sexual intercourse with permanent client. Subsequently, proportion of those who reported on the contrary is twice greater among Batumi FSWs compared to Tbilisi ones (11.3% vs. 5.3%). Condom use is mostly initiated by FSWs themselves (84% in Tbilisi and 81.7% in Batumi). However 15-19% of FSWs said the condom use was mutually initiated.

Most frequently mentioned reasons for not using condom during last sexual contact with permanent client were "not considering it necessary" (57% and 33.3% in Tbilisi and Batumi respectively) and "partner's refusal" (44.4% in Batumi).

72.5% out of Batumi and 84.1% out of Tbilisi FSWs said they always used condoms with their permanent clients over the last 12 months. Less than 10% reported occasional or no use of condoms with their permanent clients.





#### **Permanent Partners**

Only half (48.8%) of FSWs in Tbilisi and about 66% in Batumi have permanent (regular) partners (one on average in both survey sites). 5-8% of FSWs reported they did not have sexual intercourse with them during last 30 days. It is notable that very low percentages of FSWs in both survey sites reported using condom during the last intercourse with their regular partners, with slightly lower proportion in Batumi (12.8% in Tbilisi vs. 8.9% in Batumi). Similarly to other type of partners, use of condom is mainly initiated by respondents themselves. Majority of FSWs, who reported not using condoms, mentioned they even did not think about it being with their regular partners. Besides, "partners' refusal" (29.4% in Tbilisi and 5.6% in Batumi) and "considering condom use as not necessary" (14.7% in Tbilisi and 9.7% in Batumi) were mentioned as the main reasons for such behavior. Only 9% in Tbilisi and 7.6% in Batumi





■ Consistent condom use during the last 12 months ■ Condom use at the last contact

Figure 5 below summarizes FSWs' condom use behavior with different types of sex partners. Results suggest that significantly bigger proportion of FSWs have used condoms with paid and permanent clients. However, very few reported the same with their regular partners.





■ The last paid client ■ The last permanent client ■ The last regular partner

#### Access to Condoms for FSWs

More than 90% of FSWs from both survey sites reported they usually go to the drugstores to get condoms. Besides, more than half (59.1%) FSWs from Tbilisi and significantly higher proportion

from Batumi (80.8%) mentioned they are getting condoms from "Tanadgoma". For almost all respondents estimated time needed for getting condoms does not exceed 15 minutes with significantly higher proportion (Tbilisi – 62.5% and Batumi – 71.7%) of FSWs who reported buying/getting condoms in less than 5 minutes.

Three fourths of FSWs in Tbilisi and more than 90% in Batumi reported having the condoms with them or at a place of work (mean number of condoms was 5.2 in Tbilisi and 8.9 in Batumi).

#### Violence among FSWs during last year

The survey found small proportion (4.2%) of FSWs in Batumi who are victims of physical violence (beating, smothering, etc), however this rate about 3 times higher among Tbilisi FSWs (14.4%). In about half of the cases with physical violence the client was named as user of force. Significantly small number of FSWs in Tbilisi (2.5%) and 5% in Batumi reported being victims of sexual violence through blackmailing or threatening that is still associated with their clients. About 2% in Tbilisi and less than 1% in Batumi said they were forced for sexual intercourse/raped that was mainly done by strangers. Overall, survey found 15.6% of FSWs in Tbilisi and 8.3% in Batumi who experienced any kind of violence during last year.

#### STI Knowledge and Health Seeking Behavior among FSWs

Almost all FSWs from both survey sites are aware about sexually transmitted Infections, out of which big majority (about 70.9% in Tbilisi and 85.8% in Batumi) knows at least one symptom among women. A bit less FSWs at both survey sites know at least one STI symptom among men. More than 23% of interviewed respondents reported having STI symptom (vaginal release) during last 12 months and very few said they have vaginal ulcer/boil.

About half from those who had at least one symptom received treatment in state clinics or hospitals. In the second place for treatment options is application of self-treatment (36.8% in Tbilisi and 55.2% in Batumi). 17.2% in Batumi and 21.1% in Tbilisi mentioned drugstore as a place of getting doctor's advice or receiving the treatment. Survey results suggest that FSWs are using more than one treatment option at one occasion varying from 0 to 4 options.

Half of FSWs from Tbilisi said they either stopped sexual intercourse or used condoms during their symptomatic period and only 57.9% informed sexual partner about STI. As for Batumi, less than half stopped sexual contacts at all; only 17.2% used condoms during symptom manifestation period and only 37.9% of FSWs informed sex partner about existence of infection.

#### HIV/AIDS Knowledge and testing among FSWs

The vast majority of FSWs (93.8% in Tbilisi and 97.5% in Batumi) are aware of HIV/AIDS and very few (8% in Tbilisi and 4.3% in Batumi) personally know people infected, ill or died of AIDS.

Only 10% among Tbilisi FSWs and 5.1% in Batumi correctly answer 6 questions on the ways of HIV transmission. It has to be noted that more than three fourths of FSWs still don't have correct information on major misconceptions such as mosquito bites and meal-sharing. Also, about one fourth in both survey locations did not list correct condom use as a way of protecting from HIV/AIDS.

According to the UNGASS indicator on HIV/AIDS knowledge, which is based on 5 questions (some of them different from the above-mentioned 6 questions) on HIV transmission routes, only 8.1% in Tbilisi and 5.8% in Batumi gave correct answers. None of the younger (<25) FSWs in Tbilisi were able to answer these questions. These data are presented on the Figure 6 below.







Three fourths among Tbilisi FSWs (74%) and relatively bigger proportion (83.8%) among Batumi respondents believe that a healthy looking person can be infected with HIV. From the rest of FSWs, half does not know about this at all and another half thinks differently. Besides, 50% of FSWs from both Tbilisi and Batumi think that a person with first blood group cannot get STI/HIV.

The big majority of FSWs (88% in Tbilisi and 90.6% in Batumi) know that one of the ways for HIV/AIDS transmission is mother-to-child transmission during pregnancy and relatively less

proportion (63.3% in Tbilisi and 73.5% in Batumi) is aware that infected mother can transfer HIV/AIDS to her baby through breastfeeding.

It is notable that more than half of interviewed FSWs do not know any of the actions for reducing risk of MTCT. However, about one third in Tbilisi and 38.7% in Batumi mentioned taking ARVs as one of the actions for it.

The big majority of FSWs (84.4% in Tbilisi and almost all in Batumi) think condom use is one of the ways of protecting from STI/HIV. It is noteworthy that 11.4% in Tbilisi and significantly less in Batumi still do not know how to prevent themselves from getting STIs.

It is worth mentioning that more than 85% in Tbilisi and almost 95% in Batumi know where they can receive HIV testing in their community. 71.3% and 65.8% from interviewed FSWs from Tbilisi and Batumi respectively reported they had confidential HIV test, out of which half were tested during last 12 months.

Figure 7 below shows proportion of FSWs who received HIV test in the last 12 months and who know their result. In Tbilisi this percentage reaches 27.5%, in Batumi – 23.3%. The proportion is significantly higher in elder age group at both survey sites.





## Attitudes towards the HIV/AIDS infected persons

38.6% in Tbilisi and three fourths in Batumi reported they informed at least one person about the test result and among those with whom FSWs share this confidential information are colleague sex workers (51.3% and 30% in Tbilisi and Batumi respectively), friends (28.2% and 60% in Tbilisi and Batumi respectively), partners (20.5%% and 18%% in Tbilisi and Batumi respectively) etc.

It is notable that 35.3% in Tbilisi and 21.4% in Batumi said they would not tell anyone if they tested positive for HIV.

About one fourth of interviewed FSWs are not willing to have a meal with a person with HIV/AIDS and about half - would not take care of their infected relative man or women. It is notable that more than 60% of FSWs from both survey locations said they would keep in secret if their family member is HIV infected. The Figure 8 summarizes main attitudes towards HIV infected persons.





## Sources of information on STI/HIV

Almost all interviewed FSWs have received information on STI/AIDS at both survey sites. Among the sources for getting information about these issues are TV/Radio (67.7% and 83.3% in Tbilisi

and Batumi respectively), newspapers (20.3% and 28.3% in Tbilisi and Batumi respectively), and friends (26.6% and 25.8% in Tbilisi and Batumi respectively). It is notable that about half in Tbilisi and three fourths of FSWs in Batumi mentioned social workers as a source of information on STI/HIV, this means that this source of information is in the second place after TV/radio. However, survey findings suggest that FSWs are more watching TV rather than listening radio. 89.4% and 80.8% from Tbilisi and Batumi respectively reported they are watching TV everyday, while only 18.8% and 11.7% from Tbilisi and Batumi respectively said they are listening to radio with the same frequency.

#### **STI/HIV Prevalence among FSWs**

FSWs at both survey sites were tested for syphilis, gonorrhea and HIV.

The survey found alarmingly high rates of syphilis particularly among Tbilisi respondents. 45.5% of FSWs in Tbilisi and 35.8% in Batumi tested positive for this STI. However, the high prevalence of syphilis reflects lifetime syphilis among FSWs.

Significantly less proportion of FSWs showed positive result on Gonorrhea test (5.7% and 5.8% in Tbilisi and Batumi respectively).

Only 3 out of 154 (from those who agreed to take a test) were HIV positive in Tbilisi and only 1 out 119 appeared to be infected in Batumi. It should be noted that one of the 3 confirmed cases in Tbilisi was the same FSWs that was identified as HIV positive in 2004 and in 2006 BSSs. Still, 2 were the new cases.



#### Figure 9: HIV/Syphilis/Gonorrhea prevalence among FSWs from Tbilisi and Batumi

The survey found very limited number (1.3% and 2.5% in Tbilisi and Batumi respectively) of FSWs who tested positive for both STIs (Neisseria gonorrhea and Syphilis), however proportion with one of the mentioned STIs is significantly higher (48.3% and 36.7% in Tbilisi and Batumi respectively). About half in Tbilisi and 60.8% in Batumi tested negative for both STIs.

Figure 10: Proportion of FSWs with one, two or no STIs (syphilis and gonorrhea)



■ Percentage with no STI ■ Percentage with 1 STI ▲ Percentage with 2 STIs

#### Trafficking and Sex Work Abroad (Batumi)

Big majority (90%) of FSWs are aware of trafficking problem, however only 7.4% (8 out of 108) have ever experienced it. It is worth mentioning that one out of 8 FSWs who experienced trafficking abroad, experienced it twice and another one – 3-5 times. One third (33.3%) of FSWs from Batumi reported they have worked voluntarily abroad (mostly in Turkey). Primary motivation for working as sex workers abroad for vast majority of FSWs is earning money. All FSWs said they are not having any problems when crossing a boarder, however facing problems when working abroad (37.5% (15)). The problems mainly are associated with policemen (60%) and pimp from Georgia (33.3%) that is mainly related to deportation (53.3%), money extortion (40%), forcing non-stop sex work (33.3%) etc.

Despite having the problems while working abroad, more than half FSWs are still willing to go there to earn money. As for the type of place of sex work abroad, majority of FSWs reported hotels (47.5%), apartments (25%) and restaurants (17.5%).

It is important to note that 6 out of 40 FSWs who worked abroad, said they never used condoms with their clients. Another 14 said they used condoms only sometimes. Only 45% of FSWs reported consistent use of condoms abroad.

30% out of 40 CSWs reported alcohol consumption everyday or at least once a week while working abroad, however only few (7.5%) took drugs (smoked marijuana or swallowed ecstasy). Duration of staying abroad does not exceed 1 month for vast majority of FSWs. Half of FSWs had up to 5 clients per day during their last visit abroad and another half reported having more than 5 clients per day. Vast majority said the number of clients they serve per day abroad is more than they are having in their home country. Besides, the fee they are getting abroad is about two times greater abroad than in Georgia. 82.2% of FSWs mentioned they are protecting themselves from getting STIs abroad with condoms. Besides, 55.5% said they are receiving prophylactic injections for prevention purposes. However, only one fourth have access to HIV/STI testing abroad and the majority has used this service at least once.
# **Conclusions and Discussion**

The findings of the surveys could be briefly summarized in the conclusions below, which also include some comparison with previous BSSs conducted at the same survey sites:

#### Socio-demographic Characteristics:

FSWs in Tbilisi and Batumi have the following socio-demographic characteristics:

- Median age of FSWs is 36 in Tbilisi and 35.5 in Batumi; however, the majority of FSWs are older than 25 and represent the age group "40+";
- Majority of FSWs at both survey sites are Georgian;
- Majority of FSWs have received secondary/vocational education;
- As a rule, FSWs are from other places than their current place of work;
- More than half of FSWs are divorced or live separately from their spouses.

From 2002 the sex workers become more and more aged. In Tbilisi the median age was 26 in 2002, 30 in 2004 and 32.5 in 2006; in Batumi it was 33 in both 2004 and 2006. So this trend is kept in Tbilisi and has become prevalent also in Batumi. This could be due to the reason that younger women are rarely entering the lower layer of sex business as they are more attractive and get better paid places. Or they may choose not to become prostitutes.

In terms of education level of FSWs, in Tbilisi education levels had not changed during the last several years. As for Batumi, in previous BSS surveys none of FSWs had completed higher education and about one fifth had incomplete higher education. Now in Batumi 8.3%% have completed higher education. So, in Batumi percentage of FSWs with higher education has increased. This leads to the idea that more women with higher education are unable to find jobs and become sex workers.

Also, percentages of visitor FSWs have been increasing since 2002 both in Tbilisi and Batumi. It could be that more and more female residents of smaller cities and villages, who come to Batumi or Tbilisi for getting a job and are not able to find one, enter sex business.

#### **Background in Prostitution**

About 14% of Tbilisi survey participants reported having worked in sex business in another city than Tbilisi before. This situation has not changed much since 2002. However, progressively

more FSWs in Batumi have done commercial sex work in other locations. In 2004, 19% reported doing commercial sex work in locations other than Batumi increasing to 34% in 2006 and to 37.5% in 2008. Probably sex business is getting larger, reaching more cities that are developing and attracting possible clients of sex workers.

Median age of first sexual encounter in exchange for money is 28 for Tbilisi and 27 for Batumi. Mean years of working in sex business is 6.9 in Tbilisi and 6.4 in Batumi. This is also connected with the fact that more than 35% percentage of FSWs at both survey sites has participated in the last BSS surveys. The flow of sex workers, namely, the newcomers to this business are not very numerous.

So, FSWs have come from different cities/villages, where some of them have done sex work as well, their only income is sex business, and they have to support financially 2-3 family members. More than three fourths support their children; in Tbilisi about one third supports their parents; in Batumi those who support parents represent more than 40%.

#### Alcohol and Drug Use

FSWs both in Tbilisi and Batumi do not report high percentages of alcohol use, especially everyday use. As for drug use, extremely small percentages report having ever used injecting drugs. The most prevalent drug that FSWs, especially young ones, report using is marihuana. So, peculiarity of Georgian sex business, in comparison to other post-soviet countries, is that sex work is not connected with drug use.

#### Sexual Risk Behavior

#### **Paying Clients**

Majority of FSWs have had clients during the last week, mean number of clients is slightly bigger for Batumi. Mean number of clients during the last business day does not exceed 2. Mean amount of money received from the last client has increased compared to 2006.

The vast majority of FSWs reported condom use with the last client and consistent condom use with the clients during the last 30 days. In most of the cases condom use with the last client is initiated by FSWs. High percentages of condom use with the last client have been a subject for discussions for years. Researchers thought that these data are high due to so-called "social desirability bias". But stable percentages of the surveys throughout 7 years (4 BSSs in Tbilisi, 3 – in Batumi) suggest that these data reflect the real situation. At the same time, prevalence of STIs

demonstrates that FSWs are infected and re-infected from other sources – mostly permanent partners (see below "Permanent Partners").

#### Permanent Clients

Majority of FSWs in Tbilisi and more than half – in Batumi reported having permanent clients. Mean numbers of permanent clients have increased for both survey locations. Contacts with permanent clients are quite stable – majority report up to 5 sexual intercourses with permanent clients during the last 30 days.

The vast majority of FSWs report use of condom during their last sexual intercourse with permanent client. Use of condom is mostly initiated by FSWs themselves. These percentages (condom use and condom use initiation by FSWs) have increased since 2006. It should be noted that in the previous surveys percentage of FSWs reporting condom use by mutual initiative of FSWs and a client were smaller than in 2009. These data suggest that FSWs take more responsibility for safe sex with permanent clients.

As for the consistent condom use with permanent clients over the last 12 months, these percentages have significantly increased in Batumi and stayed the same in Tbilisi.

#### **Permanent Partners**

Only half of FSWs in Tbilisi and about two thirds in Batumi have permanent partners; median number of regular partners is 1. Very low percentages of FSWs at both survey sites reported using condom during the last intercourse with their regular partners, with slightly lower proportion in Batumi. It should be noted, that in Tbilisi percentage of FSWs reporting condom use at last intercourse with regular partner has increased since 2006, and in Batumi – on the contrary, decreased. Use of condoms is mainly initiated by respondents themselves. Majority of FSWs, who reported not using condoms, mentioned they even did not think about it being with their regular partners. In 2006 the leading cause for not using a condom was trust to the regular partner. It could be concluded that the response "did not think about it" still reflects the same factor of trust.

As for consistent condom use with permanent partners, very small percentages of the respondents reported doing so.

The Figure 11 below represents one of the major indicators for FSWs risky sexual behavior – condom use during the last sexual intercourse with different kinds of partners throughout all

BSS survey at both survey locations. So, it is obvious that the trends of condom use at the last intercourse have stayed high for both clients and regular clients and low – for permanent partners. There was a slight increase in condom use with the permanent client in Tbilisi, which proved to be statistically significant. At the same time, decrease in condom use with the permanent partner in Tbilisi is not statistically significant. As for Batumi, both changes that were identified with permanent clients (increase) and with permanent partners (decrease) are statistically significant.



Figure 11: Condom use during last sexual intercourse with different partners

#### Condoms

Condoms are quite accessible for FSWs, they can get or buy them in no more than 15 minutes. As a first place for getting condoms respondents name pharmacies. Tanadgoma is in the second place, followed by FSWs' co-workers.

## Violence

In general, the survey found that percentages of FSWs who reported being victims of three kinds of violence, have decreased at both locations.

#### STI Knowledge and Health Seeking Behavior

Almost all FSWs from both survey sites are aware about sexually transmitted Infections, out of which big majority knows at least one symptom among women. A bit less FSWs at both survey sites know at least one STI symptom among men. This shows a positive trend, as far as in previous years knowledge of these issues was lower. Number of FSWs who report having some STI symptom during the last year, has also decreased. STIs prevalence, especially of gonorrhea, coincides with these data. Possible reason for this could be high rates of condoms use both with paying and permanent clients.

FSWs tend to refer to state clinics or hospitals in case of STI symptom manifestation. It is noteworthy that data of behavior patterns when having STI symptoms demonstrate increased rates of applying self-treatment, compared to 2006.

Figure 12 below shows that there have been some changes in terms of both major indicators of STI knowledge and practices. In Tbilisi, as well as in Batumi, significant increase in STI knowledge has occurred. As for application of self-treatment, in Tbilisi there was some improvement, but in the last survey percentage of FSWs referring to self-treatment has increased again. Also, in Batumi there was some increase in self-treatment. However, self-treatment data are statistically significant only for Tbilisi. One of the reasons for this trend could be that Tanadgoma made focused campaign on self-treatment and its' disadvantages in 2004 – 2006, but after these special efforts were stopped, the percentages increased again.

Figure 12: STI knowledge and practice



#### HIV Knowledge, attitudes and practices

The vast majority of FSWs are aware of HIV/AIDS. It is interesting that still there are several FSWs at both survey sites (10 in Tbilisi, 3 in Batumi) that are not aware of HIV/AIDS. Also, very small percentages of FSWs could correctly answer 6 questions on ways of HIV transmission (10% in Tbilisi, 5.1% - in Batumi). This indicator has increased for Tbilisi (1.9% in 2006), which might be reflecting some effectiveness of prevention programs, public awareness campaigns, media etc. At the same time, knowledge of Batumi sex workers has really decreased (27.5% in 2006). Both in Tbilisi and in Batumi changes of knowledge indicator proved to be statistically significant (See Figure 13 below). Some additional research could be initiated in order to find out possible reasons for this decrease.

There are quite a lot of FSWs that still believe that a person with first blood group cannot get infected with STI/HIV. The big majority of FSWs name condom use as one of the ways of protecting from STI/HIV. Quite high is FSWs' awareness on MTCT, but more than half of interviewed FSWs do not know any of the actions for reducing risk of MTCT.

Another issue questioned was attitude of respondents towards HIV infected people. According to the findings, FSWs in Tbilisi express sympathy towards HIV positives, but stigma is still quite

strong. As for Batumi respondents, stigma among them is a bit less compared to Tbilisi. Such stigma is probably connected with the low levels of knowledge.

Figure 13: Key HIV/AIDS knowledge (all items correct: a) needle/syringe sharing abstinence (yes); b) abstinence (yes); c) correct condom use (yes); d) one faithful partner (yes); e) mosquito bites (no); f) meal sharing (no))



#### VCT

Majority of FSWs know where they can receive HIV testing in their community. 27.5% (Tbilisi) and 23.3% (Batumi) have been tested during the last year and received their results. Comparing to 2006, when these percentages were 36.3 for Tbilisi and 27.5 for Batumi, it is clear that FSWs have reduced referrals to VCT services for testing and then for the results. However, percentage of sex workers ever tested for HIV is high and has increased compared to the previous surveys. Given high percentage of condom use sex workers might not consider annual HIV testing necessary.



#### Figure 14: Voluntary HIV testing

#### Sources of information on STI/HIV

As it was in the previous surveys, the most popular source of information on STI/HIV is TV/Radio, followed by social workers, newspapers and friends.

#### Trafficking and Sex work Abroad (Batumi)

The majority of respondents are aware of trafficking. Only 7.4% have ever experienced it, some of them – several times.

Going for sex work abroad has become more popular among Batumi sex workers. One third of FSWs reported they have worked as sex workers voluntary abroad (mostly in Turkey). This percentage has increased compared to 2006, when 25% reported the same. Primary motivation for working as sex workers abroad for vast majority of FSWs is earning money. Main problems that FSWs encounter are problems while working abroad, such as deportation, money extortion, etc. Despite having the problems while working abroad, more than half of FSWs are still willing to go there to earn money.

About half of respondents mentioned using condoms while working abroad. Here the situation did not change much, condom use percentages had been always lower abroad, than in Georgia. This, along with the higher number of clients, creates additional risks for the spread of STIs. As

for other contributing factors, alcohol and drug use is quite low. However, about half of FSWs practice so-called "prophylactic" injections. They believe this can protect them from getting STIs. This data were higher in 2006, but about 50% do still report this practice.

#### Biomarker

FSWs at both survey sites were tested for syphilis, gonorrhea and HIV. The survey found alarmingly high rates of syphilis particularly among Tbilisi respondents. It is interesting that in the previous BSSs rates of syphilis were also high. Data suggest that in Batumi prevalence stayed the same and in Tbilisi it increased and reached almost the rate of 2004. Possible reasons for this could be non-proper treatment and/or re-infection. However, these data reflect prevalence of lifetime syphilis.

Very small proportion of FSWs showed positive result on Gonorrhea test. Rate of this infection has decreased almost two times since BSS of 2006.

The survey found only 3 HIV positive cases in Tbilisi and only 1 – in Batumi. It should be noted that one of the 3 confirmed cases in Tbilisi was the same FSWs that was identified as HIV positive in 2004 and in 2006 BSSs. Trends of HIV prevalence among FSWs during the last 7 years are presented on the Figure 15 below. It should be noted that increase of HIV prevalence found in the surveys is not statistically significant.

Alarming is mostly prevalence of syphilis. But in general, there is quite high proportion of those who tested negative for both and who tested positive for both STIs. One possible reason for this, as well as for low gonorrhea rates, is reported high condom use with clients and permanent clients. Percentages of FSWs infected with no STI, 1 STI and more than 1 STI throughout all BSSs are shown on the Figure 16. There has been increase of FSWs with no STI and decrease of FSWs with 1 or more STIs at both survey sites. This, again, might be due to increased condom use.

One of the problems identified during the survey was low referral rates for the test results. In general, FSWs are not caring about their health and even if the tests are provided for free, they don't show motivation to get their results.

Figure 15: HIV prevalence



Figure 16: Biomarker results (tested positive for different number of STIs)



# Recommendations

- FSWs in these studies had low rates of use of condoms with regular partners; high levels
  of syphilis; low levels of knowledge on HIV transmission/prevention; and ineffective and
  harmful health seeking practice (self-treatment). Prevention interventions must address
  all these potential high-risk behaviors. New, tailored strategic approaches of work with
  FSWs should be implemented in order to address specific gaps in their knowledge,
  attitudes and practices.
- Behavior change communication interventions should be targeted at FSWs and their sexual partners - regular partners, clients, and permanent clients - because the responsibility for condom use should not rest solely on the FSW. Involving FSWs in the development of relevant messages and the dissemination of these messages within their networks will increase effectiveness.
- Health services with a specialization for dealing with sex workers and their clients should be upgraded and promoted. In addition to providing diagnosis and treatment for STIs, these services should provide prevention counseling, HIV counseling and testing, and other sexual health services that are needed by FSWs. These services should be expanded to include regular partners of sex workers as a way to access this group.
- Since television, social workers and newspapers were cited as the main sources of STI/HIV/AIDS information by FSWs, prevention and educational messages should be disseminated primarily through these channels. Television information campaigns should address educational issues that are appropriate for the general population. In addition, specific and more explicit HIV prevention messages and materials for FSWs, their clients and regular partners should be provided at the interpersonal level through outreach workers and peer educators rather than through mass media outlets. The interventions should target the gaps in knowledge and attitudes revealed through the surveys.
- Efforts should be made to expand prevention services to other sex worker groups, such as high-rate facility-based and cell phone-based sex workers. This may involve working with "gatekeepers" for access.

- Voluntary HIV testing, with adequate pre- and post-test counseling, should continue and expand. Piloting of rapid HIV testing through mobile laboratories has proved effective and acceptable for the FSWs and their clients. Bringing STI/HIV testing services to the commercial sex settings should expand in order to offer testing possibilities to more beneficiaries of prevention programs. VCT services should be made available through sites that provide other HIV prevention and health services to FSWs.
- Interventions for FSWs must be extended beyond Tbilisi, Batumi and Kutaisi. High-risk sites should be identified and prevention interventions begin. Typical sites include urban areas, ports and commercial transit areas, cross-border areas, and military sites where large numbers of workers without their families reside.
- About 1 of every 3 FSW in Batumi reported traveling abroad for sex work and a low percentage (45%) of them reported always using a condom. Even more disturbing is that 55% of the FSWs that traveled abroad for sex work reported getting an injection that they were told prevented STIs and HIV. Educational work in this direction should continue. Specially designed IEC materials need to be developed for FSWs about working abroad and the ineffectiveness of injections to prevent STIs and HIV.
- Non-coercive, anonymous, ethical and systematic surveillance of FSWs (and other high risk groups), both behavioral and of selected biological markers, should be conducted throughout Georgia and repeated on a regular basis to provide early warning of a possible dramatic increase in the prevalence rate. In addition, surveys can provide invaluable information for designing focused interventions as well as for monitoring whether STI/HIV prevention and reduction interventions are working.

# Annex 1: Data tables

## Table 3: Area Coverage of the Tbilisi, Batumi Georgia Behavioral Surveillance surveys

Characteristics	Tbilisi	Batumi
Year	2009	2008
Date of interviews	23 – 27 March	11 – 16 December
Location of interview		
At organizations office	100% (160)	100% (120)
At Saunas		
Recruitment		
Recruitment of FSWs in sections of Tbilisi identified through mapping	58%(93)	90.8%(109)
Participation rate		
Total contacted	61% (99)	188
Total refused	3,75% (6)	79
Total agree	58%(93)	109
Total completed	100% (160)	120
Participation in previous BSS		
2002	12.5%(20/160)	(Was not conducted)
2004	17.5%(28/160)	7.5%(9/120)
2006	43.1%(69/160)	36.7%(44/120)
All previous BSS	10.0%(16/160)	5.8%(7/120)

# Table 4: Reasons reported by FSWs for refusal to participate in the survey

Reason for refusal	Tbilisi	Batumi
Reason for refusal	Number of refusals	Number of refusals
Not interested		
Had a medical check-up and is currently healthy		
Is receiving treatment for some STI		
Afraid of needle/syringe to give blood	1	2
Was tested recently		2
Was busy	2	4
Has own doctor		
Waiting for the client	2	42
Was in a hurry	1	29
Didn't want to go alone with recruiters		
She was drunk		
Visits the Healthy Cabinet regularly		

Table 5: Demographic	<b>Characteristics of FSWs</b>
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Characteristics	Tbilisi (160)	Batumi (120)
Age	(100)	(120)
Mean age (years)	36.46	35.89
Median age (years)	36.00	35.50
Age Groups		
< 19 yrs	1.9% (3)	1.7% (2)
19-24 yrs	5.0% (8)	9.2% (11)
25-30 yrs	21.3% (34)	20.8% (25)
31-39 yrs	35.0% (56)	30.0% (36)
40+ yrs	36.9% (59)	38.3% (46)
Ethnicity		
Georgian	88.8% (142)	92.5% (111)
Jewess	3.1% (5)	
Kurd	1.9% (3)	0.8% (1)
Ossetian	1.9% (3)	2.5% (3)
Russian	1.3% (2)	
Armenian	1.3% (2)	1.7% (2)
Azeri	1.3% (2)	
Greek	0.6% (1)	
Ukrainian		
Uzbek		0.8% (1)
Kyrgyz		1.7% (2)
Level of Education		1.770 (2)
None	0.6% (1)	0.8% (1)
Primary	1.3% (2)	3.3% (4)
Secondary/vocational	81.9% (131)	86.7% (104)
Incomplete Higher	3.1% (5)	0.8% (1)
Higher	13.1% (21)	8.3% (10)
Mean years of education	11.20	10.71
Internally Displaced Person	11.20	10.71
Yes	6.9% (11)	9.2% (11)
Place of Birth	0.570 (11)	5.270 (11)
Tbilisi (Batumi)	23.1% (37)	11.7% (14)
Another city in Georgia	75.0% (120)	83.3% (100)
Other country	1.2% (2)	2.5% (3)
Ukraine	0.6% (1)	
Azerbaijan	0.6% (1)	
Uzbekistan	0.076 (1)	0.8% (1)
Kyrgyzstan	0.6% (1)	1.7% (2) 2.5%(3)
No response	0.0% (1)	2.3%(3)
Present living place	Mean = 18.5	Mean = 9.6
Years lived there	Median =15.0	Median = 5.0
	Range (0-59)	Range (0-52)
Commercial sex activity in another city	13.8% (22)	37.5% (45)

# Table 6: Living Arrangements for FSWs

	Tot	Total		Age groups											
	101	ai	<1	.9	19	-24	25	-30	31-	-39	4	0+			
Characteristics	т	В	Т	В	Т	В	т	В	Т	В	Т	В			
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)			
Marital Status	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)			
Married	9.4%(15)	10.8%(13)	0	0	12.5%(1)	0	11.8%(4)	4.0%(1)	8.9%(5)	11.1%(4)	8.5%(5)	17.4%(8)			
Divorced/separated	70.6%(113)	60.8%(73)	33.3%(1)	50.0%(1)	62.5%(5)	63.6%(7)	79.4%(27)	72.0%(18)	78.6%(44)	69.4%(25)	61.0%(36)	47.8%(22)			
Widower	15.0%(24)	15.8%(19)	0	0	12.5%(1)	0	2.9%(1)	0	7.1%(4)	8.3%(3)	30.5%(18)	34.8%(16)			
Never Married	5.0%(8)	12.5%(15)	66.7%(2)	50.0%(1)	12.5%(1)	36.4%(4)	5.9%(2)	24.0%(6)	5.4%(3)	11.1%(4)	0	0			
Age at marriage (yrs)	(152)	(105)	(1)	(1)	(7)	(7)	(32)	(19)	(53)	(32)	(59)	(46)			
Mean	17.59	17.05	16.00	14.00	17.43	15.57	16.06	16.16	17.62	16.44	18.47	18.13			
Median	17.00	17.00	16.00	14.00	17.00	15.00	16.00	15.00	17.00	16.00	18.00	18.00			
No response	(2/152)		0		0		0		(1)		(1)				
Min-Max	(12 – 32)	(13 – 31)													
With Whom Do You Live Now?	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)			
Married, living with husband	5.6%(9)	5.0%(6)													
Married, living with partner	0.6%(1)	1.7%(2)													
Married, not living with husband /partner	2.5% (4)	3.3%(4)													
Married, has both husband and partner	0.6%(1)	0.8%(1)													
Not married, living with partner	33.1%(53)	55.8%(67)													
Not married, living alone	57.5%(92)	33.3%(40)													
Does your spouse have other partner/lover	(68)	(80)	(2)	(2)	(4)	(8)	(21)	(18)	(24)	(25)	(17)	(27)			
Yes	17.6%(12)	37.5%(30)													
No	73.5%(50)	50.0%(40)													
Don't know	8.8%(6)	12.5%(10)													
Refused to answer															

# Table 7: Drug and Alcohol Use by FSWs

	Tot	al					Ag	e groups				
	100	Total		<19		-24	25	-30	31-	.39	4	0+
Drug & Alcohol Use	Т	В	Т	В	Т	В	т	В	т	В	т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Consumption of alcohol	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Every day	13.1%(21)	13.3%(16)	0	0	12.5%(1)	18.2%(2)	5.9%(2)	20.0%(5)	16.1%(9)	16.7%(6)	15.3%(9)	6.5%(3)
At least, once a week	20.6% (33)	23.3%(28)	33.3%(1)	50.0%(1)	12.5%(1)	18.2%(2)	23.5%(8)	16.0%(4)	19.6%(11)	33.3%(12)	20.3%(12)	19.6%(9)
At least, once in 2 weeks	6.3%(10)	11.7%(14)	0	50.0%(1)	12.5%(1)	9.1%(1)	5.9%(2)	8.0%(2)	5.4%(3)	11.1%(4)	6.8%(4)	13.0%(6)
Once a month	25.0%(40)	23.3%(28)	33.3%(1)	0	25.0%(2)	9.1%(1)	38.2%(13)	44.0%(11)	16.1%(9)	13.9%(5)	25.4%(15)	23.9%(11)
I did not drink	34.4%(55)	28.3%(34)	33.3%(1)	0	37.5%(3)	45.5%(5)	23.5%(8)	12.0%(3)	42.9%(24)	25.0%(9)	32.2%(19)	37.0%(17)
Don't know	0.6%(1)		0		0		2.9%(1)		0		0	
Ever took pills	0.6%(1)	1.7%(2)	0	0	0	0	0	8.0%(2)	1.8%(1)	0	0	0
Ever used inhalants	0	0	0	0	0	0	0	0	0	0	0	0
Ever injected drugs	0	4.1%(5)	0	0	0	9.1%(1)	0	8.0%(2)	0	2.8%(1)	0	2.2%(1)
Ever smoke marijuana	10.0%(16)	6.7%(8)	66.7%(2)	100.0%(2)	0	0	14.7%(5)	20.0%(5)	10.7%(6)	2.8%(1)	5.1%(3)	0

# Table 8: Aspects of Sex Work for FSWs

	<b>T</b> -	4-1					Age	groups				
	10	tal	<	19	19	-24	25	-30	31	L-39	4	0+
Sexual Behavior	Т	В	Т	В	Т	В	Т	В	Т	В	Т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Age at 1 <sup>st</sup> sexual contact	(159)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(58)	(46)
Mean	17.30	17.06	13.67	14.50	17.25	15.27	16.06	16.28	17.11	16.92	18.40	18.13
Median	17.00	17.00	13.00	14.50	17.00	15.00	16.00	15.00	17.00	16.00	17.00	18.00
Don't know	0.6%(1)										1.7%(1)	
Age when 1st received money in exchange for sex	(156)	(119)	(3)	(2)	(8)	(11)	(33)	(25)	(53)	(36)	(59)	(45)
Mean	29.56	29.34	16.33	17.00	20.88	18.82	22.70	22.96	27.83	27.97	36.81	37.11
Median	28.00	27.00	16.00	17.00	21.50	19.00	23.00	23.00	28.00	27.00	37.00	39.00
No response	1.9%(3)	0.8%(1)					2.9%(1)		3.6%(2)			2.2%(1)
Don't know	0.6%(1)								1.8%(1)			
Years working as sex worker	(156)	(119)	(3)	(2)	(8)	(11)	(33)	(25)	(53)	(36)	(59)	(45)
Mean	6.99	6.43	1.33	1.00	1.88	3.36	4.76	4.60	7.38	6.69	8.86	8.22
Have another source of income	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
No	88.1%(141)	86.7%(104)	100.0%(3)	100.0%(2)	87.5%(7)	90.9%(10)	94.1%(32)	92.0%(23)	96.4%(54)	91.7%(33)	76.3%(45)	78.3%(36)
Yes	11.9%(19)	13.3%(16)	0	0	12.5%(1)	9.1%(1)	5.9%(2)	8.0%(2)	3.6%(2)	8.3%(3)	23.7%(14)	21.7%(10)
If yes, what?	(19)	(16)			(1)	(1)	(2)	(2)	(2)	(3)	(14)	(10)
Waitress		12.5%(2)				0		50.0%(1)		0		10.0%(1)
Hotel owner		6.3%(1)				0		0		33.3%(1)		0
Seller	31.6%(6)	31.3%(5)			0	0	0	0	0	0	42.9%(6)	50.0%(5)
Shop owner	10.5%(2)	6.3%(1)			0	0	0	0	0	33.3%(1)	14.3%(2)	0
Cleaner	15.8%(3)	6.3%(1)			0	0	0	0	50.0%(1)	0	14.3%(2)	10.0%(1)
Bar-woman		6.3%(1)				0		0		0		10.0%(1)
Bar owner		18.8%(3)				0		0		33.3%(1)		20.0%(2)
Interpreter	5.3%(1)	6.3%(1)			0	100.0%(1)	0	0	0	0	7.1%(1)	0
Husband's earnings	5.3%(1)				0		50.0%(1)		0		0	
Pastry baker	5.3%(1)				100.0%(1)		0		0		0	
Fortune-teller	5.3%(1)				0		0		50.0%(1)		0	
Car washer	5.3%(1)				0		50.0%(1)		0		0	
Children's earnings	5.3%(1)				0		0		0		7.1%(1)	
Real estate purchase/sale	5.3%(1)				0		0		0		7.1%(1)	
Cosmetologist	5.3%(1)				0		0		0		7.1%(1)	
No response		6.3%(1)				0		50.0%(1)		0		0
Do you have financial dependents (dependents)	(157)	(120)	(3)	(2)	(7)	(11)	(33)	(25)	(56)	(36)	(58)	(46)
Yes	87.9%(138)	90.8%(109)	66.7%(2)	50.0%(1)	100.0%(7)	90.9%(10)	84.8%(28)	96.0%(24)	89.3%(50)	94.4%(34)	87.9%(51)	87.0%(40)
No	12.1%(19)	9.2%(11)	33.3%(1)	50.0%(1)	0	9.1%(1)	15.2%(5)	4.0%(1)	10.7%(6)	5.6%(2)	12.1%(7)	13.0%(6)
If yes, how many?	(138)	(109)	(2)	(1)	(7)	(10)	(28)	(24)	(50)	(34)	(51)	(40)
Mean	2.64	2.67	1.00	3.00	2.14	1.90	2.25	2.42	2.68	2.91	2.94	2.80

#### Table 9: Sexual Behavior of FSWs with Clients

	То	tal					Age gr	oups				
	10	ldi	<:	19	19	9-24	25-	30	31	-39	40	+
Behavior with Clients	т	В	Т	В	Т	В	т	В	Т	В	т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Did you have paying clients in the past 7 days?	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Yes	74.4%(119)	79.2%(95)	66.7%(2)	100.0%(2)	87.5%(7)	90.9%(10)	79.4%(27)	88.0%(22)	73.2%(41)	75.0%(27)	71.2%(42)	73.9%(34)
No	24.4%(39)	20.8%(25)	33.3%(1)	0	12.5%(1)	9.1%(1)	20.6%(7)	12.0%(3)	25.0%(14)	25.0%(9)	27.1%(16)	26.1%(12)
Don't know	1.3%(2)		0		0		0		1.8%(1)		1.7%(1)	
If yes, how many?	(119)	(95)	(2)	(2)	(7)	(10)	(27)	(22)	(41)	(27)	(42)	(34)
Mean	5.55	7.86	9.00	5.50	4.00	16.60	5.74	8.45	5.63	5.52	5.43	6.91
Median	4.00	4.00	9.00	5.50	4.00	13.50	4.00	5.50	4.00	4.00	2.50	3.00
Number of clients during your last business day	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	( 59)	(46)
Mean	1.74	2.06	1.67	1.50	1.88	2.45	1.68	2.52	1.86	1.64	1.64	2.07
Median	1.00	1.50	2.00	1.50	1.50	2.00	1.00	2.00	2.00	1.00	1.00	1.00
How much last client paid?	(159)	(119)	(3)	(2)	(8)	(10)	(34)	(25)	(56)	(36)	(58)	(46)
Mean (in Lari)	39.40	56.97	45.00	90.00	35.00	64.00	48.82	61.80	38.73	68.06	34.83	42.72
Median (in Lari)	40.00	50.00	45.00	90.00	32.50	60.00	40.00	50.00	40.00	50.00	30.00	37.50
No response	0.6%(1)										1.7%(1)	
Condom use with the last client	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Yes	98.8%(158)	92.5%(111)	100.0%(3)	100.0%(2)	100.0%(8)	100.0%(11)	100.0%(34)	92.0%(23)	96.4%(54)	97.2%(35)	100.0%(59)	87.0%(40)
No	1.3%(2)	7.5%(9)	0	0	0	0	0	8.0%(2)	3.6%(2)	2.8%(1)	0	13.0%(6)
Who offered the use of condom	(158)	(111)	(3)	(2)	(8)	(11)	(34)	(23)	(54)	(35)	(59)	(40)
My initiative	81.6%(129)	79.3%(88)	66.7%(2)	50.0%(1)	50.0%(4)	81.8%(9)	85.3%(29)	82.6%(19)	79.6%(43)	77.1%(27)	86.4%(51)	80.0%(32)
Client's initiative	3.8% (6)	2.7%(3)	33.3%(1)	0	12.5%(1)	9.1%(1)	2.9%(1)	4.3%(1)	1.9%(1)	0	3.4%(2)	2.5%(1)
Mutual initiative	14.6%(23)	18.0%(200)	0	50.0%(1)	37.5%(3)	9.1%(1)	11.8%(4)	13.0%(3)	18.5%(10)	22.9%(8)	10.2%(6)	17.5%(7)
Reasons for not using condoms during the last paid sexual contact	(2)	(9)	(0)	(0)	(0)	(0)	(0)	(2)	(2)	(1)	(0)	(6)
Didn't have	33.3%	0	0	0	0	0	0	0	33.3%	0	0	0
Too expensive	0	0	0	0	0	0	0	0	0	0	0	0
Partner refused	0	30.0%	0	0	0	0	0	0	0	0	0	50.0%
Don't like it	33.3%	10.0%	0	0	0	0	0	0	33.3%	0	0	16.7%
Take contraceptives	0	0	0	0	0	0	0	0	0	0	0	0
Didn't think it was needed (he looked healthy, trust)	33.3%	50.0%	0	0	0	0	0	66.7%	33.3%	100.0%	0	33.3%
Didn't think of it	0	10.0%	0	0	0	0	0	33.3%	0	0	0	0
Condom use with paying	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)

	То	tal	Age groups											
Behavior with Clients	Total		<19		19-24		25-30		31-39		40+			
Benavior with Clients	Т	В	Т	В	Т	В	Т	В	Т	В	Т	В		
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)		
clients during the last 30 days														
Always	77.5%(124)	80.0%(96)	33.3%(1)	50.0%(1)	75.0%(6)	100.0%(11)	76.5%(26)	88.0%(22)	82.1%(46)	80.6%(29)	76.3%(45)	71.7%(33)		
Often	20.0%(32)	12.5%(15)	66.7%(2)	50.0%(1)	12.5%(1)	0	23.5%(8)	12.0%(3)	16.1%(9)	16.7%(6)	20.3%(12)	10.9%(5)		
Sometimes	2.5%(4)	5.8%(7)	0	0	12.5%(1)	0	0	0	1.8%(1)	2.8%(1)	3.4%(2)	13.0%(6)		
Never		1.7%(2)		0		0		0		0		4.3%(2)		

#### Table 10: Sexual Behavior of FSWs with Permanent Clients

	Ta	Total					Age gr	oups				
Behavior with Permanent	10	tal	<:	19	19	)-24	25-	30	31	-39	40	+
Clients	Т	В	Т	В	т	В	Т	В	Т	В	Т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Has permanent client	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Yes	80.6%(129)	66.7%(80)	66.7%(2)	50.0%(1)	37.5%(3)	63.6%(7)	82.4%(28)	64.0%(16)	76.8%(43)	75.0%(27)	89.8%(53)	63.0%(29)
No	16.9%(27)	33.3%(40)	33.3%(1)	50.0%(1)	50.0%(4)	36.4%(4)	14.7%(5)	36.0%(9)	21.4%(12)	25.0%(9)	8.5%(5)	37.0%(17)
Don't know	1.9%(3)		0		0		2.9%(1)		1.8%(1)		1.7%(1)	
No response	0.6%(1)		0		12.5%(1)		0		0		0	
If yes, number of permanent clients (Mean)	9.84	11.84	5.00	1.00	7.00	21.14	9.11	18.56	9.58	9.48	10.77	8.45
Number of sexual contacts with permanent clients over the last 30 days	(132)	(80)	(2)	(1)	(3)	(7)	(29)	(16)	(44)	(27)	(54)	(29)
Didn't have sexual interc.	6.8%(9)		0		0		3.4%(1)		13.6%(6)		3.7%(2)	
Up to 5 times	71.2%(94)	85.0%(68)	100.0%(2)	100.0%(1)	33.3%(1)	85.7%(6)	65.5%(19)	87.5%(14)	63.6%(28)	81.5%(22)	81.5%(44)	86.2%(25)
5 – 10 times	14.4%(19)	12.5%(10)	0	0	66.7%(2)		13.8%(4)	12.5%(2)	18.2%(8)	14.8%(4)	9.3%(5)	13.8%(4)
10 – 15 times	3.0%(4)	1.3%(1)	0	0	0	14.3%(1)	3.4%(1)	0	4.5%(2)	0	1.9%(1)	0
More than 15	2.3%(3)		0		0		3.4%(1)		0		3.7%(2)	
Don't know/ Don't rememb.	1.5%(2)	1.3%(1)	0	0	0		6.9%(2)	0	0	3.7%(1)	0	0
No response	0.8%(1)		0		0		3.4%(1)		0		0	
The last client was a permanent client	(132)	(80)	(2)	(1)	(3)	(7)	(29)	(16)	(44)	(27)	(54)	(29)
Yes	47.0%(62)	41.3%(33)	50.0%(1)	0	33.3%(1)	14.3%(1)	44.8%(13)	12.5%(2)	47.7%(21)	37.0%(10)	48.1%(26)	69.0%(20)
No	53.0%(70)	58.8%(47)	50.0%(1)	100.0%(1)	66.7%(2)	85.7%(6)	55.2%(16)	87.5%(14)	52.3%(23)	63.0%(17)	51.9%(28)	31.0%(9)
Condom use during the last sexual contacts with permanent client	(132)	(80)	(2)	(1)	(3)	(7)	(29)	(16)	(44)	(27)	(54)	(29)
Yes	94.7%(125)	88.8%(71)	100.0%(2)	100.0%(1)	100.0%(3)	100.0%(7)	100.0%(29)	87.5%(14)	97.7%(43)	92.6%(25)	88.9%(48)	82.8%(24)
No	5.3%(7)	11.3%(9)	0	0	0	0	0	12.5%(2)	2.3%(1)	7.4%(2)	11.1%(6)	17.2%(5)
Who offered to use a condom	(125)	(71)	(2)	(1)	(3)	(7)	(29)	(14)	(43)	(25)	(48)	(24)

	Total		Age groups										
Behavior with Permanent	10	tai	<:	19	19	9-24	25-	30	31	-39	40	)+	
Clients	Т	В	Т	В	Т	В	Т	В	Т	В	Т	В	
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)	
My initiative	84.0%(105)	81.7%(58)	100.0%(2)	0	66.7%(2)	100.0%(7)	86.2%(25)	92.9%(13)	74.4%(32)	80.0%(20)	91.7%(44)	75.0%(18)	
Client's initiative	0.8%(1)		0		0		3.4%(1)		0		0		
Mutual initiative	15.2%(19)	18.3%(13)	0	100.0%(1)	33.3%(1)	0	10.3%(3)	7.1%(1)	25.6%(11)	20.0%(5)	8.3%(4)	25.0%(6)	
Reasons for not using condoms during the last permanent paid sexual contact	(7)	(9)	(0)	(0)	(0)	(0)	(0)	(2)	(1)	(2)	(6)	(5)	
Didn't have	14.3% (1)	0	0	0	0	0	0	0	0	0	0	0	
Too expensive	0	0	0	0	0	0	0	0	0	0	0	0	
Partner refused	14.3% (1)	44.4% (4)	0	0	0	0	0	(1)	0	(1)	(1)	0	
Don't like it	14.3% (1)	22.2% (2)	0	0	0	0	0		(1)	0	0	(1)	
Take contraceptives	0	0	0	0	0	0	0	0	0	0	0	0	
Didn't think it was needed (he looked healthy, trust)	57.1% (4)	33.3% (3)	0	0	0	0	0	(1)	(1)	(1)	(3)	(1)	
Didn't think of it	0	11.1% (1)	0		0	0	0	(1)	0	0	0	0	
Other	28.6%(2)	22.2% (2)	0	0	0	0	0	(1)	0	0	(2)	0	
Frequency using condoms with permanent clients over the last 12 months	(132)	(80)	(2)	(1)	(3)	(7)	(29)	(16)	(44)	(27)	(54)	(29)	
Always	84.1%(111)	72.5%(58)	50.0%(1)	100.0%(1)	66.7%(2)	85.7%(6)	100.0%(29)	75.0%(12)	90.9%(40)	74.1%(20)	72.2%(39)	65.5%(19)	
Often	9.8%(13)	18.8%(15)	50.0%(1)	0	33.3%(1)	14.3%(1)	0	25.0%(4)	6.8%(3)	18.5%(5)	14.8%(8)	17.2%(5)	
Sometimes	5.3%(7)	6.3%(5)	0	0	0	0	0	0	2.3%(1)	7.4%(2)	11.1%(6)	10.3%(3)	
Never	0.8%(1)	2.5%(2)	0	0	0	0	0	0	0	0	1.9%(1)	6.9%(2)	

	-	4-1	Age groups											
Behavior with Regular	10	tal	<:	19	19	)-24	25-	30	31	-39	40	+		
Partner	т	В	Т	В	Т	В	т	В	Т	В	т	В		
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)		
Has regular partner	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)		
Yes	48.8%(78)	65.8%(79)	66.7%(2)	100.0%(2)	50.0%(4)	72.7%(8)	67.6%(23)	72.0%(18)	51.8%(29)	69.4%(25)	33.9%(20)	56.5%(26)		
No	50.6%(81)	34.2%(41)	33.3%(1)	0	37.5%(3)	27.3%(3)	32.4%(11)	28.0%(7)	48.2%(27)	30.6%(11)	66.1%(39)	43.5%(20)		
No response	0.6%(1)		0		12.5%(1)		0		0		0			
Number of permanent partners	(78)	(79)												
Mean	1.04	1.05												
Median	1.00	1.00												
Number of sexual intercourses with partner over the last 30 days	(78)	(79)	(2)	(2)	(4)	(8)	(23)	(18)	(29)	(25)	(20)	(26)		
Didn't have sexual interc.	7.7%(6)	5.1%(4)	0	50.0%(1)	25.0%(1)	0	0	5.6%(1)	10.3%(3)	0	10.0%(2)	7.7%(2)		
Up to 5 times	35.9%(28)	45.6%(36)	0	0	25.0%(1)	62.5%(5)	34.8%(8)	44.4%(8)	37.9%(11)	44.0%(11)	40.0%(8)	46.2%(12)		
5 – 10 times	23.1%(18)	15.2%(12)	100.0%(2)	0	25.0%(1)	12.5%(1)	26.1%(6)	16.7%(3)	24.1%(7)	20.0%(5)	10.0%(2)	11.5%(3)		
10 – 15 times	15.4%(12)	15.2%(12)	0	50.0%(1)	0	12.5%(1)	21.7%(5)	5.6%(1)	17.2%(5)	16.0%(4)	10.0%(2)	19.2%(5)		
More than 15	17.9%(14)	17.7%(14)	0	0	25.0%(1)	12.5%(1)	17.4%(4)	27.8%(5)	10.3%(3)	16.0%(4)	30.0%(6)	15.4%(4)		
Don't know/ Don't rememb.		1.3%(1)		0		0		0		4.0%(1)		0		
Condom use during the last sexual contacts with partner	(78)	(79)	(2)	(2)	(4)	(8)	(23)	(18)	(29)	(25)	(20)	(26)		
Yes	12.8%(10)	8.9%(7)	50.0%(1)	0	25.0%(1)	12.5%(1)	17.4%(4)	5.6%(1)	6.9%(2)	4.0%(1)	10.0%(2)	15.4%(4)		
No	87.2%(68)	91.1%(72)	50.0%(1)	100.0%(2)	75.0%(3)	87.5%(7)	82.6%(19)	94.4%(17)	93.1%(27)	96.0%(24)	90.0%(18)	84.6%(22)		
Who offered to use a condom	(10)	(7)	(1)	(0)	(1)	(1)	(4)	(1)	(2)	(1)	(2)	(4)		
My initiative	60.0%(6)	85.7%(6)	100.0%(1)		0	100.0%(1)	100.0%(4)	100.0%(1)	50.0%(1)	0	0	100.0%(4)		
Non-paying/regular partner														
Mutual initiative	40.0%(4)	14.3%(1)	0		100.0%(1)	0	0	0	50.0%(1)	100.0%(1)	100.0%(2)	0		
Reasons for not using condom during the last sex. intercour.	(68)	(72)	(1)	(2)	(3)	(7)	(19)	(17)	(27)	(24)	(18)	(22)		
Too expensive	1.5%(1)		0		0		0		0		5.6%(1)			
Partner refused	29.4%(20)	5.6%(4)	100.0%(1)	0	0	0	15.8%(3)	5.9%(1)	40.7%(11)	12.5%(3)	27.8%(5)	0		
Don't like it	7.4%(5)	6.9%(5)	0	50.0%(1)	0	0	5.3%(1)	5.9%(1)	11.1%(3)	8.3%(2)	5.6%(1)	4.5%(1)		
Take contraceptives	1.5%(1)		0		0		5.3%(1)		0		0			
Didn't think it was needed	14.7%(10)	9.7%(7)	0	0	66.7%(2)	0	10.5%(2)	5.9%(1)	18.5%(5)	12.5%(3)	5.6%(1)	13.6%(3)		
He looked healthy	4.4%(3)		100.0%(1)		0		0		7.2%(2)		0			
Trusted him	4.4%(3)		0		0		5.3%(1)		0		11.1%(2)			
Didn't think of it	80.9%(55)	88.9%(64)	100.0%(1)	100.0%(2)	66.7%(2)	85.7%(6)	84.2%(16)	88.2%(15)	81.5%(22)	83.3%(20)	77.8%(14)	95.5%(21)		
Other	5.9%(4)	8.3%(6)	0	0	0	14.3%(1)	0	0	14.8%(4)	16.7%(4)	0	4.5%(1)		
Frequency using condoms	(78)	(79)	(2)	(2)	(4)	(8)	(23)	(18)	(29)	(25)	(20)	(26)		

# Table 11: Sexual Behavior of FSWs with Regular Partners

		otal					Age gr	oups				
Behavior with Regular		la	<	19	19	9-24	25-	30	31	-39	40	+
Partner	Т	В	Т	В	Т	В	Т	В	Т	В	Т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
with regular partner over the last 12 months												
Always	9.0%(7)	7.6%(6)	0	0	25.0%(1)	12.5%(1)	13.0%(3)	5.6%(1)	0	4.0%(1)	15.0%(3)	11.5%(3)
Often	5.1%(4)	1.3%(1)	0	0	0	0	8.7%(2)	0	6.9%(2)	0	0	3.8%(1)
Sometimes	5.1%(4)	7.6%(6)	50.0%(1)	0	0	0	4.3%(1)	16.7%(3)	3.4%(1)	8.0%(2)	5.0%(1)	3.8%(1)
Never	79.5%(62)	83.5%(66)	50.0%(1)	100.0%(2)	75.0%(3)	87.5%(7)	73.9%(17)	77.8%(14)	86.2%(25)	88.0%(22)	80.0%(16)	80.8%(21)
No response	1.3%(1)		0		0		0		3.4%(1)		0	

## Table 12: Access to Condoms for FSWs

	То	tal					Age gi	roups				
	10	lai	<	19	19	9-24	25-	30	31	-39	40	+
Access to Condoms	Т	В	Т	В	Т	В	т	В	Т	В	т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Never used a condom with any sex partner	0	0	0	0	0	0	0	0	0	0	0	0
	(0/160)	(0/120)	(0/3)	(0/2)	(0/8)	(0/11)	(0/34)	(0/25)	(0/56)	(0/36)	(0/59)	(0/46)
Where do you go to get condoms	(159)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(59)	(36)	(59)	(46)
Shop	5.0%(8)	1.7%(2)	0	0	0	9.1%(1)	5.9%(2)	0	10.9%(6)	0	0	2.2%(1)
Drugstore	91.8%(146)	91.7%(110)	100.0%(3)	100.0%(2)	87.5%(7)	90.9%(10)	94.1%(32)	88.0%(22)	89.1%(49)	91.7%(33)	93.2%(55)	93.5%(43)
Market												
"Tanadgoma"	59.1%(94)	80.8%(97)	0	50.0%(1)	25.0%(2)	72.7% (8)	50.0%(17)	60.0%(15)	69.1%(38)	86.1%(31)	62.7%(37)	91.3%(42)
Girls with whom you work	10.7%(17)	10.0%(12)	66.7%(2)	50.0%(1)	12.5%(1)	9.1%(1)	11.8%(4)	20.0%(5)	12.7%(7)	5.6%(2)	5.1%(3)	6.5%(3)
Hotel	8.2%(13)	6.7%(8)	33.3%(1)	0	12.5%(1)	9.1%(1)	5.9%(2)	16.0%(4)	10.9%(6)	8.3%(3)	5.1%(3)	0
Sauna	3.8%(6)		0		0		5.9%(2)		5.5%(3)		1.7%(1)	
Clients	3.1%(5)		33.3%(1)		0		0		5.5%(3)		1.7%(1)	
Other	2.5%(4)		0		0		5.9%(2)		0		3.4%(2)	
Time necessary for buying/getting a condom	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Less than 5 minutes	62.5%(100)	71.7% (86)	0	100.0%(2)	62.5%(5)	63.6%(7)	55.9%(19)	80.0%(20)	67.9%(38)	69.4%(25)	64.4%(38)	69.6%(32)
5 – 15 minutes	33.1%(53)	26.7% (32)	66.7%(2)	0	37.5%(3)	18.2%(2)	38.2%(13)	20.0%95)	28.6%(16)	30.6%(11)	32.2%(19)	30.4%(14)
15 – 30 minutes	3.8%(6)	0.8%(1)	33.3%(1)	0	0	9.1%(1)	5.9%(2)	0	1.8%(1)	0	3.4%(2)	0
30 minutes or more	0.6%(1)	0.8%(1)	0	0	0	9.1%(1)	0	0	1.8%(1)	0	0	0
Number of condoms FSWs have with them or at place of work	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
None	23.1%(37)	7.5%(9)	66.7%(2)	0	62.5%(5)	18.2%(2)	26.5%(9)	8.0%(2)	19.6%(11)	2.8%(1)	16.9%(10)	8.7%(4)
Yes	72.5%(116)	91.7%(110)	33.3%(1)	100.0%(2)	37.5%(3)	81.8%(9)	67.6%(23)	88.0%(22)	73.2%(41)	97.2%(35)	81.4%(48)	91.3%(42)

No response	4.4%(7)	0.8%(1)	0	0	0	0	5.9%(2)	4.0%(1)	7.1%(4)	0	1.7%(1)	0
Minimum	1	1	4	10	2	1	1	1	1	1	1	1
Maximum	40	65	4	20	5	22	40	22	23	25	25	65
Mean	5.22	8.92	4.00	15.00	3.33	6.89	5.04	7.09	5.46	7.31	5.26	11.36

# Table 13: Violence among FSWs

	То	tal					Age gr	oups				
Violence	10	Lai	<:	19	19	9-24	25-	30	31	-39	40	+
violence	Т	В	т	В	т	В	Т	В	т	В	т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
FSWs experienced either physical violence, rape or sexual violence through blackmailing during last year	15.6%(25)	8.3%(10)	66.7%(2)	50.0%(1)	12.5%(1)	18.2%(2)	5.9%(2)	16.0%(4)	14.3%(8)	2.8%(1)	20.3%(12)	4.3%(2)
FSWs victims of physical violence (Beating, bothering, etc.)	14.4%(23)	4.2%(5)	33.3%(1)	50.0%(1)	12.5%(1)	9.1%(1)	5.9%(2)	8.0%(2)	14.3%(8)	2.8%(1)	18.6%(11)	0
Person who made physical violence to FSW	(23)	(5)	(1)	(1)	(1)	(1)	(2)	(2)	(8)	(1)	(11)	0
Client	52.2%(12)	40.0%(2)	100.0%(1)	0	0	100.0%(1)	50.0%(1)	0	50.0%(4)	100.0%(1)	54.5%(6)	
Lover (boyfriend)	13.0%(3)		0		0		0		25.0%(2)		9.1%(1)	
Husband	4.3%(1)	20.0%(1)	0	100.0%(1)	0	0	50.0%(1)	0	0	0	0	
Pimp	4.3%(1)		0		100.0%(1)		0		0		0	
Policeman	13.0%(3)		0		0		0		0		27.3%(3)	
Stranger	8.7%(2)	20.0%(1)	0	0	0	0	0	50.0%(1)	12.5%(1)	0	9.1%(1)	
Other	4.3%(1)	20.0%(1)	0	0	0	0	0	50.0%(1)	12.5%(1)	0	0	
FSWs victims of sexual violence through blackmailing or threatening	2.5%(4)	5.0%(6)	33.3%(1)	0	12.5%(1)	18.2%(2)	0	8.0%(2)	1.8%(1)	0	1.7%(1)	4.3%(2)
Person who made sexual violence through blackmailing to FSW	(4)	(6)	(1)	0	(1)	(2)	0	(2)	(1)	0	(1)	(2)
Client	75.0%(3)	50.0%(3)	100.0%(1)		0	50.0%(1)		0	100.0%(1)		100.0%(1)	100.0%(2)
Pimp	25.0%(1)		0		100.0%(1)				0		0	
Policeman		16.7%(1)				0		50.0%(1)				0
Stranger		33.3%(2)				50.0%(1)		50.0%(1)				0
FSWs victims of forced sexual intercourse/rape	1.9%(3)	0.8%(1)										
Person who forced FSW to sexual intercourse or raped her	(3)	(1)	33.3%(1)	0	12.5%(1)	0	0	4.0%(1)	1.8%(1)	0	0	0
Client	33.3%(1)		0		0			100.0%(1)	100.0%(1)			
Stranger	66.7%(2)	100.0%(1)	100.0%(1)		100.0%(1)			0	0			

	-	4-1					Age gi	roups				
	10	tal	<	19	19	)-24	25-	30	31	-39	40	)+
STI Knowledge	Т	В	Т	В	Т	В	Т	В	т	В	т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Aware of STIs	98.8%(158)	100.0%(120)	100.0%(3)	100.0%(2)	100.0%(8)	100.0%11)	100.0%(34)	100.0%(25)	96.4%(54)	100.0%(36)	100.0%(59)	100.0%(46)
Knowledge of STI symptoms observed among women	(158)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(54)	(36)	(59)	(46)
Vaginal (genital) release	52.5%(83)	83.3%(100)	33.3%(1)	0	12.5%(1)	63.6%(7)	47.1%(16)	80.0%(20)	59.3%(32)	88.9%(32)	55.9%(33)	89.1%(41)
Genital, skin or mucous membrane ulcer	28.5%(45)	40.8%(49)	0	0	25.0%(2)	36.4%(4)	14.7%(5)	44.0%(11)	37.0%(20)	44.4%(16)	30.5%(18)	39.1%(18)
Genital redness	5.1%(8)	21.7%(26)	0	0	0	27.3%(3)	0	24.0%(6)	1.9%(1)	16.7%(6)	11.9%(7)	23.9%(11)
Burning while urinating	30.4%(48)	43.3%(52)	0	0	0	36.4%(4)	32.4%(11)	48.0%(12)	31.5%(17)	36.1%(13)	33.9%(20)	50.0%(23)
Itching	38.0%(60)	39.2%(47)	33.3%(1)	0	12.5%(1)	45.5%(5)	32.4%(11)	44.0%(11)	42.6%(23)	41.7%(15)	40.7%(24)	34.8%(16)
Lower abdomen ache	10.8%(17)	26.7%(32)	0	0	25.0%(2)	9.1%(1)	11.8%(4)	20.0%(5)	11.1%(6)	33.3%(12)	8.5%(5)	30.4%(14)
Fever	2.5%(4)	3.3%(4)	0	0	0	0	2.9%(1)	0	3.7%(2)	2.8%(1)	1.7%(1)	6.5%(3)
Weakness	1.9%(3)	1.7%(2)	0	0	0	0	0	0	5.6%(3)	2.8%(1)	0	2.2%(1)
Other	4.4%(7)	1.7%(2)	0	0	0	0	5.9%(2)	0	5.6%(3)	0	3.4%(2)	4.3%(2)
Don't know		2.5%(3)		0		9.1%(1)		8.0%(2)		0		0
No response	28.5%(45)	10.8%(13)	66.7%(2)	100.0%(2)	62.5%(5)	27.3%(3)	29.4%(10)	8.0%(2)	22.2%(12)	5.6%(2)	27.1%(16)	8.7%(4)
Know at least one symptom	70.9%(112)	85.8%(103)	33.3%(1)	0	37.5%(3)	63.6%(7)	67.6%(23)	84.0%(21)	77.8%(42)	91.7%(33)	72.9%(43)	91.3%(42)
Do not know any	0.6%(1)	3.3%(4)	0	0	0	9.1%(1)	2.9%(1)	8.0%(2)	0	2.8%(1)	0	0
No response	28.5%(45)	10.8%(13)	66.7%(2)	100.0%(2)	62.5%(5)	27.3%(3)	29.4%(10)	8.0%(2)	22.2%(12)	5.6%(2)	27.1%(16)	8.7%(4)
Knowledge of STI symptoms observed among men	(158)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(54)	(36)	(59)	(46)
Vaginal (genital) release	55.1%(87)	73.3%(88)	66.7%(2)	0	0	54.5%(6)	41.2%(14)	64.0%(16)	59.3%(32)	80.6%(29)	66.1%(39)	80.4%(37)
Genital, skin or mucous membrane ulcer	27.8%(36)	30.0%(36)	0	0	0	36.4%(4)	14.7%(5)	32.0%(8)	27.8%(15)	27.8%(10)	27.1%(16)	30.4%(14)
Genital redness	8.2%(13)	21.7%(26)	0	0	0	27.3%(3)	2.9%(1)	16.0%(4)	11.1%(6)	22.2%(8)	10.2%(6)	23.9%(11)
Burning while urinating	31.0%(49)	35.8%(43)	33.3%(1)	50.0%(1)	0	54.5%(6)	35.3%(12)	32.0%(8)	33.3%(18)	36.1%(13)	30.5%(18)	32.6%(15)
Itching	26.6%(42)	30.0%(36)	0	0	0	27.3%(3)	26.5%(9)	32.0%(8)	27.8%(15)	33.3%(12)	30.5%(18)	28.3%(13)
Lower abdomen ache	2.5%(4)	2.5%(3)	0	0	0	0	5.9%(2)	0	3.7%(2)	2.8%(1)	0	4.3%(2)
Other	3.8%(6)	1.7%(2)	0	0	0	0	5.9%(2)	0	7.4%(4)	5.6%(2)	0	0
No response	29.7%(47)	19.2%(23)	33.3%(1)	50.0%(1)	100.0%(8)	27.3%(3)	29.4%(10)	32.0%(8)	24.1%(13)	8.3%(3)	25.4%(15)	17.4%(8)
Know at least one symptom	69.0%(109)	80.0%(96)	66.7%(2)	50.0%(1)	0	72.7%(8)	64.7%(22)	68.0%(17)	75.9%(41)	88.9%(32)	74.6%(44)	82.6%(38)
Do not know any	1.3%(2)	0.8%(1)	0	0	0	0	5.9%(2)	0	0	2.8%(1)	0	
No response	29.7%(47)	19.2%(23)	33.3%(1)	50.0%(1)	100.0%(8)	27.3%(3)	29.4%(10)	32.0%(8)	24.1%(13)	8.3%(3)	25.4%(15)	17.4%(8)
Had STI symptoms in the last 12 months	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Vaginal release	23.8%(38)	23.3%(28)	33.3%(1)	50.0%(1)	25.0%(2)	36.4%(4)	29.4%(10)	48.0%(12)	21.4%(12)	16.7%(6)	22.0%(13)	10.9%(5)
Vaginal ulcer/boil	1.9%(3)	2.5%(3)	0	0	0	9.1%(1)	5.9%(2)	0	0	0	1.7%(1)	4.3%(2)
Received treatment at:	(38)	(29)	(1)	(1)	(2)	(4)	(10)	(12)	(12)	(6)	(13)	(6)
State clinic/hospital	52.6%(20)	48.3%(14)	0	0	100.0%(2)	75.0%(3)	60.0%(6)	50.0%(6)	25.0%(3)	50.0%(3)	69.2%(9)	33.3%(2)

# Table 14: STI Knowledge and Health Seeking Behavior among FSWs

Private clinic/hospital	10.5%(4)		100.0%(1)		0		0		16.7%(2)		7.7%(1)	
Drugstore	21.1%(8)	17.2%(5)	0	0	0	0	20.0%(2)	8.3%(1)	25.0%(3)	16.7%(1)	23.1%(3)	50.0%(3)
Traditional healer	7.9%(3)		100.0%(1)		0		0		8.3%(1)		7.7%(1)	
Applied a self-treatment	36.8%(14)	55.2%(16)	100.0%(1)	100.0%(1)	0	25.0%(1)	20.0%(2)	58.3%(7)	58.3%(7)	50.0%(3)	30.8%(4)	66.7%(4)
Mean # treatment options used	1.29	1.21	3.00	1.00	1.00	1.00	1.00	1.17	1.33	1.17	1.38	1.50
Minimum	0	1	3	1	1	1	0	1	0	1	1	1
Maximum	4	2	3	1	1	1	2	2	4	2	2	2
Sexual behavior during symptomatic period	(38)	(29)	(1)	(1)	(2)	(4)	(10)	(12)	(12)	(6)	(13)	(6)
Told sexual partner about STI	57.9%(22)	37.9%(1)	0	0	50.0%(1)	50.0%(2)	80.0%(8)	25.0%(3)	66.7%(8)	50.0%(3)	38.5%(5)	50.0%(3)
Stopped intercourse	50.0%(19)	44.8%(13)	100.0%(1)	0	50.0%(1)	25.0%(1)	30.0%(3)	50.0%(6)	41.7%(5)	50.0%(3)	69.2%(9)	50.0%(3)
Used condoms	50.0%(19)	17.2%(5)	0	0	50.0%(1)	0	60.0%(6)	16.7%(2)	58.3%(7)	33.3%(2)	38.5%(5)	16.7%(1)

-							Age g	groups				
	IC	otal	<	19	19	9-24	25-		31	L-39	40	)+
HIV/AIDS Knowledge	т	В	т	В	т	В	т	В	Т	В	т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Aware of HIV/AIDS	93.8%(150)	97.5%(117)	66.7%(2)	100.0%(2)	75.0%(6)	100.0%(11)	94.1%(32)	96.0%(24)	94.6%(53)	100.0%(36)	96.6%(57)	95.7%(44)
No response	0.6%(1)		0		0		0		0		1.7%(1)	
Know Person w HIV/AIDS	(150)	(117)	(2)	(2)	(6)	(11)	(32)	(24)	(53)	(36)	(57)	(44)
Yes	8.0%(12)	4.3%(5)	0	50.0%(1)	16.7%(1)	0	12.5%(4)	4.2%(1)	3.8%(2)	5.6%(2)	8.8%(5)	2.3%(1)
If yes, a close friend or relative (yes)	1.3%(2)		0		0		3.1%(1)		0		1.8%(1)	
No response		0.9%(1)		0		0		0		2.8%(1)		0
Key HIV/AIDS Knowledge	(150)	(117)	(2)	(2)	(6)	(11)	(32)	(24)	(53)	(36)	(57)	(44)
Needle/syringe sharing	94.0%(141)	94.0%(110)	100.0%(2)	50.0%(1)	66.7%(4)	81.8%(9)	93.8%(30)	91.7%(22)	96.2%(51)	100.0%(36)	94.7%(54)	95.5%(42)
Abstinence	78.0%(117)	50.4%(59)	50.0%(1)	0	50.0%(3)	36.4%(4)	78.1%(25)	45.8%(11)	75.5%(40)	50.0%(18)	84.2%(48)	59.1%(26)
Correct condom use	76.7%(115)	66.7%(78)	100.0%(2)	50.0%(1)	83.3%(5)	63.6%(7)	65.6%(21)	70.8%(17)	75.5%(40)	61.1%(22)	82.5%(47)	70.5%(31)
One faithful partner	77.3%(116)	53.8%(63)	0	0	50.0%(3)	45.5%(5)	87.5%(28)	54.2%(13)	71.7%(38)	55.6%(20)	82.5%(47)	56.8%(25)
Mosquito bites (no)	24.0%(36)	22.2%(26)	100.0%(2)	0	16.7%(1)	27.3%(3)	15.6%(5)	12.5%(3)	24.5%(13)	22.2%(8)	26.3%(15)	27.3%(12)
Meal- sharing (no)	27.3%(41)	34.2%(40)	0	50.0%(1)	0	27.3%(3)	25.0%(8)	29.2%(7)	22.6%(12)	41.7%(15)	36.8%(21)	31.8%(14)
All items correct	10.0%(15)	5.1%(6)	0	0	0	9.1%(1)	9.4%(3)	4.2%(1)	7.5%(4)	0	14.0%(8)	9.1%(4)
More HIV/AIDS knowledge												
MTCT during pregnancy	88.0%(132)	90.6%(106)	50.0%(1)	100.0%(2)	50.0%(3)	72.7%(8)	87.5%(28)	91.7%(22)	83.0%(44)	88.9%(32)	98.2%(56)	95.5%(42)
Through breastfeeding	63.3%(95)	73.5%(86)	0	100.0%(2)	33.3%(2)	72.7%(8)	71.9%(23)	66.7%(16)	58.5%(31)	77.8%(28)	68.4%(39)	72.7%(32)
Actions for reducing risk of MTCT	(132)	(106)	(1)	(2)	(3)	(8)	(28)	(22)	(44)	(32)	(56)	(42)
Take ARVs	28.8%(38)	38.7%(41)	0	0	66.7%(2)	50.0%(4)	28.6%(8)	40.9%(9)	25.0%(11)	37.5%(12)	30.4%(17)	38.1%(16)
Caesarean section	0.8%(1)	1.9%(2)	0	0	0	0	0	9.1%(2)	2.3%(1)	0	0	0
Artificial nutrition	3.8%(5)	0.9%(1)	0	0	0	0	7.1%(2)	4.5%(1)	2.3%(1)	0	3.6%(2)	0
Nothing		1.9%(2)		50.0%(1)		0		0		0		2.4%(1)
Consult a doctor	3.8%(5)	1.9%(2)	0	0	0	0	0	4.5%(1)	4.5%(2)	3.1%(1)	5.4%(3)	0
Abortion	4.5%(6)	2.8%(3)	0	0	0	0	3.6%(1)	0	11.4%(5)	9.4%(3)	0	0
Less sex		0.9%(1)		0		0		0		0		2.4%(1)
Blood transfusion	0.8%(1)		0		0		0		2.3%(1)		0	
Don't know	61.4%(81)	54.7%(58)	100.0%(1)	50.0%(1)	33.3%(1)	50.0%(4)	67.9%(19)	59.1%(13)	59.1%(26)	50.0%(16)	60.7%(34)	57.1%(24)
No response	0.8%(1)		0		0		0		0		1.8%(1)	
Knowledge of STI/AIDS prevention routes	(158)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(54)	(36)	(59)	(46)
Condom use	84.4%(134)	98.3%(118)	100.0%(3)	100.0%(2)	62.5%(5)	100.0%(11)	85.3%(29)	100.0%(25)	83.3%(45)	97.2%(35)	88.1%(52)	97.8%(45)
Avoiding sexual contacts	8.9%(14)	1.7%(2)	0	0	12.5%(1)	0	8.8%(3)	0	3.7%(2)	5.6%(2)	13.6%(8)	0
Contact with one devoted partner	6.3%(10)	1.7%(2)	0	0	0	0	0	0	3.7%(2)	0	13.6%(8)	4.3%(2)
Safe forms of sexual contact	0.6%(1)		0		0		0		0		1.7%(1)	
Practice proper hygiene	1.3%(2)		0		0		2.9%(1)		1.9%(1)		0	

# Table 15: HIV/AIDS Knowledge and Testing among FSWs

	Ta	4-1					Age g	roups				
	10	tal	<:	19	19	9-24	25-	30	31	L- <b>3</b> 9	40	)+
HIV/AIDS Knowledge	т	В	Т	B	Т	В	т	В	Т	В	Т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Don't know	11.4%(18)	1.7%(2)	0	0	25.0%(2)	0	8.8%(3)	0	14.8%(8)	2.8%(1)	8.5%(5)	2.2%(1)
No response	1.3%(2)		0		0		2.9%(1)		0		1.7%(1)	
Other STI/HIV routes	(158)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(54)	(36)	(59)	(46)
A person with first blood gr. can get STI/HIV	50.0%(79)	50.0%(60)	33.3%(1)	0	12.5%(1)	45.5%(5)	44.1%(15)	40.0%(10)	48.1%(26)	75.0%(27)	61.0%(36)	39.1%(18)
Don't know	37.3%(59)	22.5%(27)	66.7%(2)	100.0%(2)	75.0%(6)	27.3%(3)	38.2%(13)	28.0%(7)	35.2%(19)	13.9%(5)	32.2%(19)	21.7%(10)
HIV/AIDS Knowledge	(150)	(117)	(2)	(2)	(6)	(11)	(32)	(24)	(53)	(36)	(57)	(44)
A person looking healthy can be infected with HIV	74.0%(111)	83.8%(98)	100.0%(2)	100.0%(2)	33.3%(2)	63.6%(7)	78.1%(25)	83.3%(20)	71.7%(38)	88.9%(32)	77.2%(44)	84.1%(37)
A person looking healthy can't be infected with HIV	11.3%(17)	4.3%(5)	0	0	0	0	12.5%(4)	4.2%(1)	11.3%(6)	5.6%(2)	12.3%(7)	4.5%(2)
Don't know	14.7%(22)	12.0%(14)	0	0	66.7%(4)	36.4%(4)	9.4%(3)	12.5%(3)	17.0%(9)	5.6%(2)	10.5%(6)	11.4%(5)
Knows HIV testing site in a community	(150)	(117)	(2)	(2)	(6)	(11)	(32)	(24)	(53)	(36)	(57)	(44)
Yes	86.7%(130)	94.9%(111)	50.0%(1)	100.0%(2)	50.0%(3)	72.7%(8)	84.4%(27)	95.8%(23)	86.8%(46)	100.0%(36)	93.0%(53)	95.5%(42)
No	6.0%(9)	1.7%(2)	0	0	16.7%(1)	0	3.1%(1)	4.2%(1)	9.4%(5)	0	3.5%(2)	2.3%(1)
Don't know	7.3%(11)	3.4%(4)	50.0%(1)	0	33.3%(2)	27.3%(3)	12.5%(4)	0	3.8%(2)	0	3.5%(2)	2.3%(1)
Confidential HIV test	(150)	(117)	(2)	(2)	(6)	(11)	(32)	(24)	(53)	(36)	(57)	(44)
Had test	71.3%(107)	65.8%(77)	50.0%(1)	0	33.3%(2)	36.4%(4)	71.9%(23)	62.5%(15)	79.2%(42)	69.4%(25)	68.4%(39)	75.0%(33)
Voluntary took test	96.3%(103)	100.0%(77)	100.0%(1)		100.0%(2)	100.0%(4)	95.7%(22)	100.0%(15)	100.0%(42)	100.0%(25)	92.3%(36)	100.0%(33)
Received result of test	94.4%(101)	85.7%(66)	0		50.0%(1)	75.0%(3)	95.7%(22)	73.3%(11)	97.6%(41)	88.0%(22)	94.9%(37)	90.9%(30)
Time of the last HIV test	(107)	(77)	(1)		(2)	(4)	(23)	(15)	(42)	(25)	(39)	(33)
This year	54.2%(58)	45.5%(35)	100.0%(1)		50.0%(1)	25.0%(1)	52.2%(12)	40.0%(6)	59.5%(25)	40.0%(10)	48.7%(19)	54.5%(18)
1-2 yrs ago	28.0%(30)	45.5%(35)	0		50.0%(1)	75.0%(3)	30.4%(7)	53.3%(8)	26.2%(11)	48.0%(12)	28.2%(11)	36.4%(12)
2-4 yrs ago	9.3%(10)	6.5%(5)	0		0	0	8.7%(2)	0	7.1%(3)	12.0%(3)	12.8%(5)	6.1%(2)
>4 yrs ago	7.5%(8)	2.6%(2)	0		0	0	8.7%(2)	6.7%(1)	7.1%(3)	0	7.7%(3)	3.0%(1)
Don't remember	0.9%(1)		0		0		0		0		2.6%(1)	

	_						Age	groups				
Attitudes towards HIV	То	otal	<	19	19	9-24	25-		31	-39	40	)+
Infected Persons	т	В	т	В	Т	В	т	В	Т	В	Т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Tell someone about test	38.6%	75.8%			0	100.0%	45.5%	63.6%	39.0%	77.3%	35.1%	76.7%
results	(39/101)	(50/66)			0	(3/3)	(10/22)	(7/11)	(16/41)	(17/22)	(13/37)	(23/30)
Whom did you tell the test results	(39)	(50)				(3)	(10)	(7)	(16)	(17)	(13)	(23)
Client/clients	7.7%(3)	8.0%(4)				0	10.0%(1)	14.3%(1)	6.3%(1)	17.6%(3)	7.7%(1)	0
Permanent client/clients	20.5%(8)	6.0%(3)				33.3%(1)	10.0%(1)	0	25.0%(4)	0	23.1%(3)	8.7%(2)
Partner/partners	20.5%(8)	18.0%(9)				0	0	14.3%(1)	31.3%(5)	41.2%(7)	23.1%(3)	4.3%(1)
Colleague sex workers	51.3%(20)	30.0%(15)				33.3%(1)	70.0%(7)	28.6%(2)	43.8%(7)	17.6%(3)	46.2%(6)	39.1%(9)
Family members	17.9%(7)	6.0%(3)				0	30.0%(3)	14.3%(1)	12.5%(2)	5.9%(1)	15.4%(2)	4.3%(1)
Relatives	10.3%(4)	6.0%(3)				0	0	14.3%(1)	6.3%(1)	0	23.1%(3)	8.7%(2)
Friends	28.2%(11)	60.0%(30)				66.7%(2)	10.0%(1)	71.4%(5)	43.8%(7)	58.8%(10)	23.1%(3)	56.5%(13)
Whom you would tell if you receive HIV positive	(150)	(117)	(2)	(2)	(6)	(11)	(32)	(24)	(53)	(36)	(57)	(44)
Nobody	35.3%(53)	21.4%(25)	50.0%(1)	50.0%(1)	50.0%(3)	18.2%(2)	31.3%(10)	33.3%(8)	28.3%(15)	22.2%(8)	42.1%(24)	13.6%(6)
Client	4.7%(7)	17.1%(20)	0	0	16.7%(1)	27.3%(3)	0	20.8%(5)	9.4%(5)	16.7%(6)	1.8%(1)	13.6%(6)
Permanent client	6.0%(9)	24.8%(29)	0	0	16.7%(1)	36.4%(4)	0	20.8%(5)	13.2%(7)	22.2%(8)	1.8%(1)	27.3%(12)
Permanent partner	22.7%(34)	35.0%(41)	50.0%(1)	50.0%(1)	33.3%(2)	54.5%(6)	21.9%(7)	37.5%(9)	26.4%(14)	38.9%(14)	17.5%(10)	25.0%(11)
Family members	15.3%(23)	30.8%(36)	0	50.0%(1)	33.3%(2)	36.4%(4)	28.1%(9)	25.0%(6)	13.2%(7)	33.3%(12)	8.8%(5)	29.5%(13)
Relative	7.3%(11)	15.4%(18)	0	0	16.7%(1)	9.1%(1)	6.3%(2)	8.3%(2)	11.3%(6)	19.4%(7)	3.5%(2)	18.2%(8)
Colleague sex worker	8.7%(13)	30.8%(36)	0	0	16.7%(1)	18.2%(2)	3.1%(1)	25.0%(6)	13.2%(7)	30.6%(11)	7.0%(4)	38.6%(17)
Friend	20.7%(31)	42.7%(50)	0	0	16.7%(1)	27.3%(3)	15.6%(5)	41.7%(10)	28.3%(15)	41.7%(15)	17.5%(10)	50.0%(22)
Doctor	13.3%(20)	7.7%(9)	50.0%(1)	0	0	0	9.4%(3)	12.5%(3)	15.1%(8)	2.8%(1)	14.0%(8)	11.4%(5)
Other	4.0%(6)	1.7%(2)	0	0	0	0	6.3%(2)	8.3%(2)	3.8%(2)	0	3.5%(2)	0
Don't know	2.7%(4)	1.7%(2)	0	0	0	18.2%(2)	0	0	5.7%(3)	0	1.8%(1)	0
Attitudes towards HIV infected persons												
Would you like to have a meal with a person with HIV/AIDS?	24.7% (37/150)	24.8% (29/117)	50.0% (1/2)	0	16.7% (1/6)	18.2% (2/11)	18.8% (6/32)	20.8% (5/24)	20.8% (11/53)	22.2% (8/36)	31.6% (18/57)	31.8% (14/44)
Would you take care of your HIV infected relative man at your place?	48.0% (72/150)	44.4% (52/117)	100.0% (2/2)	0 (0/2)	50.0% (3/6)	27.3% (3/11)	37.5% (12/32)	62.5% (15/24)	45.3% (24/53)	47.2% (17/36)	54.4% (31/57)	38.6% (17/44)
If a student is infected with HIV, but not diseased may he be permitted to continue studying?	23.3% (35/150)	30.8% (36/117)	0 (0/2)	0 (0/2)	16.7% (1/6)	45.5% (5/11)	18.8% (6/32)	29.2% (7/24)	22.6% (12/53)	25.0% (9/36)	28.1% (16/57)	34.1% (15/44)
Would you take care of your HIV infected relative woman at your place?	47.3% (/71150)	42.7% (50/117)	100.0% (2/2)	0 (0/2)	50.0% (3/6)	27.3% (3/11)	37.5% (12/32)	58.3% (14/24)	43.4% (23/53)	41.7% (15/36)	54.4% (31/57)	40.9% (18/44)

# Table 16: Attitude of FSWs towards Persons with HIV/AIDS

	То	tal					Age g	groups				
Attitudes towards HIV	10	tal	<	19	19	9-24	25-	30	31	1-39	40	)+
Infected Persons	Т	В	Т	В	Т	В	Т	В	Т	В	Т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
If a teacher is infected, but not diseased with HIV may he be permitted to continue teaching at school?	21.3% (32/150)	24.8% (29/117)	0 (0/2)	0 (0/2)	16.7% (1/6)	27.3% (3/11)	21.9% (7/32)	16.7% (4/24)	17.0% (9/53)	19.4% (7/36)	26.3% (15/57)	34.1% (15/44)
If acquainted with you food salesman is infected with HIV, will you buy food from him/her?	12.7% (19/150)	13.7% (16/117)	0 (0/2)	0 (0/2)	0 (0/6)	27.3% (3/11)	15.6% (5/32)	8.3% (2/24)	7.5% (4/53)	13.9% (5/36)	17.5% (10/57)	13.6% (6/44)
If the member of your family were infected with HIV would you like it to keep this in secret?	69.3% (104/150)	61.5% (72/117)	100.0% (2/2)	50.0% (1/2)	50.0% (3/6)	45.5% (5/11)	62.5% (20/32)	62.5% (15/24)	75.5% (40/53)	66.7% (24/36)	68.4% (39/57)	61.4% (27/44)

	Ta	late					Age g	groups				
		otal	<	19	1	9-24	25-	30	3	1-39	40	)+
Information on STI/HIV	Т	В	Т	В	Т	В	Т	В	Т	В	Т	В
	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Number of FSWs received information on STI/AIDS	98.8%(158)	100.0%(120)	100.0%(3)	100.0%(2)	100.0%(8)	100.0%(11)	100.0%(34)	100.0%(25)	96.4%(54)	100.0%(36)	100.0%(59)	100.0%(46)
Source of information	(158)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(54)	(36)	(59)	(46)
TV/Radio	67.7%(107)	83.3%(100)	66.7%(2)	100.0%(2)	37.5%(3)	54.5%(6)	67.6%(23)	88.0%(22)	61.1%(33)	80.6%(29)	78.0%(46)	89.1%(41)
Newspapers	20.3%(32)	28.3%(34)	0	50.0%(1)	0	9.1%(1)	11.8%(4)	20.0%(5)	18.5%(10)	36.1%(13)	30.5%(18)	30.4%(14)
Friends	26.6%(42)	25.8%(31)	66.7%(2)	100.0%(2)	62.5%(5)	36.4%(4)	38.2%(13)	32.0%(8)	18.5%(10)	30.6%(11)	20.3%(12)	13.0%(6)
Clients	5.7%(9)	1.7%(2)	33.3%(1)	0	0	0	8.8%(3)	4.0%(1)	9.3%(5)	2.8%(1)	0	0
Family members	2.5%(4)	1.7%(2)	0	0	0	0	5.9%(2)	4.0%(1)	1.9%(1)	2.8%(1)	1.7%(1)	0
Social workers	46.8%(74)	72.5%(87)	0	50.0%(1)	25.0%(2)	54.5%(6)	55.9%(19)	64.0%(16)	46.3%(25)	83.3%(30)	47.5%(28)	73.9%(34)
Other	8.2%(13)	1.7%(2)	66.7%(2)	0	0	0	8.8%(3)	0	11.1%(6)	2.8%(1)	3.4%(2)	2.2%(1)
Booklet	6.3%(10)		0		0		2.9%(1)		11.1%(6)		5.1%(3)	
Frequency of listening to radio during last 4 weeks	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Every day	18.8%(30)	11.7%(14)	33.3%(1)	0	25.0%(2)	9.1%(1)	20.6%(7)	8.0%(2)	21.4%(12)	16.7%(6)	13.6%(8)	10.9%(5)
No less than once a week	8.1%(13)	20.0%(24)	0	0	12.5%(1)	18.2%(2)	2.9%(1)	8.0%(2)	8.9%(5)	19.4%(7)	10.2%(6)	28.3%(13)
Less than once a week	12.5%(20)	5.0%(6)	0	0	0	0	2.9%(1)	12.0%(3)	16.1%(9)	0	16.9%(10)	6.5%(3)
Have not listened within the last 4 weeks	60.6%(97)	63.3%(76)	66.7%(2)	100.0%(2)	62.5%(5)	72.7%(8)	73.5%(25)	72.0%(18)	53.6%(30)	63.9%(23)	59.3%(35)	54.3%(25)
Frequency of watching TV during last 4 weeks	(160)	(120)	(3)	(2)	(8)	(11)	(34)	(25)	(56)	(36)	(59)	(46)
Every day	89.4%(143)	80.8%(97)	100.0%(3)	50.0%(1)	50.0%(4)	54.5%(6)	91.2%(31)	68.0%(17)	92.9%(52)	94.4%(34)	89.8%(53)	84.8%(39)
No less than once a week	6.9%(11)	9.2%(11)	0	0	37.5%(3)	27.3%(3)	5.9%(2)	8.0%(2)	1.8%(1)	5.6%(2)	8.5%(5)	8.7%(4)
Less than once a week	3.1%(5)	3.3%(4)	0	0	12.5%(1)	18.2%(2)	2.9%(1)	4.0%(1)	3.6%(2)	0	1.7%(1)	2.2%(1)
Have not listened within the last 4 weeks	0 .6%(1)	6.7%(8)	0	50.0%(1)	0	0	0	20.0%(5)	1.8%(1)	0	0	4.3%(2)

# Table 17: Sources of Information on STI/HIV

# Table 18: STI/HIV Prevalence among FSWs

	Tot	al					Age gro	oups				
Biomarker		di	<	19	1	9-24	25-	30	31-	39	40	+
Biomarker	Т	В	т	В	т	В	Т	В	Т	В	Т	В
Syphilis (RPR, TPHA with	(N=160)	(N=120)	(N= 3)	(N= 2)	(N= 8)	(N= 11)	(N= 34)	(N= 25)	(N= 56)	(N= 36)	(N= 59)	(N= 46)
Syphilis (RPR, TPHA with ELISA confirmation)	45.5% (71/156)	35.8% (43/120)	33.3% (1/3)	0(0/2)	25.0% (2/8)	0(0/11)	25.0% (8/32)	32.0% (8/25)	54.5% (30/55)	38.9% (14/36)	51.7% (30/58)	45.7% (21/46)
Gonorrhea	5.7% (9/157)	5.8% (7/120)	33.3% (1/3)	0(0/2)	12.5% (1/8)	0(0/11)	11.8% (4/34)	16.0% (4/25)	3.7% (2/54)	2.8% (1/36)	1.7% (1/58)	4.3% (2/46)
HIV (ELISA with Western Blot confirmation)	1.9% (3/154)	0.8% (1/119)	0(0/3)	0(0/2)	0(0/8)	9.1%(1/11)	0(0/29)	0(0/25)	1.8%(1/55)	0(0/35)	3.4%(2/59)	0(0/46)

# Table 19: Trafficking and Sex Work Abroad (only for Batumi)

	Total			Age groups		
Trafficking and Sex Work Abroad	TOTAL	<19	19-24	25-30	31-39	40+
	(N=120)	(N= 2)	(N= 11)	(N= 25)	(N= 36)	(N= 46)
Awareness on Trafficking	(120)	(2)	(11)	(25)	(36)	(46)
	90.0%(108)	100.0%(2)	90.9%(10)	96.0%(24)	97.2%(35)	80.4%(37)
E serve a de setes las filialitas	(108)	0	0	(24)	(35)	(37)
Ever experiencing trafficking	7.4%(8)	0	0	16.7%(4)	5.7%(2)	5.4%(2)
How many times have been trafficked abroad for sex work	(8)			(4)	(2)	(2)
Once	75.0%(6)			100.0%(4)	50.0%(1)	50.0%(1)
Twice	12.5%(1)			0	50.0%(1)	0
3-5 times	12.5%(1)			0	0	50.0%(1)
More than 5 times						
Working abroad for sex work voluntary	(120)	(2)	(11)	(25)	(36)	(46)
	33.3%(40)	0	36.4%(4)	44.0%(11)	36.1%(13)	26.1%(12)
Number of visits abroad for sex work during the last year	(40)		(4)	(11)	(13)	(12)
Mean	0.48		0	1.27	0.38	0
Number of visits abroad for sex work during the previous year	(40)		(4)	(11)	(13)	(12)
Mean	0.90		0.50	1.09	0.85	0.92
Number of visits abroad for sex work before the last two years	(40)		(4)	(11)	(13)	(12)
Mean	6.15		0.50	1.64	5.08	13.33
Primary motivation for sex work abroad	(40)		(4)	(11)	(13)	(12)
To earn more money	95.0%(38)		100.0%(4)	90.9%(10)	100.0%(13)	91.7%(11)
To live in better conditions	10.0%(4)		50.0%(2)	0	7.7%(1)	8.3%(1)
My colleagues were going and I followed them	5.0%(2)		0	9.1%(1)	0	8.3%(1)
Other						
Last country visited for sex work	(40)		(4)	(11)	(13)	(12)
Turkey	97.5%(39)		100.0%(4)	100.0%(11)	92.3%(12)	100.0%(12)
Greece	2.5%(1)		0	0	7.7%(1)	0
Having problem when crossing a border	(40)		(4)	(11)	(13)	(12)
Having problem when working abroad	(40)		(4)	(11)	(13)	(12)
	37.5%(15)		50.0%(2)	36.4%(4)	30.8%(4)	41.7%(5)
Having problem when working abroad and crossing a border	(40)		(4)	(11)	(13)	(12)
Kind of problems had when crossing the border						
Person who created the problems when crossing the border						
Who created problems doing sex work abroad	(15)		(2)	(4)	(4)	(5)
Client	6.7%(1)		0	0	0	20.0%(1)
Brothel owner						
Hotel owner	6.7%(1)		0	0	25.0%(1)	0
Bar owner						
Policeman	60.0%(9)		100.0%(2)	50.0%(2)	50.0%(2)	60.0%(3)

		Age groups					
Trafficking and Sex Work Abroad	Total	<19				40+	
	(N=120)	(N= 2)	(N= 11)	(N= 25)	(N= 36)	(N= 46)	
Pimp from Georgia (A person that arranged your trip and/or took you abroad)	33.3%(5)		0	75.0%(3)	25.0%(1)	20.0%(1)	
Other							
Kind of problems faced with client/brothel/hotel/bar owner/pimp from Georgia or	(15)		(2)	(4)	(4)	(5)	
policemen	. ,				( ' '	. ,	
Каре	6.7%(1)		0	25.0%(1)	0	0	
Physical violence	13.3%(2)		0	50.0%(2)	0	0	
Non-physical violence (threatening, blackmailing, cursing)	26.7%(4)		0	50.0%(2)	25.0%(1)	20.0%(1)	
Money extortion	40.0%(6)		0	75.0%(3)	25.0%(1)	40.0%(2)	
Asking for the free of change service	20.0%(3)		0	25.0%(1)	25.0%(1)	20.0%(1)	
Forced non-stop sex work	33.3%(5)		0	75.0%(3)	25.0%(1)	20.0%(1)	
Deportation	53.3%(8)		100.0%(2)	25.0%(1)	50.0%(2)	60.0%(3)	
If had problems while crossing the border or working abroad , would she still go there	(15)		(2)	(4)	(4)	(5)	
Yes	53.3%(8)		100.0%(2)	50.0%(2)	50.0%(2)	40.0%(2)	
Reasons for still going abroad for sex work despite problems	(8)		(2)	(2)	(2)	(2)	
To earn more money	100.0%(8)		100.0%(2)	100.0%(2)	100.0%(2)	100.0%(2)	
Type of a place of sex work abroad the last time	(40)		(4)	(11)	(13)	(12)	
Street	2.5%(1)		0	0	7.7%(1)	0	
Sauna							
Bar	12.5%(5)		25.0%(1)	0	23.1%(3)	8.3%(1)	
Restaurant	17.5%(7)		25.0%(1)	9.1%(1)	23.1%(3)	16.7%(2)	
Hotel	47.5%(19)		75.0%(3)	45.5%(5)	46.2%(6)	41.7%(5)	
Brothel	2.5%(1)		0	9.1%(1)	0	0	
Apartment	25.0%(10)		25.0%(1)	36.4%(4)	7.7%(1)	33.3%(4)	
Condom use with clients while working last time abroad	(40)		(4)	(11)	(13)	(12)	
Always	45.0%(18)		75.0%(3)	45.5%(5)	46.2%(6)	33.3%(4)	
Frequently	5.0%(2)		0	9.1%(1)	7.7%(1)	0	
Sometimes	35.0%(14)		25.0%(1)	45.5%(5)	30.8%(4)	33.3%(4)	
Never	15.0%(6)		0	0	15.4%(2)	33.3%(4)	
Alcohol consumption while working abroad	(40)		(4)	(11)	(13)	(12)	
Every day	20.0%(8)		50.0%(2)	27.3%(3)	15.4%(2)	8.3%(1)	
At least, once a week	10.0%(4)		0	9.1%(1)	15.4%(2)	8.3%(1)	
At least, once every two weeks	7.5%(3)		0	9.1%(1)	7.7%(1)	8.3%(1)	
Once a month	30.0%(12)		50.0%(2)	36.4%(4)	15.4%(2)	33.3%(4)	
No response	32.5%(13)		0	18.2%(2)	46.2%(6)	41.7%(5)	
Taking drugs while working abroad	(40)		(4)	(11)	(13)	(12)	
	7.5%(3)		0	27.3%(3)	0	0	
Type of drugs	(3)		0	(3)	0	0	
Marijuana	66.7%(2)			66.7%(2)			
Ecstasy	33.3%(1)			33.3%(1)			
Forms of taking drugs	(3)		0	(3)	0	0	

	Tetal			Age groups		
Trafficking and Sex Work Abroad	Total	<19	19-24	25-30	31-39	40+
	(N=120)	(N= 2)	(N= 11)	(N= 25)	(N= 36)	(N= 46)
Smoke	66.7%(2)			66.7%(2)		
Drink/Swallow	33.3%(1)			33.3%(1)		
How long stayed abroad for last visit	(40)		(4)	(11)	(13)	(12)
2 weeks	10.0%(4)		25.0%(1)	9.1%(1)	15.4%(2)	0
1 month	32.5%(13)		0	27.3%(3)	30.8%(4)	50.0%(6)
More than 1 month	50.0%(20)		50.0%(2)	63.6%(7)	46.2%(6)	41.7%(5)
When I earned a certain amount I needed						
One day	2.5%(1)		0	0	0	8.3%(1)
One week	2.5%(1)		0	0	7.7%(1)	0
2.5 years	2.5%(1)		25.0%(1)	0	0	0
Number of partners per day during the last visit abroad	(40)		(4)	(11)	(13)	(12)
Up to 5	52.5%(21)		25.0%(1)	36.4%(4)	61.5%(8)	66.7%(8)
5-10	30.0%(12)		25.0%(1)	27.3%(3)	30.8%(4)	33.3%(4)
10 and more	17.5%(7)		50.0%(2)	36.4%(4)	7.7%(1)	0
Had more clients per day abroad than in Georgia	(40)		(4)	(11)	(13)	(12)
	92.5%(37)		100.0%(4)	100.0%(11)	92.3%(12)	83.3%(10)
Fee per client abroad	(40)		(4)	(11)	(13)	(12)
Mean	95.92		70.00	90.00	102.92	102.50
Median Min-Max (35 – 160GEL)	100.00		65.00	85.00	100.00	100.00
Means of protection used abroad for HIV/STIs	(38)		(4)	(11)	(12)	(11)
Condom	84.2%(32)		100.0%(4)	81.8%(9)	91.7%(11)	72.7%(8)
Prophylactic injection (An injection that you are told to prevent STIs and HIV)	55.3%(21)		50.0%(2)	54.5%(6)	66.7%(8)	45.5%(5)
Tampon	2.6%(1)		0	0	8.3%(1)	0
Frequency of prophylactic medicine injections abroad	(21)		(2)	(6)	(8)	(5)
Once in 2 weeks	33.3%(7)		50.0%(1)	16.7%(1)	25.0%(2)	60.0%(3)
Once in a month	42.9%(9)		50.0%(1)	33.3%(2)	50.0%(4)	40.0%(2)
Once in 3 months	14.3%(3)		0	33.3%(2)	12.5%91)	0
Once in 6 months	9.5%(2)		0	16.7%(1)	12.5%(1)	0
Access to HIV/STI testing services abroad	(40)		(4)	(11)	(13)	(12)
	25.0%(10)		0	9.1%(1)	30.8%(4)	41.7%(5)
Ever using HIV/STI testing services abroad	(10)		0	(1)	(4)	(5)
	90.0%(9)			100.0%(1)	75.0%(3)	100.0%(5)

## **Annex 2: Survey questionnaire**

Investing in our future The Global Fund To Fight AIDS, Tuberculosis and Malaria





The project "Expanding HIV/AIDS prevention, Treatment, Care and Support Activities" (project N-GEO-607-G06-H)

**Component I** 

"Establishment of evidence base for national HIV/AIDS program by strengthening of HIV/AIDS surveillance system in the country"

The project is funded by the Global Fund to fight AIDS, TB and Malaria

Questionnaire ID Number \_\_\_\_\_



Questionnaire is Coded

Questionnaire isWord Processed

# Behavior and Biomarker Survey (BSS) among Female Commercial Sex Workers in Georgia

Organization "Tanadgoma"

Interviewer: please identify interview conduction address and respondent's ID code.



Selection Point

Code of strata/identification

Interviewer's Code

Introduction: "My name is \_\_\_\_\_\_With financial support of the Global Fund a survey is carried out in order to explore existing situation. I am going to ask you several questions. Your answers are strictly confidential. The questionnaire will not show your name and will never be referred to in connection with the information that you will share with us. You are not obliged to answer all my questions, and whenever you wish you may refuse to answer my questions. You may finish the interview at any time per you desire. However, we would love to note that your answers would help us better understand what people think, say and do in view of certain types of behavior. We would highly appreciate your input to this study."

(Interviewer's signature cer	tifying that the respor	ndent has verbally ag	greed to the interview)

	Respondent I	Respondent II	Respondent III
Date			
Interviewer			
Result			

Result Codes: Completed – 1; Partially Completed – 2; Previously Interviewed – 3; Refusal – 4; Other – 5.

**Q1.** Date and time of interview: /\_\_\_\_/day /\_\_\_\_/hour /\_\_\_\_/ minute

Signature\_\_\_\_\_ Date\_\_\_\_

# Female Commercial Sex Workers Questionnaire:

1. Did you ever participated in the survey that was conducted by Tanadgoma and that implied filling out the questionnaire and providing blood and urine samples for the testing?

Yes	1 <b>(Continue)</b>
No	2 <b>(Go to A1)</b>
Don't remember	3 <b>(Go to A1)</b>
No response	99 <b>(Go to A1)</b>

2. If you participated in the survey carried out by Tanadgoma, can you recall in which year it was?

	Yes <b>(Continue)</b>	No <b>(Go to A1)</b>	Don't remember <b>(Go to A1)</b>	No response (Go to A1)
1. In 2004	1	2	3	99
2. ln 2006	1	2	3	99

# 3. If you did participate in that survey, did you come to get results of your tests then?

	Yes <b>(Go to</b> A1)	No <b>(Continue)</b>	Don't remember <b>(Go to A1)</b>	No response <b>(Go to A1)</b>
1. ln 2004	1	2	3	99
2. In 2006	1	2	3	99
77. For the respondents who could not recall the year, mark the answer here			77	

I did not make the	99
analysis	00

# 4. If you did not come to get your results, what was the reason for that? (Don't read) (Multiple answer)

l forgot	1		
I was not interested in the results	2		
I was afraid of the positive results	3		
I could not manage to come	4		
In my opinion, I did not need			
testing at all (I was healthy I had no symptoms)			
Don't know	88		
Other (please specify)			
No response	99		

## A. SOCIO-DEMOGRAPHIC CHARACTERISTICS

#### A1. How old are you?

/\_\_\_\_/ (please specify an exact age in years) No response 99

#### A2. Please specify your date of birth (Compare with A1, if necessary!)

/ / / / Day Month Year Don't know 88 No response 99

## A3. What education have you received? (Read)

No education	1
Primary (1-4 grades)	2
Secondary (school, vocational/technical school)	3
Incomplete higher	4
Higher	5
No response	99

## A4. How many years did you study in total?

/\_\_\_\_/ (please specify the number of completed years) No response 99

# A5. In what town or village were you born?

/\_\_\_\_\_/ (open question/please specify)Don't know88No response99

## A6. How long have you lived in Batumi?

Number of years /\_\_\_\_\_ / (if le`ss than one year, write down 0) No response 99
# A6.1. Are you an IDP?

Yes 1 No 2 No response 99

A7. Have you been involved in that business (commercial sex) in any other city? If yes, how long?

Yes	1
Never worked at any other place	2 <b>(Go to A8)</b>
No response	99 <b>(Go to A8)</b>

A7.1. (Write down mentioned town/towns and ask for each of them) How long? (Write down weeks, months and years in the corresponding columns)

Town	Duration of work			Don't remember	
TOWIT	Week	Month	Year	99	
1.				99	
2.				99	
3.				99	
4.				99	

# A8. What's your nationality? (Mark just one option)

Georgian	1
Russian	2
Armenian	3
Jewess	4
Azeri	5
Ukrainian	6
Kurdish	7
Ossetian	8
Greek	9
Other (please specify)	
Don't know	88
No response	99

A9. How frequently did you drink during the last month including beer and other low-alcohol beverages? (Interviewer, read the options, only one answer) Tell me, did you drink everyday, once or twice a week, once or twice in two weeks, or once or twice a month?

Everyday	1
At least, once a week	2
At least, once in two weeks	3
Once a month	4
Don't know	88
No response	99
I did not drink (Don't read)	8

A10. Some people have tried various drugs. If you have done this, which one have you tried? (Interviewer, read the list. For each drug use relevant option)

	A10	A11						
Mult ans.	Drugs	Inhale/ Breath in	Inject	Smoke	Drink/ Swallow	Other	Don't know	No resp
1	Heroin-(inhale, inject)	1	2	3	4	5	8	9
2	Opium-(swallow, inject)	1	2	3	4	5	8	9
3	Poppy-seed-(inject)	1	2	3	4	5	8	9
4	Subutex-(drink, inject)	1	2	3	4	5	8	9
5	Inhalants (e.g. glue)- (breath in)	1	2	3	4	5	8	9
6	Marijuana-(smoke)	1	2	3	4	5	8	9
7	Extasy-(drink)	1	2	3	4	5	8	9
8	Cocaine-(inhale, inject)	1	2	3	4	5	8	9
9	Sedatives/hypnotics- (drink, inject)	1	2	3	4	5	8	9
10	Other (Specify)	1	2	3	4	5	8	9
11	Has not tried							
88	Don't know							
99	No response							

A11. Ask for the mentioned drugs – Please tell me, how did you take this drug: did you inject, smoke, inhale, drink, breath in or how? (Don't help; multiple answer)

# B. Marriage, Family and Work

# **B1. What is you current marital status?** (Read)

- a. Married
- b. Divorced/separated from the husband
- c. Widow
- d. Never been married (Go to B3b)
- e. Other (please specify)\_\_\_

# B2. How old were you when you got married for the first time?

/\_\_\_\_/ **(please specify the age)** Don't know 88 No response 99

B3. Are you now living with a permanent partner/lover/man? (Interviewer: please define a permanent sexual partner: A husband/lover/boyfriend/person, with whom a sex worker cohabitates or has regular sexual contact without exchange of money.) (Don't read out the options. Match response with any of the options below)

B3a) Options for married (Those who answered 1 in question B1)		Go to B4
Currently married, having sex with husband	1	

Currently married, not having sex with a spouse. Having sex with another partner/lover/boyfriend/man	2	
Currently married, not having sex with a husband or partner	3	
Married, have both a husband and a lover/ boyfriend/man	4	
No response	99	
Other (Specify)		
B3b) Options for married divorced (Those who answered 2, 3 or 4 in question		
B3b) Options for married divorced (Those who answered 2, 3 or 4 in qu	lestion	
B3b) Options for married divorced (Those who answered 2, 3 or 4 in qu B1)	lestion	
	<b>s</b>	Go to B5
B1)	1	Go to B5
B1) Not married, but having sex with a partner/lover/man	5	Go to B5

B4. Does your spouse/lover/boyfriend have other partners/partner/lover/wife, or not?

Yes	1
No	2
Don't know	88
No response	99

B5. How old were you when first received money in exchange of sexual intercourse?

// (plea	ase specify the age in full years)
Don't know	88
No response	99

B6. Do you have another source of income besides this business (commercial sex work)?

Yes	1	Continue
No	2	Go to B8
No response	99	GU 10 B8

3. \_\_\_\_\_

B7. What is this other work? Do you have another job? Another? (Open ended question, write down the answers. May have several answers)

1	 	 	
2			

B8. Do you provide financial support to your children now? (Ask once more) Parents or other relatives?

	How many	
	(write down the number)	
1. Children		

2. Parents	
3. Relatives	
4. Other <b>(specify)</b>	
6. Nobody	77
7. No response	99

# C. Sexual Life Record: Number and Type of Partners

C1. With your permission, now we'll ask you several questions about your partners. How old were you when you had the first sexual intercourse? (I mean not for money, but just regular sexual intercourse)

/\_\_\_\_/ (please specify the age) Don't remember 88 No response 99

- C2. Over the last 7 days (a week) how many:
- **C2.1** Paying clients did you have? With how many partners did you have sex for money? (If the respondent fails to recall the exact number ask her to give you a rough number)
- **C2.2** Permanent clients did you have? Clients that often use service of one particular sex worker. (If the respondent fails to recall the exact number ask her to give you a rough number)
- **C2.3** Permanent partners did you have husband, lover, boyfriend? (*If the respondent fails to recall the exact number ask her to give you a rough number*).

Attention: you are asking about the number of partners and not number of intercourses!!! Place answers in the relevant columns below.

Interviewer: If the respondent does not have permanent client or permanent partner, omit the corresponding sections below.

	C2.1 Number of paying clients	C2.2 Number of permanent clients	C2.3 Number of permanent partners
Number			
Don't know	88	88	88
No response	99	99	99

C3. Over the last 7 days (a week) how many different partners did you have? Include husband, lover, permanent client.

(Note: compare total number of partners in C2.1 and Q C2.2 and C2.3 to make sure that numbers match.)

/\_\_\_\_\_/ (Please specify the number of partners over the last 7 days)

Don't know	88
No response	99

C4. From all the different types of clients, which are less likely to use condoms? (Read out/One answer)

Soldiers	1
Sailors	2
Border guards	3
Custom officials	4
General clients	5
The same	6
Don't know	8
No response	99

# D. Commercial Sex Work History: Paying Clients

#### D1. How many clients did you have during your last business day?

/\_\_\_\_/ (Please specify the number of clients) Don't know 88 No response 99

#### D2. How much did your last client pay? (Please indicate the amount in Lari)

// Lari	
Don't know	88
No response	99

### D3. Did you use condoms with your last client?

Yes	1	
No	2	
Don't know	88	Go to D5
No response	99	

# D4. Who offered to use a condom? (*Please read out the options, and circle one coded response.*)

My initiative	1	
Partner's initiative	2	
Mutual initiative	3	Go to D6
Don't know	88	
No response	99	

# D5. Why didn't you and your partner use the condom that time? (Don't read out the options. Circle the corresponding response for each option.)

Reasons	Yes	No
1. Didn't have it	1	2
2. Too expensive	1	2
3. Partner refused	1	2

4. Don't like it	1	2
5. Take contraception	1	2
6. Didn't think needed	1	2
7. He looked healthy	1	2
8. Didn't think of it	1	2
9. Other (Specify)	1	2
Don't know	8	8
No response	9	9

D6. How frequently did you use condoms with all your clients over the last 30 days (1 month)? (*Read out the options/one response*)

Always	1
Often	2
Sometimes	3
Never	4
Don't know	88
No response	99

E. Commercial Sex Work History: Permanent Clients

E1. How many permanent clients do you have? (Define: Permanent client is a client who often uses your sexual service)

/\_\_\_\_/ (Please specify the number of clients) Don't know 88 No response 99

E2. Recall your very last permanent client with whom you had sexual intercourse. About how many times did you have a sexual intercourse with him over the last 30 days (1 month)?

	30 days
Did not have sexual intercourse	1
Up to 5	2
5-10	3
10-15	4
15 and more	5
Don't know/Don't remember	88
No response	99

- E3. We spoke about your last client and about using condom with him. Tell me, whether he (your last client) was your permanent client or not?
  - 1. He was permanent client
  - 2. He was not permanent client (Go to E7)
- E4. Last time when you had sexual intercourse with the permanent client, did you use condom?

Yes	1	
No	2	
Don't know	88	Go to E6
No response	99	

E5. Who offered to use a condom? (Read. Circle one coded response.)

My initiative	1	
Client's initiative	2	
Mutual initiative	3	Go to E7
Don't know	88	
No response	99	

E6. Why didn't you and your permanent client use the condom that time? (Don't read out the options. Circle the corresponding response for each option)

Reasons	Yes	No
1. Didn't have it	1	2
2. Too expensive	1	2
3. Partner refused	1	2
4. Don't like it	1	2
5. Take contraception	1	2
6. Didn't think needed	1	2
7. He looked healthy	1	2
8. Didn't think of it	1	2
9. Other (specify)	1	2
Don't know	8	8
No response	9	9

E7. How frequently did you use condoms with your permanent client(s) over the last 12 months (1 year)? (Interviewer, read the options to the respondent)

Always	1
Often	2
Sometimes	3
Never	4
Don't know	88
No response	99

# F. Commercial Sex Work History: Permanent Partners

F1. How many permanent partners do you have? (Define: Permanent partner is husband/lover/boyfriend/person, with whom the sex worker cohabitates or has regular sexual relations without exchange of money.)

/\_\_\_\_/ (Please specify the number of partners) (If the respondent does not have a permanent partner, go to section G) Don't know 88 No response 99 (If the respondent has more than one permanent partner, concentrate on the one with whom relationship is longer and more trustful.)

F2. About how many times did you have a sexual intercourse with your permanent partner over the last 30 days (1 month) and the last 12 months (1 year)? (For the option of "12 months" read out the responses from the bottom "15 and more". If the respondent says "less" than read out the second from the bottom, and so forth.)

	30 days	1 month
Did not have sexual intercourse	1	1
Up to 5	2	2
5-10	3	3
10-15	4	4
15 and more	5	5
Don't know/Don't remember	88	88
No response	99	99

F3. Last time when you had sexual intercourse with the permanent partner, did you use condom?

Yes	1	
No	2	
Don't know	88	Go to F5
No response	99	

F4. Who offered to use a condom? (Circle one coded response.)

My initiative	1	
Client's initiative	2	
Mutual initiative	3	Go to F6
Don't know	88	
No response	99	

**F5.** Why didn't you and your permanent partner use the condom that time? (*Don't read out the options. Circle the corresponding code for each response.*)

Reasons	Yes	No
1. Didn't have it	1	2
2. Too expensive	1	2
3. Partner refused	1	2
4. Don't like it	1	2
5. Take contraception	1	2
6. Didn't think needed	1	2
7. He looked healthy	1	2
8. Didn't think of it	1	2
9. I trusted him	1	2
10. Other (specify)	1	2
Don't know	8	8
No response	9	9

F6. How frequently did you use condoms with your permanent partner over the last 12 months (1 year)? (Interviewer, read the options to the respondent)

Always	1 <b>(Go t</b> e	o section G)
Often	2 <b>(Go t</b> e	o F7)
Sometimes	3 <b>(Go t</b> e	o F7)
Never	4	
Don't know	88	(Go to section G)
No response	99	

F7. In which cases did you use condom with your permanent partner? (Don't read out. Match the responses with the coded answers. Use "Other" if needed.)

When my partner asked me to use it	
When I doubted that I am infected	2
When I doubted that my partner was infected	3
When I had had abortion short time before	
When I had menstruation (period)	5
Other(Write down)	6
Don't know	
No response	99

# G. Condoms

Note: Ask G1 only if the condoms are not used. (Compare with D3, D6, E4, E7, F3 and F6.

Respondent should not be using condoms in any of these questions.) Otherwise, go to G2.

G1. Have you ever used condoms with any of your partners? (Please note that the respondent may not have used a condom in the cases described in Parts D, E and F, but has used it in other periods)

Yes	1
No	2
Don't know	88
No response	99

G2. Do you know of a person or place where you can get, or buy condoms?

Yes	1	Continue
No	2	Go to G5
No response	99	60 10 65

G3. Whom do you know or where can you get or buy condoms? (Do not read out the options. Circle all the relevant coded responses) Where else?

Shop	1
Drugstore	2
Market	3
"Tanadgoma"	4
Girls with whom you work	5

Other	6
No response	99

G4. Have you been given condoms during the last year? (by social workers or at any medical facility)

Yes	1
No	2
Don't know	88
No response	99

G5. Imagine you don't have a condom with you, how long would you need to get/buy from your work place to where it is sold/available?Tell me, would you need . . . (Interviewer, read the options to the respondent. If she says "at any place" ask "How many minutes would you still need?")

Up to 5 minutes		1
5-15 minutes		2
15-30 minutes		3
30 minutes or more	<b>!</b>	4
More than a day		5
Don't know	88	
No response		99

G6. How many condoms do you now have with you? (Check the number of condoms)

/\_\_\_\_/ (Indicate the number of condoms) No response 99

G6a. Beside this, how many condoms do you have now at the place of your work?

/\_\_\_\_/ (Indicate the number of condoms)

No response 99

We try to find out, whether you face any kind of violence during your work. We would like to ask you about three types of violence: a) Forced sexual intercourses and rape; b) Physical violence/beating and other that does not imply sexual intercourse; c) Forced sexual intercourse through blackmailing, or some other kind of threatening.

Repeat the three types of violence. Tell the respondent: now we are speaking only about the physical violence.

G7. During last year have you ever been a victim of the physical violence? (Beating, smothering, etc.)

Yes	1	Continue
No	2	Go to G9
No response	99	601069

G8. Who made physical violence against you? (Don't read out. Match the responses with the coded responses.)

Client	1
Lover (boyfriend)	2

Husband	3
Pimp	4
Policeman	5
Stranger	6
Other	7
No response	99

Tell the respondent: now we will speak only about forced sexual intercourse through blackmailing, or some other kind of threatening.

# G9. During last year have you been forced to have sexual intercourse through blackmailing or threatening?

Yes	1	Continue
No	2	ao to 611
No response	9	go to G11

# G10. Who forced you to have sexual intercourse through blackmailing or threatening? (Don't read out. Match the responses with the coded responses.)

Client	1
Lover (boyfriend)	2
Husband	3
Pimp	4
Policeman	5
Stranger	6
Other	7
No response	99

Tell the respondent: now we will speak only about forced sexual intercourse and rape.

# G11. During last year have you been the victim of rape?

Yes	1	Continue
No	2	Go to H1
No response	99	60 10 HI

# G12. Who raped you? (Don't read out. Match the responses with the coded responses.)

Client	1
Lover (boyfriend)	2
Husband	3
Pimp	4
Policeman	5
Stranger	6
Other	7
No response	99

# **H. Sexually Transmitted Infections**

H1. Have you heard of diseases that are transmitted sexually?

Yes	1	
No	2	Go to H3
No response	99	0010115

H2.1 Can you describe STI symptoms that are observed among women? How can a woman guess that she has some disease? What might bother a person for her to think that she might be infected with some disease? . . . Any other symptoms? (Interviewer, don't read options. Multiple responses. Circle the closest matching responses to the codes)

Vaginal release	1
Rash on genitals, skin or mucus membranes	2
Reddening in the genital area	3
Burning during urination	4
Itching in the genital area	5
Lower abdominal ache	6
No response	99
Other (specify) / /	

H2. 2 Can you describe STI symptoms that are observed among men? How can a man guess that he has some disease? What might bother a person for him to think that he might be infected with some disease? . . . Any other symptoms?

(Interviewer, don't read options. Multiple responses. Circle the closest matching responses to the codes)

Genital release	1
Rash on genitals, skin or mucus membranes	2
Reddening in the genital area	3
Burning during urination	4
Itching in the genital area	5
Lower abdominal ache	6
No response	99
Other (specify) / /	

H3. Have you observed vaginal release during the last 12 months (1 year)?

1
2
88
99

# H4. Have you observed vaginal ulcer/boil over the last 12 months (1 year)?

Yes	1
No	2
Don't know	88
No response	99

Note: Module I should be filled only for those respondents who have suffered vaginal release or ulcer/boil over the last 12 months. (Compare with H3 and H4). Otherwise go to Module J.

# I. STI Treatment Seeking Behavior

11. What did you do when you had vaginal release, or ulcer/boil last time? (*Read out the options. Circle one for each question*)

Questions	Yes	No	NR
1. Consulted or received a treatment at the state-owned health clinic or hospital?	1	2	9
2. Consulted or received a treatment at a private health clinic or hospital?	1	2	9
3. Consulted or received a treatment at a drugstore	1	2	9
4. Consulted or received a treatment from a traditional healer or a wise man?	1	2	9
5. Applied a self-treatment?	1	2	9
6. Told your sexual partner about your release or STI?	1	2	9
7. Stopped intercourses when the symptoms appeared?	1	2	9
8. Did you use the condoms during the symptom period?	1	2	9

# J. HIV/AIDS - Knowledge, Opinion, Attitude

J1. Have you heard of HIV or AIDS? (Please explain: HIV is a human immunodeficiency virus which causes AIDS. Make sure that the respondent understood what HIV is. You may use additional definitions too.)

Yes	1	
No	2	Go to K1
No response	99	60 to K1

J2. I don't ask you the name, but do you know any person who has been infected, ill with, or has died of AIDS?

Yes	1	
No	2	
Don't know	88	Go to J4
No response	99	

J3. Now please tell me, do you have a close relative or friend who has been infected, ill with, or has died of AIDS?

Yes, a friend	1
Yes, a relative	2
No	3
No response	99

J4. Please give me your opinion regarding the following: (Please read out all options and circle the relevant answer.)

Assertions	Yes	No	DK	NR
1. Can one reduce the HIV risk if one properly uses condoms during every sexual contact?	1	2	88	99
2. Can one get HIV as a result of a mosquito's bite?	1	2	88	99
3. Do you believe that one may protect oneself from HIV/AIDS by having one reliable sexual partner?	1	2	88	99
4. Do you believe that one can protect oneself from HIV/AIDS by keeping away from (avoiding) sexual contact?	1	2	88	99
5. Do you believe that one can get HIV/AIDS by taking food or drink that contains someone else's saliva?	1	2	88	99
6. Do you believe that one may be infected with HIV/AIDS by using a needle/syringe already used by someone else?	1	2	88	99
7. Do you believe that a person who looks healthy can be infected with HIV, which causes AIDS?	1	2	88	99

J5. Do you believe that an HIV/AIDS-infected pregnant woman can transfer virus to fetus?

Yes	1	
No	2	
Don't know	88	Go to J7
No response	99	

J6. What do you believe a pregnant woman might do reduce the risk of transferring the infection to fetus? (Don't read out the options to the respondent. Multiple answers are acceptable)

Take medication (antiretroviral	ls)	1
Cesarean section		2
No breastfeeding		3
Other	(write down)	4
Don't know		88
No response		99

J7. Can a mother transfer the HIV/AIDS to her baby through breastfeeding?

Yes	1
No	2
Don't know	88
No response	99

J8. Is it possible for Female Sex Workers take confidential HIV/AIDS test to see if one is infected? ("Confidential" means that nobody will know about the test results without one's permission.)

Yes	1
No	2
Don't know	88

No response 99

# J9. I don't want to know about the test results but have you ever taken an HIV test?

Yes	1	
No	2	
Don't know	88	Go to J14
No response	99	

# J10. Was it your initiative to take the HIV/AIDS test or you had to?

lt was voluntary	1
I had to	2
No response	99

# J11. Don't tell me the test result, but do you know it?

Yes	1
No	2
No response	99

# J12. If yes, did you tell anybody your test result?

Yes	1
No	2 <b>(Go to J14)</b>
Don't remember	3
No response	99

# J13. If you told anybody your test result, please tell me, whom did you tell? (*Mark all mentioned responses*)

Client/clients	1
Permanent client/clients	2
Permanent partner/partners	3
Colleague sex worker	4
Family members	5
Relatives	6
Friends	7
Nobody	8
Other	9
No response	99

# J14. If you have not taken HIV test, what was the reason for that? (Interviewer:

#### Multiple response possible)

I did not know that testing was possible	1
I don't need, I know that I am healthy	2
This idea never came to my mind	3
I am afraid to know the result, it's better not	4
to know	
I don't want anyone to know my result	5
Did not think about this	6
No response	99
Other (specify) / /	

# J15. If you were told that you are HIV positive, whom would you tell about this?

(Mark all mentioned responses)	Yes	No
Nobody	1	2
Client	1	2
Permanent client	1	2
Permanent partner	1	2
Family member	1	2
Relative	1	2
Colleague	1	2
Friend	1	2
Other <b>(Specify)</b>	1	2
Don't know	88	3
No response	99	Ð

# J16. When did you take the last HIV test?

Some time last year	1
1-2 years ago	2
2-4 years ago	3
More than 4 years ago	4
Don't know	88
No response	99

# J17. Don't tell me the result but do you know it?

Yes	1
No	2
No response	99

# J18. Now please tell me: (Read out the list and circle one answer for each question)

Statements	Yes	No	DK	NR
1. Would you have a meal with a person who has HIV or AIDS?	1	2	88	99
2. If your relative man were infected with HIV would you take care of him at your place?	1	2	88	99
3. If a student is HIV infected, but does not have AIDS, may he/she be permitted to continue studying?	1	2	88	99
4. If your relative woman were infected with HIV would you take care of her at your place?	1	2	88	99
5. If a teacher is HIV infected, but does not have AIDS, may he/she be permitted to continue teaching at school?	1	2	88	99
6. If acquainted with you food salesman is infected with HIV, will you buy food from him/her?	1	2	88	99
7. If the member of your family were HIV infected would you like it to keep this in	1	2	88	99

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#### K. Trafficking (For Batumi only)

# K1. Have you ever heard about sex trafficking? (Interviewer, please provide the definition: Trafficking is when people are taken to work, often abroad, by force or fraud, bereaved of passport and forced to do sex work)

Yes	1
No	2
Don't know	8
No response	99

K2. Have you ever been a victim of sex trafficking by being taken abroad by force, fraud or coercion to provide sexual services?

Yes	1
No	2 (Go to section L)
No response	99 (Go to section L)

#### K3. How many times have you been trafficked abroad for sex work?

Once	1
Twice	2
3-5 times	3
More than 5 times	4
Other (please specify)	5
Don't know/don't remember	8
No response	99

#### L. Working Abroad (For Batumi only)

The following questions are regarding going abroad to do sex work on voluntary basis, willingly.

L1. Have you willingly ever been abroad for sex work?

Yes 1 No 2 (*Go to section M*) No response 99

- L2. During the last 1 year or 12 months how many times did you go abroad for sex work?
- L2.1 If you recall the year previous to the last one, how many times did you go abroad for sex work?
- L2.2 Not taking into consideration these two years, before that how many times have you been abroad for sex work?

<u>For all the questions mark the number of visits in the corresponding columns.</u> If the respondent says that in any time period she was not abroad for work, then mark "0".

	L2.	L2.1	L2.2
Number of visits			
Don't know/don't remember	88	88	88
No response	99	99	99

# L3. Last time when you went abroad for sex work, what was your primary motivation for doing so? (Mark all that apply)

	Yes	No
To earn more money	1	2
To live in better conditions	1	2
My colleagues were going and I followed them	1	2
Other (please specify)	1	2
No response	99	Ð

# L4. Your last trip abroad, to which country did you go for sex work?

Greece		2
Ukraine		3
Russia		4
Other	_ (please specify)	5
No response		99

# L5. Did you have any problems while crossing the border or while doing sex work abroad?

Yes, while crossing the border	1 ( <b>Go to L7</b> )
Yes, while doing sex work abroad	2 ( <b>Go to L9</b> )
Yes, both	3 ( <b>continue</b> )
No	4 ( <b>Go to L13</b> )
No response	99

L6. What kind of problems did you face while crossing the border? (Mark all that apply)

	Yes	No
Money extortion	1	2
Free of charge sex service	1	2
Other ( <i>please specify</i> )	1	2
No response	99	

### L7. Who created these problems for you? (Mark all that apply)

	Yes	No
Georgian border guard	1	2
Georgian customs worker	1	2
Foreign border guard	1	2
Foreign customs worker	1	2
Other (please specify)	1	2
No response	99	

L8. With whom did you have problems while doing sex work abroad? (Mark all that apply)

	Yes	No
Client	1	2
Brothel owner	1	2
Hotel owner	1	2
Bar owner	1	2
Policeman	1	2
Pimp from Georgia (A person		
that arranged your trip		
and/or took you abroad)	1	2
Other (please specify)	1	2
No response	99	

L9. What kind of problems do you face with client/brothel/hotel/bar owner/pimp from Georgia or policemen? (Mark all that apply)

	Yes	No
Rape	1	2
Physical violence (beating)	1	2
Non-physical violence (threatening, blackmailing)	1	2
Money extortion	1	2
Asking for the free of charge service	1	2
Forced non-stop sex work	1	2
Other (please specify)	1	2
No response		99

L10. If you had problems while crossing the border or working abroad, would you still go there?

Yes	1 ( <b>Continue</b> )
No	2 ( <b>Go to L13</b> )
Don't know	8 ( <b>Go to L13</b> )
No response	99 ( <b>Go to L13</b> )

# L11. If yes, why would you go?

\_\_\_\_\_ (open question/please specify)
No response 99

# L12. In what type of place did you work your last time abroad? (Mark all that apply)

	Yes	No
Street	1	2
Sauna	1	2
Bar	1	2
Restaurant	1	2
Hotel	1	2
Brothel	1	2
Other (please specify)	1	2
No response	9	9

# L13. How often did you use condom with clients while last time abroad?

Always	1
Frequently	2
Sometimes	3
Never	4
Don't know	8
No response	99

### L14. How often do you consume alcohol while abroad?

Every day	1
At least, once a week	2
At least, once every two weeks	3
Once a month	4
Don't know	8
No response	99

# L15. Have you ever taken drugs while last time abroad?

Yes	1
No	2 ( <b>Go to L17</b> )
No response	99

- L16.1 Which ones did you try? Don't count those taken for the medical and treatment purposes. (*Interviewer, read the list. For each drug use relevant option*).
- L16.2 Ask for the mentioned drugs Please tell me, how did you take this drug: did you inject, smoke, inhale, drink, breath in or how? (Don't help; multiple answer)

	L16.1	L16.2						
Mult ans.	Drugs	Inhale/ Breath in	Inject	Smoke	Drink/ Swallow	Other	Don't know	No resp
1	Heroin-(inhale, inject)	1	2	3	4	5	8	9
2	Opium-(swallow, inject)	1	2	3	4	5	8	9
3	Poppy-seed-(inject)	1	2	3	4	5	8	9
4	Subutex-(drink, inject)	1	2	3	4	5	8	9
5	Inhalants (e.g. glue)- (breath in)	1	2	3	4	5	8	9
6	Marijuana-(smoke)	1	2	3	4	5	8	9
7	Extasy-(drink)	1	2	3	4	5	8	9
8	Cocaine-(inhale, inject)	1	2	3	4	5	8	9
9	Sedatives/hypnotics- (drink, inject)	1	2	3	4	5	8	9
10	Other (Specify)	1	2	3	4	5	8	9
11	Has not tried							
88	Don't know							
99	No response							

L17. Last time when you went abroad for sex work, how long did you stay there? (*Don't read*)

2 weeks	1
1 month	2
More than 1 month	3
When I earned a certain amount I needed	4
Other (please specify)	5
Don't know	8
No response	9

# L18. About how many clients did you have per day (on average) during your last visit abroad?

Up to 5	1
5-10	2
10 and more	3
Don't know	8
No response	99

L19. If we consider your general working day abroad, is the number of clients you have per day (average) abroad generally more than in Georgia?

Yes	1
No	2
The same	3
Don't know	8
No response	9

# L20. About how much do you receive per client abroad?

// (Please indicate the amount in Lari)			
Don't know:	88		
No response	99		

# L21. What means of protection against STIs and HIV/AIDS did you use while working abroad? (Mark all that apply)

	Yes	No
Condom	1 (Go to L23)	2
Prophylactic injection (An injection		
that you are told to prevent STIs and HIV)	1(continue)	2
Contraceptives (e.g. vaginal pills, etc)	1 (Go to L23)	2
Other (please specify)	1 (Go to 23)	2
Don't know	8 (Go to 23)	
No response	99 (Go to 23)	

# L22. How often did you use those injections?

Once in two weeks	1
Once in a month	2
Once in three months	3
Once in six months	4
Other (please specify)	5
Don't know/don't remember	8
No response	99

### L23. Are STI/HIV testing services provided abroad?

Yes	1	
No	2	
Don't know	88	(Go to section M)
No response	99	

### L24. If so, have you ever used them?

Yes	1
No	2
No response	99

### M. SOURCES OF INFORMATION ON STI/HIV

M1. Could you remember, where from do you get information about STI/HIV? (Don't read) Could you remember some other source of information? (Multiple answer)

TV/Radio	1
Newspapers	2
Friends	3
Clients	4
Family members	5
Social workers	6
Other	7
No response	99
I have never heard anything about STI/HIV	77 (Go to section N)

# M2. Which source of information do you consider as most reliable? (Multiple answer)

TV	1
Radio	2
Newspapers, magazines	3
Special booklets	4
Friends, relatives	5
Other sex workers	6
Representatives of NGOs	7
Medical workers	8
No response	99
Other (specify) / /	

M3. Don't you remember the ways of protecting from STI/HIV? I have in mind those means that provide the protection from HIV. What else do you recall? Which else?

(Don't prompt, circle all the answers given by the respondent)			
Condom use	1		
Avoiding sexual contacts	2		
Contact with one devoted partner	3		
Safe forms of sexual contact			
(masturbation, non-penetrative contact)	4		
Don't know	88		

No response 99 (*Define:* Non-penetrative contact is a sexual contact when the male penis does not penetrate into the female body. Masturbation is getting sexual pleasure using your own hands.)

M4. What do you think can a person get STI or HIV/AIDS if she/he has the first blood group?

Yes	1
No	2
Don't know	88
No response	99

- N. Media-Communication
- N1. Within the last 4 weeks how frequently did you listen to radio? (Interviewer, read the options to the respondent. One response. Mark the responses in the table below.)
- N2. Within the last 4 weeks how frequently did you watch TV? (Interviewer, read the options to the respondent. One response. Mark the responses in the table below.)

	N1. Radio	N2. TV
Everyday	1	1
No less than once a week	2	2
Less than once a week	3	3
Never listened within the last 4 weeks	4	4
Don't know	88	88
No response	99	99

Q2. You have been very helpful. After finishing this present study our organization will plan projects that will be beneficial for all. If in several months I need to take another interview from you, would you make yourself available?

Yes1No2Don't know /We'll see88Interviewer, thank the respondent for cooperation and say good-bye.

### Q3. During the interview the respondent was:

Interested	1			
Calm	2			
Indifferent	3			
Agitated	4			
Uninterested	5			
Time when interview was concluded //				

The questionnaire is kept till completion of the project.

# Q4. Quality control on the interview was carried out by

 1.
 Position

 2.
 Organization

Quality control group member has used (completed) quality control card Signature \_\_\_\_\_