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Patterns of migration/mobility and HIV risk among female sex workers: Maharashtra 2007-08

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**PATTERNS OF
MIGRATION/MOBILITY
AND HIV RISK AMONG
FEMALE SEX WORKERS**

**Maharashtra
2007–08**

The migration/mobility of female sex workers in search of more clients and more money has been recognized as a challenge in HIV prevention interventions in India. Little is known, however, about the patterns of migration/mobility of female sex workers in India, the facilitators and drivers of their mobility, and the implications of such mobility for the HIV pandemic. This lack of understanding has been an impediment in planning effective HIV-prevention programmes for these vulnerable populations.

A research study designed to increase understanding of the patterns and factors related to migration and mobility of at-risk populations of sex workers and male migrant workers and to examine the links of migration and mobility with HIV risk was conducted in four states of India experiencing high HIV prevalence, namely Andhra Pradesh, Karnataka, Tamil Nadu, and Maharashtra. This report presents the findings from the female sex workers study on volume and patterns of mobility and their linkages with HIV risk. The field work among female sex workers in Maharashtra was implemented by GFK-Mode Private Limited and the Population Council, New Delhi.

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FOREWORD

In past years, considerable research has been undertaken on the role of female sex workers (FSWs) in the transmission of HIV infection. FSWs have been seen as a major 'source' of infection. Consequently, they have been extensively targeted to prevent its spread,

There is, however, a gap in our understanding of the dynamics of sex work, sex workers' patterns of mobility and the relationship of such mobility with risk to HIV infection and gender-based violence.

During November, 2006 - November, 2007, the Population Council undertook a study to examine the patterns of mobility of FSWs and to study its links with HIV risk. The goal was to provide research-based evidence to inform the formulation of policies and to improve the implementation of programs. The study was conducted in 22 districts in four high HIV prevalence states namely Maharashtra, Karnataka, Tamil Nadu and Andhra Pradesh. It was undertaken in collaboration with the Karnataka Health Promotion Trust, the TNS India Private Limited and the GFK-MODE Private Limited.

Ethnographic and survey research methods were employed to collect data on FSWs' patterns and routes of mobility, and the condom use behaviors of over 5500 mobile female sex workers. Support provided by Avahan, Avahan's partner NGOs, the National AIDS Control Organisation, State AIDS Control Societies, other international and national organizations, and most importantly by the study participants themselves, was invaluable in undertaking this study.

The study shows that on average, mobile FSWs moved to four different locations for sex work in the two years prior to the survey. Sixty percent of the FSWs sampled for the survey reported that they had moved to at least two different locations and that they had moved to at least one location outside the district in the one in which they lived. There was greater mobility of sex workers in Andhra Pradesh and Karnataka than in Maharashtra and Tamil Nadu. In Andhra Pradesh and Maharashtra, greater mobility showed associations with a consistent decrease in condom use; increased exposure to



sexually transmitted infections; and increased perceived risk of HIV. It is likely that since FSWs move to maximize trade opportunities, they use less discretion in using condoms when they are mobile. In Karnataka and Tamil Nadu, however, mobility was not associated with condom use.

In places where FSWs had the opportunity to get more clients and where transaction time was short for example during *Jataras* (Pilgrimages), consistent condom use declined sharply in all for states where the study was conducted. About three-fourths of the mobile FSWs who visited places of *jatara* for sex work did not use condoms consistently. Thus, their vulnerability and risk to infection was enhanced in these situations. These findings indicate the need to design interventions that can be effectively implemented in places of *Jatara* and other such places.

Over three-fourths of the mobile FSWs, in the study were 19 to 34 years of age. Most were illiterate; many were in debt; and the majority belonged to lower castes such as *Domмара*, *Madigra*, *Harijana*, *Devadasi*, *Kalavanthulu* and *Lambani*. Most of these women were either widowed, divorced or separated. More than two-fourths worked as domestic servants, vendors, agricultural laborers or construction laborers. The study showed that a large majority of the mobile FSWs suffered gender-based violence. Mobile FSWs who faced violence, were in debt, and/or were widowed, separated or divorced were less likely to use condoms. These results underscore the importance of designing program interventions for these specially disadvantaged, vulnerable sub-populations of FSWs.

The study mapped specific districts where mobile FSWs were concentrated. Clearly, those districts need special attention. Social support systems in these districts should be strengthened. Strategies should be designed to bring mobile FSWs within the ambit of the program. In addition, district-specific interventions should be designed and implemented to address the needs of these highly vulnerable sub-populations of FSWs.



FSWs have been traditionally categorized by place of work -- in brothels, roadsides, highways, *dhabas*, homes, railway stations and bus stands, and interventions are targeted to these pre-defined categories of sex workers. Our study, however, shows that mobile FSWs solicit clients in multiple places. And although hotels and lodges are most commonly used, they have sex with their clients, in a number of different places. These findings suggest the need to target interventions at places where significant numbers of FSWs can be reached.

This pioneering research study provides important evidence that should be used at both the national and state levels for the design and implementation of program strategies for the prevention of HIV infection among FSWs and their clients. This information should be used by the national and state-level AIDS control organizations to inform the design of policies and the implementation of government programs. These research findings are also relevant for the large numbers of NGOs and others engaged in programs targeting FSWs and their clients. Thus, there are a number of stakeholders who could utilize the findings of this wide-scale research study for the prevention and control of HIV and AIDS.

Dr. Saroj Pachauri MD, PhD.
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EXECUTIVE SUMMARY

According to recent estimates, Maharashtra recorded the highest HIV prevalence among female sex workers. There is also a growing recognition that female sex workers often move from one location to another. The 2006 UNFPA report highlights links between

HIV/AIDS and mobile populations. There is a dearth of research documenting the migration patterns of sex workers and the linkages between their mobility and vulnerability to HIV.

This study attempts to answer some of the questions on mobility and migration of female sex workers in Maharashtra as they relate to the HIV epidemic. More specifically the study was undertaken with the following objectives:

1. To understand the patterns and drivers of migration/ mobility of female sex workers.
2. To describe the characteristics of vulnerable sub-populations among mobile female sex workers.
3. To examine the determinants of HIV risk among female sex workers, with particular emphasis on mobility-related characteristics.

The cross-sectional study was conducted in seven major destination districts of female sex workers in the Maharashtra: Ahmednagar, Jalgaon, Nagpur, Nasik, Mumbai, Pune and Thane. The field research started with a mapping exercise in each district to identify sites where female sex workers operated, estimate the number of sex workers at each site, identify the types of female sex workers (brothel, street, highway, home) and estimate the proportion who are mobile. This information guided the selection of study areas in each district. Study areas were then characterized with the help of qualitative data using key informant interviews in-depth interviews and mobility maps drawn individually by female sex workers and also in groups. A total of 65 key informant interviews and 140 in-depth interviews were carried out in the selected study areas. For the quantitative survey, a total of 2,274 sex workers were screened,



from which 1,222 eligible sex workers were selected. The sample selection was based on the criteria that the sex workers were aged 18 years and above and had visited two or more places for the purpose of sex work.

Over half of all sex workers who were interviewed for the survey across all districts were in the age group of 25-34 years and less than one-fifth were aged 19-24 years. Almost half of the mobile female sex workers (48 percent) were illiterate. Only about 5 percent of sex workers from Maharashtra reported that they had been educated up to the high school level. Half of the mobile female sex workers interviewed in the survey were divorced, separated or widowed. In in-depth interviews, sex workers reported that their husband's drinking, violent behaviour, or extra-marital relationships prompted them to separate or leave their husband. For three-fourths of sex workers in five of the seven districts, their primary source of income was sex work. When added to the proportion who mentioned they also earn an income from other sex-work-related activities such as a commission for referring a client or a renting room for sex, this proportion exceeded 80 percent in these five districts. About one-third of the sex workers in Maharashtra owed some amount of money to others.

Most of the sex workers in all the districts reported they entered into sex work because of poor economic conditions, either with or without debt. For most, their poor economic condition was due to the fact that their husband had left them destitute. Entry into sex work by force was mentioned by 621 percent of the women, and about 724 percent mentioned they entered sex work of their 'own choice.' From qualitative interviews it appears that 'own choice' was described by some as 'wanting to earn money for a better lifestyle' and by others as having 'no other option' after the woman experienced sexual violence and rape. Police appear as violators in many narratives of the sex workers.

Of all the sex workers interviewed, more than half (53 percent) had moved at least twice in the last two years. This mobility was both across districts and across states. There appears to be some variation in sex workers' mobility by the place where they were contacted for interview. Home-based sex workers were more mobile, having made an average of 4 moves in the last two years as



compared to sex workers contacted at other sites, who had made 3 moves or less during the same time period. Sex workers above age 20 years are more mobile as compared to the younger sex workers. In qualitative interviews sex workers explained that the main reason for mobility was getting new clients and earning more income than they did at their current place of work. To do so, some of the sex workers also travelled at certain times of the year and to sites where they knew potential clients would be available at those times. Some of these moves included travel to participate in Jataras or religious fairs, for cultivation of crops or fruit, for religious festivals, and during the summer vacations of students and defence force personnel who visit their native homes during their annual vacations.

There was an association between degree of mobility and the indicators of HIV risk such as consistent condom use with different types of partners, reporting of STI symptoms in the past six months, sexual violence and condom use during such incidents, and self-perception of risk for HIV. While 90 percent of mobile female sex workers used condoms consistently with occasional clients, this percentage goes down if the clients are regular (77 percent) or nonpaying partners (32 percent). Also, a high proportion of mobile female sex workers (40 to 62 percent) reported that they had at least one of the eight STI symptoms at least once in the past six months. Close to one-third of the mobile female sex workers continued to have sex even after having STI symptoms. About 16 percent of sex workers reported they had experienced sexual violence during sex work and were not able to use a condom. One-fifth of mobile female sex workers from Maharashtra reported they had experienced physical violence (beating/hitting /thrown out of the house) in the last year. The main perpetrators were clients (32 percent) and rowdies (28 percent) followed by the police (24 percent) and others. Sex workers also report that police harass them by threatening to put them in jail and then extort money to let them continue to practice sex work. More than half of the mobile female sex workers in almost all the districts used alcohol in the month prior to the survey. Self-perception of HIV risk was low across most districts. In-depth interviews with sex workers indicated that they felt that their use of condoms with almost all their clients protected them from the risk of STI and HIV. At the same time, a large majority



of sex workers across all districts reported they had undergone an HIV test. The data indicates that the number of places visited by the sex workers seems to affect consistent condom use, STI symptoms, and HIV risk perception. As the mobility of the sex workers increases, there is lower use of condoms with different clients, and more reporting of STI symptoms, and increased risk perception of HIV. Similar patterns are observed for multiple moves across districts.

When asked about consistent condom use with all partners, condom use was lower when sex workers moved in a group to Jatara or to sites where male migrant workers gathered. Among the separate categories of sex workers, consistent condom use is the highest among home-based sex workers who have moved to only 12 places. The brothel-based sex workers seem to report the same levels of condom use irrespective of the number of places they move to.

To target such a highly mobile population of female sex workers who appear to be vulnerable to HIV requires a comprehensive understanding of their places of solicitation and sex. In Maharashtra, mobile sex workers solicit customers for sex in multiple places. The most commonly mentioned place was brothels (53 percent), followed by roadside (48 percent), railway station/bus stand (25 percent), and the marketplace (22 percent). Similarly, sex workers listed numerous sites where they had sex with their customers. Over half of the sex workers cited brothels as the most likely place for sex in most of the districts, reflecting a similar pattern with the place of solicitation. Hotels and lodges also constitute an important place for having sex in most of the districts. On examining the association between the place of contact and place of solicitation, brothels and hotels/lodges were the two most commonly mentioned places for solicitation and sex. The other two prominently mentioned places for solicitation and sex were *dhabas* (highway restaurants) and railway stations/bus stands. Also, bars were mentioned by one-third of the sex workers contacted at home. So, if programs want to ensure better coverage of their interventions with sex workers, they should focus on the major five places: brothels, railway stations/bus stands, *dhabas*, bars, and hotels/lodges. Currently, most of the intervention programs reach sex workers in brothels,



dhabas, and roadside. If they include hotels, bars, and railway stations/bus stops in their coverage areas, they will reach most mobile sex workers in the area. Also, if these five places are targeted by programs in each district, close to half the sex workers would receive at least one dose of intervention and one-third would receive two doses of intervention in a short time.





I

BACKGROUND AND OBJECTIVES

According to the National Family Health Survey round three (NFHS-3) Maharashtra recorded the fourth highest HIV prevalence among adults in the general population (IIPS and ORC Macro International, 2007). The results from the Integrated Behavioural and

Biological Assessment (IBBA) survey conducted among high-risk groups in select districts from the four high HIV prevalence states of India suggest the highest HIV prevalence is found among female sex workers of Maharashtra. The prevalence ranged from a low of 7 percent in Thane district to a high of 39 percent in Pune district.¹ High HIV prevalence among the adult population as well as the female sex workers in Maharashtra has serious implications for the spread of the epidemic.

Further, there is a growing recognition that female sex workers often move from one location to another. The 2006 UNFPA report highlights relevant and crucial links between HIV/AIDS and mobile population.² Mobility itself makes it harder to reach migrants with prevention information, condoms, counseling and testing services, or care. Migrant communities are often socially, culturally, economically, and linguistically marginalised, which in turn presents barriers to health care access.³

The India AIDS Initiative, the Avahan Program supported by the Bill and Melinda Gates Foundation, has placed special emphasis on female sex workers to check the spread of the HIV/AIDS epidemic. We know very little about the patterns of movements of various at-risk populations and the nature and extent of interaction among them. Without understanding why some forms of

¹ National Interim Summary Report India (October 2007), Integrated Behavioural and Biological Assessment (IBBA), Round 1 (2005-2007), Indian Council of Medical Research & Family Health International.

² UNFPA Report (2006)- State of world population 2006
United Nations(2006)- World Population, Monitoring, Focussing on International Migration and

³ Development: Report of the Secretary -General



mobility, at certain times and under certain conditions, are related to increased HIV transmission, it is not possible to design intervention programs to reduce risk behaviour of mobile populations, particularly for those, such as sex workers, who are at a high risk of infection.

The present study was undertaken by the Population Council to answer some of the questions on mobility and migration of female sex workers in Maharashtra as they relate to the HIV epidemic. For example, what proportion of female sex workers in any given area are mobile? What are their various destinations and where do they originate from? What is the frequency and seasonality of this mobility/migration? What are the routes of mobility/migration and duration of stay in each place? What is the nature and volume of sex work through this route? Is there a connectedness to their place of origin in determining why they choose a particular destination? What are the individual, community, and structural factors that determine their movements and mobility? And how does mobility influence HIV vulnerability and risk?

More specifically the study was undertaken with the following objectives:

- 1) To assess the volume and patterns of mobility of female sex workers.
- 2) To describe the characteristics of mobile female sex workers.
- 3) To examine the determinants of HIV risk among female sex workers with particular emphasis on mobility-related characteristics.





II

STUDY DESIGN AND METHODS

The cross-sectional study design involved the following major steps and employed both qualitative and quantitative methods as outlined below:

- 1) Identification of major destination points, including intermediate destination points of concentrations of female sex workers;
- 2) Characterisation of destination points, including intermediate destination points using qualitative research methods; and
- 3) Gathering of quantitative data at the destination, including intermediate destination points.

The field work was carried out during November 2006-July 2007 in different phases. In the first phase destination points (also referred to as 'study areas' in the report) were identified and characterized using primarily qualitative data followed by quantitative survey.

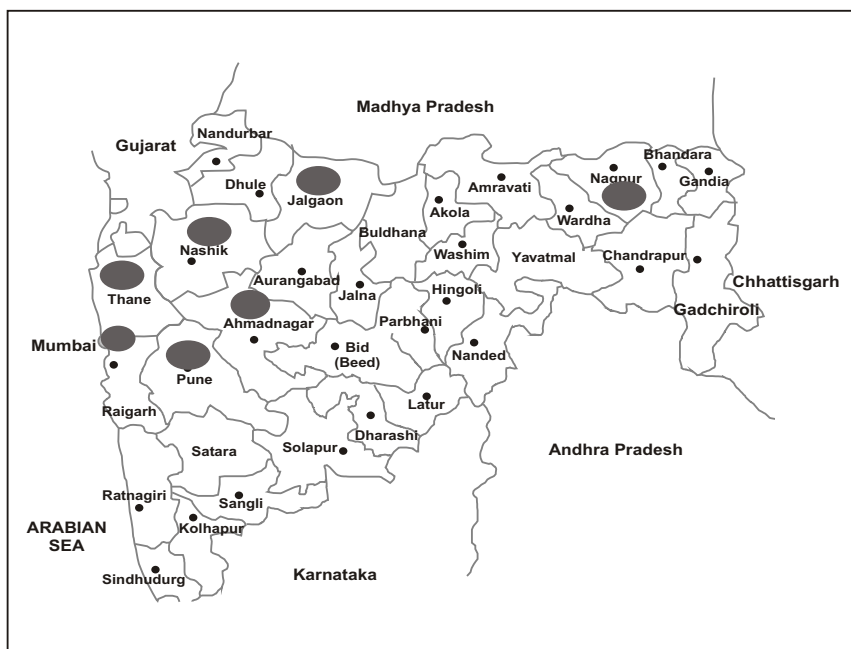
2.1 Identification of study areas

Major destination and intermediate destination points were identified using female sex workers' mapping data and later verified through discussions with authorities of MSACS, FHI, Pathfinder International, Avert Society, Indian Red Cross Society, and MDACS who are working in Maharashtra. The top seven major destination points of female sex workers selected were Ahmednagar, Jalgaon, Nagpur, Nasik, Mumbai, Pune, and Thane. They were initially referred to as destination points because of the larger concentration of female sex workers in these areas at the time of selection. From the mobility patterns of female sex workers, however, and also from the key informant interviews it became apparent that the selected destination points constituted part of migration route and therefore served as both 'destinations' and 'intermediate destinations' for the mobile female sex workers at different points in time of their transition or mobility. In this report therefore these points have been



referred to as destination points or intermediate destination points as appropriate. We also refer to them as 'study areas' in the report.

Map 1: Study districts in Maharashtra State, India



The field research started with a description of selected districts. The purpose was to map sites within each district where female sex workers operated, estimate the number working at each site, and identify the types of female sex workers (brothel, street, highway, home), the proportion who are mobile and their places of origin, presence of male migrant workers in the site, existence of HIV programs, proximity to highways, and the local economy of the site. Discussions were held with district-level administrators, NGO heads, organizations working on HIV prevention, doctors from STI clinics, police officials, and heads of professional associations. In addition, at each site interviews were conducted with individuals knowledgeable about the sex work



industry such as dalaals (brokers), paan shop wallas, rickshaw pullers, auto drivers, brothel owners, female sex workers' peer leaders and NGO outreach staff.

The district-level descriptions helped to identify 134 small and large sex worker sites (hot spots) and included brothel areas, soliciting places such as roads, highways, bus stands, railway stations, and market areas. These lists of hot spots were used to prepare a list of primary sampling units (PSUs), with each PSU covering an estimated 500 female sex workers. PSUs were formed by combining small areas or by segmenting the large areas such that each PSU has approximately 500 female sex workers. A total of 29 such PSUs were formed, of which 19 were selected randomly for the sampling frame.

2.2 *Characterization of study areas*

Study areas were then characterized with the help of qualitative data using a variety of ethnographic methods, including key informant interviews, in-depth interviews, and mobility maps drawn individually by female sex workers and also in a group. The purpose of the characterization was twofold: 1) to identify individual, community, and structural factors which determine the mobility of female sex workers and influence their risk and vulnerabilities; and 2) to inform the selection of primary sampling units for the quantitative survey. A total of 250 interviews (65 key informant interviews and 140 in-depth interviews) were carried out in the selected five study areas. All interviews were conducted with purposive selection of respondents following informed consent procedures.

The qualitative interviews were carried out in three stages. In the first stage, interviews were held with local key informants, including female sex workers, to map physical locations for solicitation of clients and sex, and to develop a profile of mobile female sex workers and their mobility patterns. In the second stage, in-depth interviews were conducted with selected female sex workers to generate individual mobility maps; finally, group interviews were held with sex workers to describe group dynamics and group mobility.



The qualitative data was gathered by a team of 10 experienced and specially trained investigators. The information from key informant interviews, in-depth interviews, and mobility maps were collected in two languages: Hindi and Marathi. These interviews were translated into English and analyzed with the help of Atlas.ti.

2.3 *Quantitative Survey*

The purpose of the quantitative survey was to provide an estimate of the number of mobile female sex workers and to describe the relationship between mobility-related factors and HIV risk behaviour. For the purpose of the study, only female sex workers aged 18 years and above were recruited. Also, a sex worker was defined as “mobile” if she

- 1) Had been in the sex work for at least one year;
- 2) Had visited two or more places for the purpose of sex work excluding the current one in the past two years; and
- 3) One of those moves/visits was made across districts.

2.4 *Sample size and sampling design*

A total of 2,274 sex workers were screened in the survey, of whom 1,222 were eligible satisfying the inclusion criteria described above. Thus, about 54 percent of all the female sex workers interviewed were mobile in Maharashtra.

In each selected PSU within each district, the study adopted two types of sampling procedures for selecting brothel-based and non-brothel-based sex workers because of the differences in how sex work is practiced: two-stage systematic sampling and time location sampling procedures.

For selection of sex workers in brothel-based areas, a two-stage systematic sampling procedure was used. Firstly, the lanes/small pockets/areas within each larger brothel site were listed. Using the probability proportional to size procedure, the number of brothel houses to be selected in each large brothel



area was pre-determined. After fixing the number of sex workers to be interviewed from each selected lane, the sub-lanes or small areas were selected systematically from the lists as first-stage sampling. In the second-stage sampling, brothel houses were systematically selected with the first house being randomly selected and subsequent houses selected based on a calculated interval. One sex worker from each selected brothel house was interviewed using a screening tool.

For selection of sex workers in non-brothel-based areas, a time location sampling procedure was used. The social maps prepared during qualitative research formed the base for the selection of these sex workers. From the social maps of each area, locations of smaller sites were listed. After listing of the sites from social maps, the key informants and NGO staff were contacted again to determine the peak days and times for the sex workers' visit to the sites. Thus, for each area, time slots were fixed for the interviewers to visit the site. Interviewers then went to each of those sites to wait for sex workers. Sex workers who came to the site at the defined times were selected for interview using a screening tool.

Screening interviews collected information on sex workers' age, place of contact (brothel, lodge, home, street, highway, railway stations, market, dhaba, dance groups), district where the interview was conducted, number of places they visited in their lifetime for sex work, number of places they visited in the last two years for sex work, and number of districts they visited in the last two years. This information helped to identify the mobile female sex workers according to the study criteria and estimate the volume of mobility among representative sex workers at the district level.

The survey instrument administered to eligible sex workers included: socio-economic and demographic profile, living conditions, media exposure, life style, support services, migration/mobility pattern and sex work history, Jataka/event-related mobility for sex work, seasonal mobility, connectivity with place of origin, client profiles, experience of violence, availability and access to



condoms and ability to use them, condom use in current and previous places, sexually transmitted infections, knowledge and risk perception related to HIV/AIDS.

Quantitative surveys in all the study areas were carried out with the help of personal digital assistants (PDAs) by ten trained and experienced interviewers (4 males, 6 females). Interviewers were specially trained in the ethical conduct of interviews on sensitive issues and with marginalized populations. Informed consent was obtained from the respondents and personal information was stored in safe places without identifiers. Data quality was ensured through a supervisory structure that provided regular feedback in the field and also ensured data cleaning in the office and, if needed, a revisit to the field. Data processing operations carried out for survey data included loading of the data collected onto a laptop on a daily basis, up-loading of weekly collected data to the Population Council data base, data quality checks, feedback to the field team, cleaning, and tabulation. The Statistical Package for Social Sciences (SPSS) was used for data consistency checks and analysis.

2.5 *Degree of mobility*

We constructed an index to classify female sex workers on a continuum of mobility ranging from least to most mobile. The indicators of mobility used in the study are: total number of places the sex worker visited/stayed in the last two years (1-2 places, 3-4 places, 5+ places); the number of districts visited/stayed in the last two years (12 districts, 3+ districts); sex worker visits to Jatara areas (No, Yes-went alone, Yes-went in group).





III

VOLUME AND PATTERNS OF MOBILITY

3.1 Volume of mobility

Some 62 percent of sex workers who were interviewed using a screening tool mentioned that they moved at least once for sex work in the last two years, and 53 percent mentioned that they moved at least twice. Half of the female sex workers said they moved at least once across the district in the two years prior to the survey. As per the operational definition (2 + moves and at least one move across districts), 45 percent of sex workers were found to be mobile (Figure 1) and were eligible for complete interview.

Figure 1 : Mobility of female sex workers by number of moves

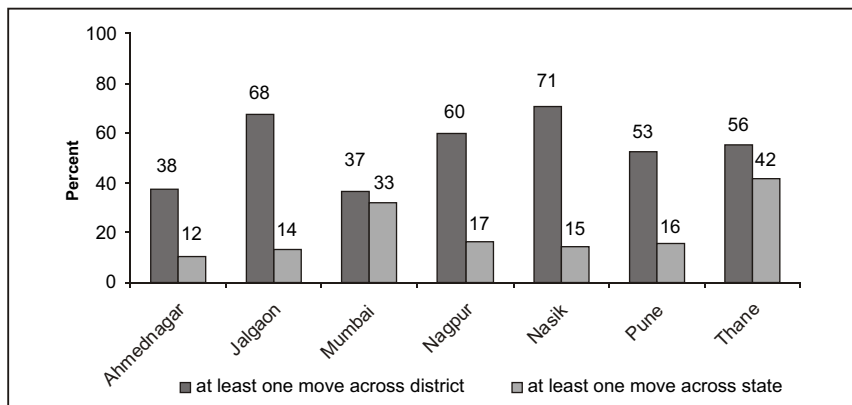


Sex workers who moved at least once made an average of 2.8 moves in the last two years. On average, sex workers made 1.7 moves across the districts (Table 1).

Mobility patterns over the last two years varied by district, with an average of three moves made by female sex workers from Nagpur, Nasik, and Pune as compared to an average of two moves reported from the other districts.



Figure 2 : Mobility of female sex workers by district



In general, over half of female sex workers interviewed in the study districts mentioned that they had moved at least once across district for sex work in the last two years, except in Ahmednagar and Mumbai (Figure 2).

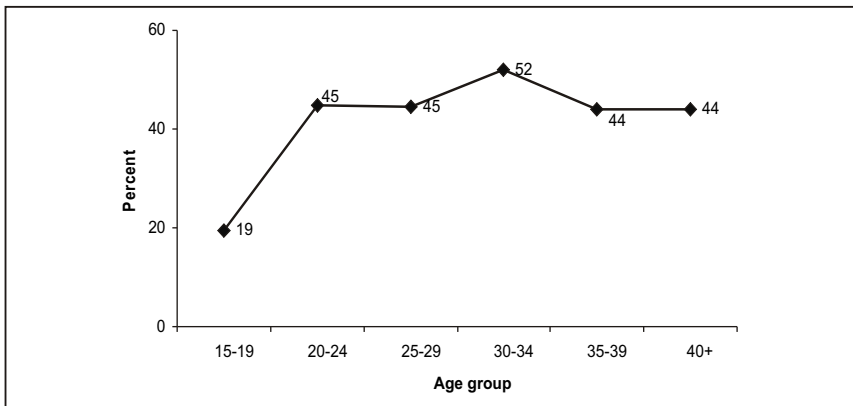
Mobility across states was highest among sex workers from Thane (42 percent) followed by Mumbai (33 percent). While female sex workers in Nasik, Pune, and Nagpur were highly mobile across districts, less than one-fifth reported mobility across states.

There is some variation in sex workers' mobility by the place where they were contacted for interview (Table 1). Although their numbers were very small (29), sex workers from dance groups were the most mobile with an average of 4.2 moves in the last two years. Of the remaining groups, home-based sex workers were more mobile (70 percent made at least one move across district, 37 percent made at least one move across state, and they made an average of 4 moves in the last two years) as compared to sex workers contacted at lodges (average 3.2 moves), street (average 3.1 moves), highway (average 2.7 moves), and brothels (2.6 moves).



Mobility by age indicates that sex workers above age 20 years are more mobile (Figure 3).

Figure 3 : Volume of mobility of female sex workers by age group

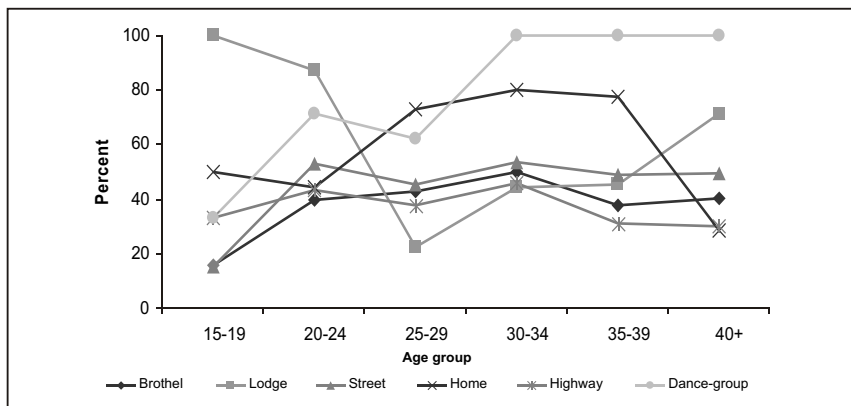


However, there are district-level variations in mobility of female sex workers by their age. In Ahmednagar and Nashik, over half of the young female sex workers aged 15-19 years were mobile as compared to only one-fifth in Mumbai, Pune, and Nagpur. The mobility of sex workers seems to decline after the age of 40 years except in Jalgaon (76 percent) and Nashik (64 percent).

There are further differentials in volume of mobility by places where female sex workers were contacted. A significant proportion of female sex workers in the age group of 25-39 years who were contacted in homes were mobile when compared to those below age 25 years or above 40 years. Similarly, the volume of mobility is high among female sex workers aged above 30 years among the dance groups. It is also evident that the volume of mobility among brothel, street, and highway based sex workers is higher for those aged 20 years and above.



Figure 4 : Volume of mobility by age and type of sex work



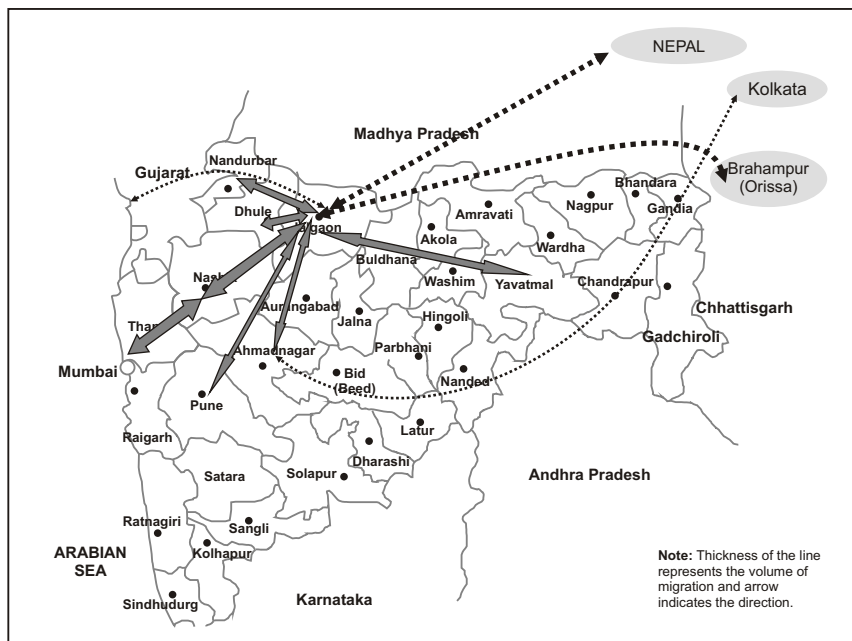
Note : Only 29 sex workers contacted from dance-group and 45 at lodges

3.2 *Patterns of mobility*

Responses of all mobile sex workers (n=1,188) who were eligible and participated in the survey provided data to understand the patterns of mobility within the selected districts, across districts, and across the state. Data gathered from questions on current place and previous two places that sex workers moved to are presented visually on the seven district maps below. The mobility across sites is depicted by lines: the thickness of the lines represents the volume of mobility, and arrows indicate the direction of mobility. If over 40 percent of sex workers have travelled between a route then it is represented with a line weight of 4, between 30 and 39 percent is represented by a line weight of 3, and so on. If less than 10 percent of sex workers have travelled the route, it is not represented on maps as it does not constitute a major route of mobility. Solid arrows indicate inter-district movement and dashed arrows indicate inter-state mobility



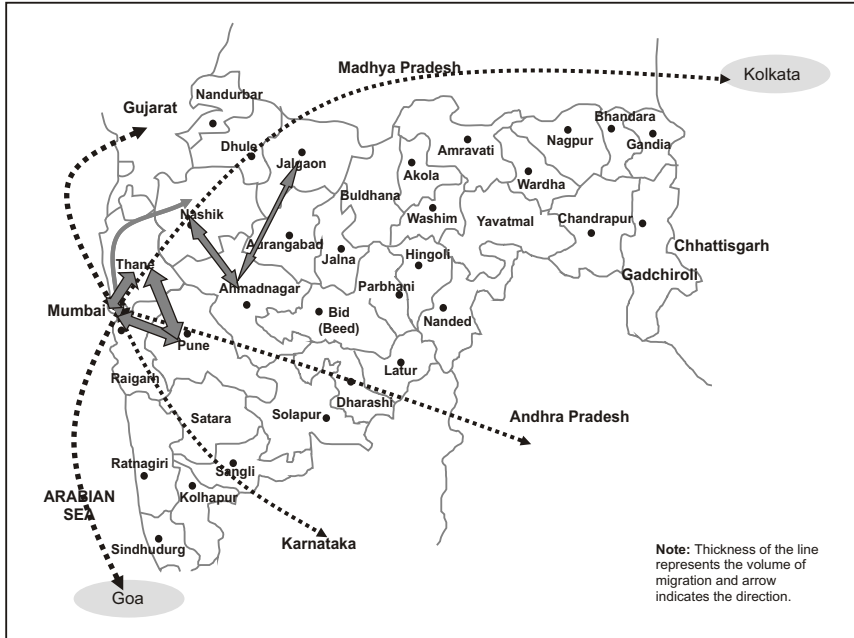
Map 3 : Mobility routes of female sex workers currently in Jalgaon district



Map 3 depicts mobility patterns of sex workers interviewed in Jalgaon district. The largest volume of movement is to the neighbouring district of Nashik and onward to Thane. A significant proportion of sex workers also move to smaller districts in close proximity such as Nandurbar and Dhule in the north. Sex workers also travel to districts further from Jalgaon such as Pune and Ahmednagar in the southwest and Yavatmal in the east. There appears to be significant movement across states, with sex workers travelling to Kolkata in West Bengal via Ahmednagar and directly to Behrampur in Orissa and to Gujarat. Also, in and out migration from Nepal was mentioned by sex workers in Jalgaon.



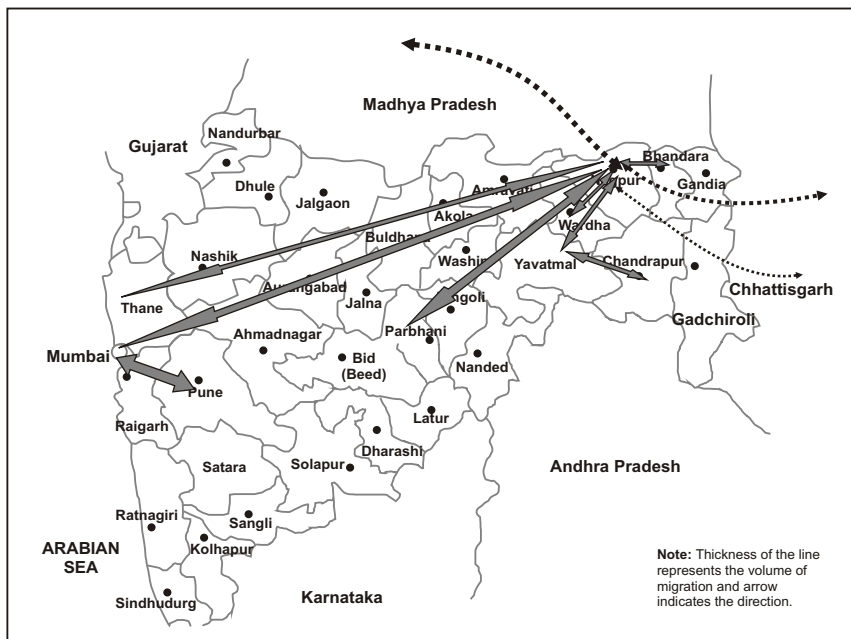
Map 4 : Mobility routes of female sex workers currently in Mumbai district



As depicted in the mobility map of Mumbai (Map 4), there is a strong connectivity of sex workers' movement between the districts of Thane, Mumbai, and Pune. A smaller proportion of sex workers from Mumbai also move between the city and Nashik, from which they appear to travel to and from Ahmednagar and Jalgaon. The sex workers from Mumbai travel to several states in the country, namely West Bengal, Andhra Pradesh, Gujarat, Goa, and Karnataka.



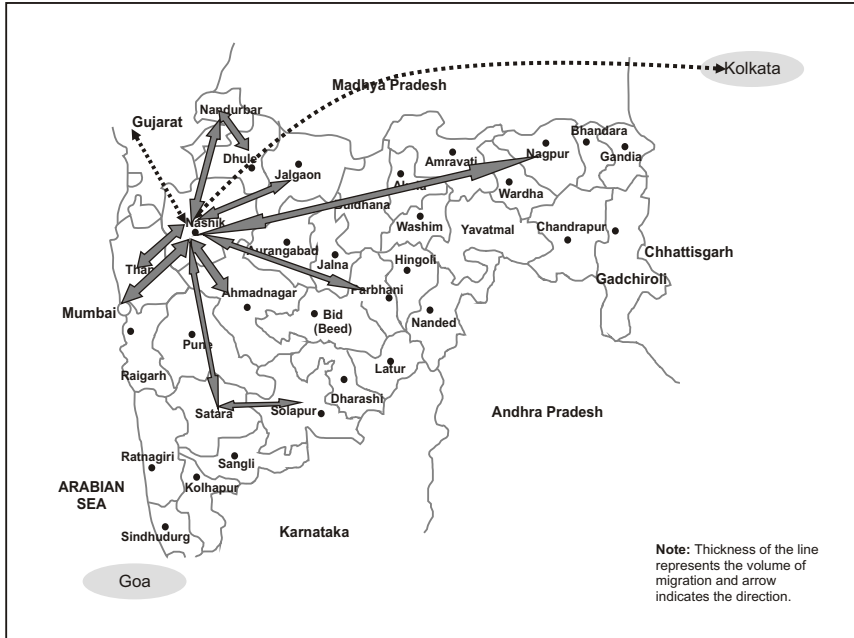
Map 5 : Mobility routes of female sex workers currently in Nagpur district



Map 5 shows that the mobility of sex workers currently in Nagpur district is largely inter-state. The sex workers travel short distances to neighbouring districts such as Wardha, Bhandara, and Yavatmal as well as to districts further away such as Mumbai and Thane. Also, sex workers who travel to Mumbai then move to Pune and back. Inter-state mobility is from to Madhya Pradesh and Chhattisgarh.



Map 6 : Mobility routes of female sex workers currently in Nasik district

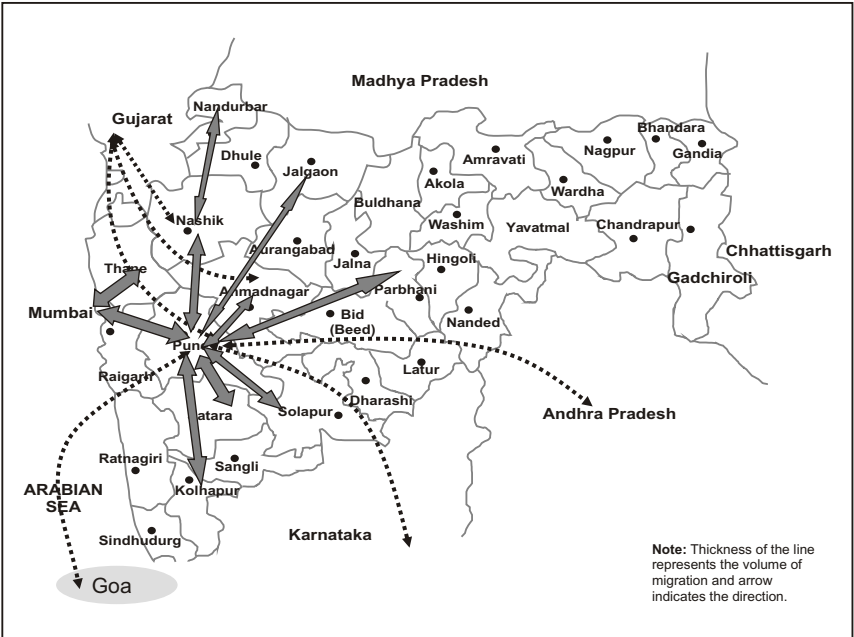


The circular pattern of sex workers' movement from Nasik indicates a high level of inter-state mobility (Map 6). Large volumes of sex workers travel the short distances to Thane, Mumbai, Ahmednagar, Jalgaon, Nandurbar, and Dhule. There also appears to be a lot of movement between Nasik and Nagpur. Other districts to which sex workers travel in the state are Parbhani and Satara, from which they move on to Solapur. Sex workers also travel outside the state to West Bengal and Gujarat.



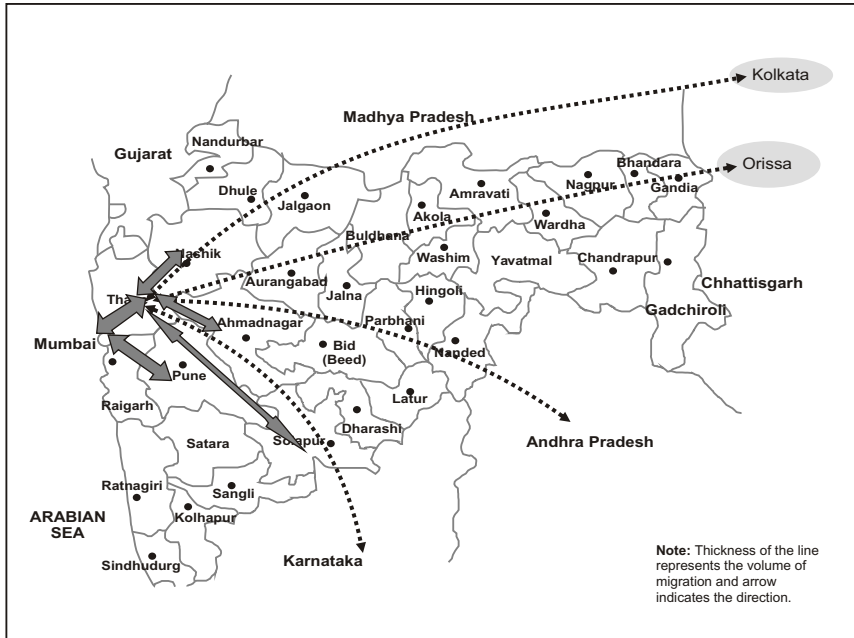
According to Map 7, sex workers currently in Pune appear to travel a lot to other districts in Maharashtra. Within the state the districts they visited were Mumbai, Nasik, Thane, Ahmednagar, Jalgaon, Nandurbar, and Parbahani in the north and east and Solapur, Kolhapur, and Satara in the south. Inter-state mobility is to Goa, Andhra Pradesh, Karnataka, and Gujarat.

Map 7 : Mobility routes of female sex workers currently in Pune district





Map 8 : Mobility routes of female sex workers currently in Thane district



From Thane, sex workers move largely to Mumbai, Pune, Nasik, Ahmednagar, and Solapur within the state and to West Bengal, Orissa, Andhra Pradesh, and Karnataka outside the state (map 8).

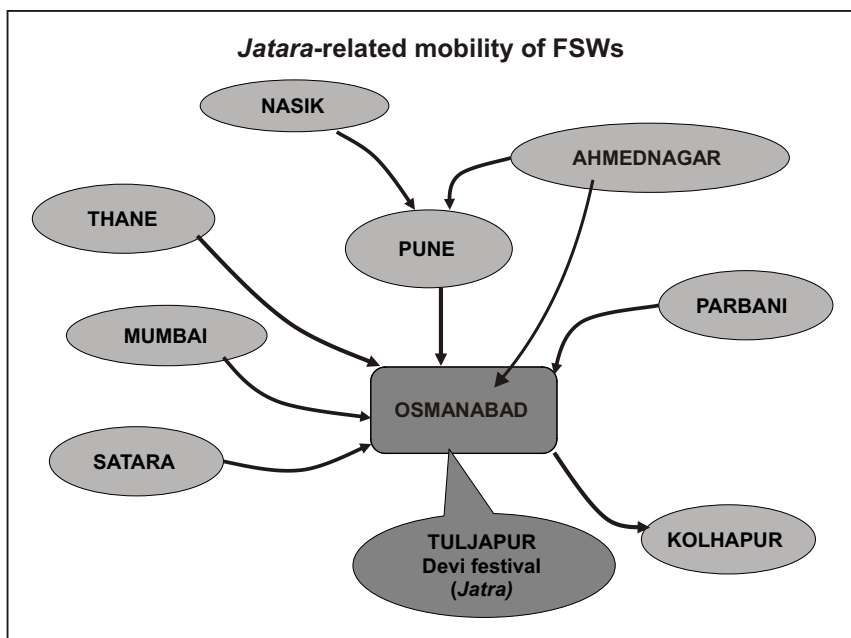
Another pattern of mobility reported by close to one-third of sex workers in all districts, except in Mumbai and Thane, was related to participation in Jataras (religious fairs) (Table 3). In Pune, almost three-fourths of sex workers reported they had been to a Jatara in the last 12 months. The majority of sex workers usually went to Jataras alone except in Mumbai and Thane, where the majority of sex workers travelled in groups.



Sex workers mentioned about 16 types of Jataras in other districts in the state to which they travelled. Some of the districts hosted more than one Jatara, such as Solapur (home to Chaita, Ashadhi, Ambabai, and Sidheshwar Jataras). (Table 3a).

Figure 5 depicts sex workers' mobility patterns to attend the Tuljapur Devi Jatara in Osmanabad. As is clear, sex workers from all over the state travel to Osmanabad for the Jatara.

Figure 5 : Sex workers' travel to attend Tuljapur Devi Jatara in Osmanabad



Some mobility of sex workers was also attributed to religious festivals such as Navratari preceding Diwali. During other festival occasions more non-brothel-



based female sex workers come to Mumbai and Pune for a few days. Pune and Pune-based female sex workers shift to Mumbai during Ganapati festival in search of new and more customers.

"I came to Pune from Kamathipura at the time of Ganapati festival because there would be more business for me here. My madam told us 'girls are wanted in Pune and anyway, there is not much work in Kamathipura so if you want you can go together, see Pune, earn money and come back.'" (22 years old, unmarried, brothel-based, Pune)

Other patterns of mobility were linked to cultivation of crops or fruit. During this time male migrants travelled to these districts for the purpose of cultivation and/or harvesting. Female sex workers reported that they visited Nagpur during orange season at the same time as male migrants from the neighbouring state of Madhya Pradesh travel to work in the orange orchards in Nagpur. Again, more female sex workers and male migrants are seen in Nasik during the grape season. Some sex workers from Jalgaon move to Khandwa, Burhampur district during November and April for crop cultivation. Sex workers from the state also to travel to Ahmednagar when male migrants visit the district during the sugarcane cutting season from November to March.

Sex workers in Ahmednagar travel to Pune or other neighbouring districts during the summer, where the majority of their clients are students and defence force personnel who visit their native homes during their annual vacations at that time.





IV

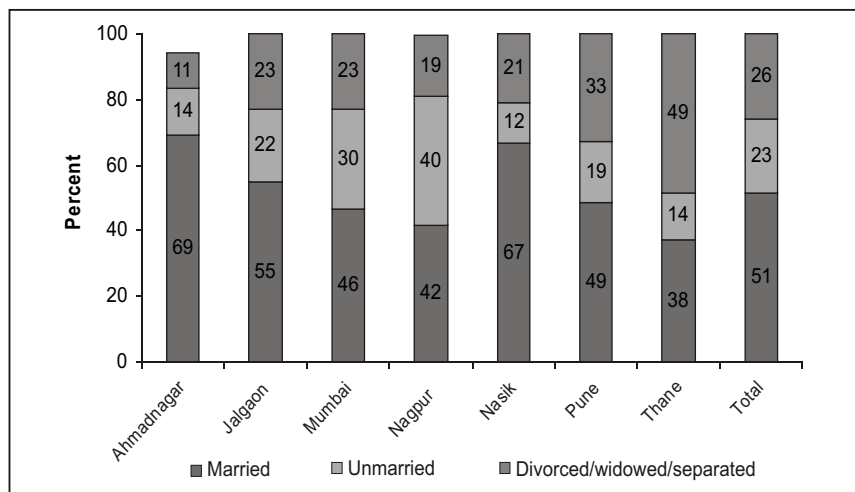
PROFILE OF MOBILE FEMALE SEX WORKERS

4.1 Socio-economic and demographic profile

Over half of all sex workers who were interviewed for the survey across all districts were in the age group of 25-34 years and less than one-fifth were aged 19-24 years. Almost half of the mobile female sex workers (48 percent) were illiterate. Only about 5 percent of sex workers from Maharashtra reported that they had been educated to the high school level. District-level variations in educational status of mobile female sex workers are shown in Table 4.

About half of the mobile female sex workers interviewed in the survey were divorced, separated, or widowed (Figure 6). Only in Thane were the majority (49 percent) of sex workers currently married as compared to one-third who reported they were divorced/separated/widowed. The highest proportions of single and unmarried sex workers were in Nagpur (40 percent) and Mumbai (30 percent).

Figure 6 : Marital status of mobile female sex workers by district





In in-depth interviews, sex workers reported that their husband's drinking, violent behaviour, and extramarital relationships prompted them to separate or leave their husband.

"I left my husband because he used to come home drunk every day. He used to beat me. He used to abuse me. He used to always doubt me. Because I was doing field work with my mother, he thought that I had a relationship with somebody there. I would work overtime to make more money. But my husband thought that I got my money from my lover. So he used to beat me all the time. Once he kicked me out of my house, so I went away to my mother's place. After 8 to 10 days later, he came to take me back because he wanted me to cook for him. But I didn't go back with him. I told him straight away that I didn't want to live with him. He verbally abused me there (Ahmednagar) then he went away. But every 8 to 10 days he would return drunk, trying to take me back. There was no way I would return with him. Nevertheless, he kept returning to take me back. Therefore my mother and I left that house. And we went away to Jalgaon." (31 years old, separated, street-based, Pune)

Another sex worker reported:

"Then I fell in love with a boy in the village. I got married to him and we stayed in the village only. We got 2 kids, now one kid is 4 yrs old and the other one is 3 yrs. Later on my husband started fighting with me because of his bad habit of drinking alcohol. After some time he got married to another woman and my fight increased with him and I started looking out for work." (25 years old, separated, brothel-based, Thane)

Most of the widowed women mentioned that their husband's excessive drinking resulted in their ill-health and death.

"My husband expired after the birth of second child. He was drinking heavily. I was telling him that you will spoil your life by drinking alcohol but he did not listen to me. He was drinking throughout the day. Because of excessive drinking his liver became bad and he expired" (30 years old, widowed, brothel-based, Thane)



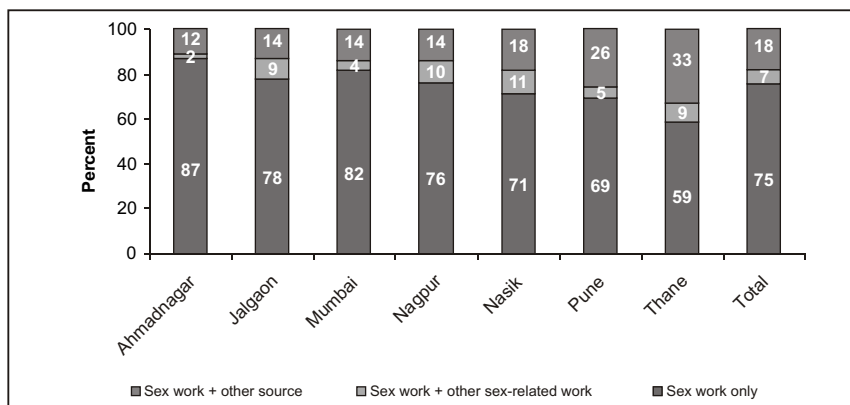
An unmarried woman gave as her reason for remaining single the fact that she was cheated by the man in her life. Similar sentiments were echoed by quite a few of the single unmarried women who vowed never to marry after their bitter experience with a man.

"I am 25 years old and unmarried. I am not interested in marriage as one boy cheated me and when I delivered his child he left me. When I told him about marriage he said I only make love and sex and not marriage." (25 years old, unmarried, brothel-based, Mumbai)

4.2 Sources of income

About three-fourths of sex workers in five of the seven districts in Maharashtra reported that their primary source of income was sex work. When added to the proportion who mentioned they also earn an income from other sex-work-related activities such as a commission for referring a client or renting a room for sex, this proportion exceeded 80 percent in these five districts. In the other two districts, Thane and Pune, 33 and 26 percent respectively reported they also earned their income from sources other than sex work (Figure 7) such as industrial labourer, construction labourer, or domestic helper.

Figure 7 : Mobile female sex workers by sources of income

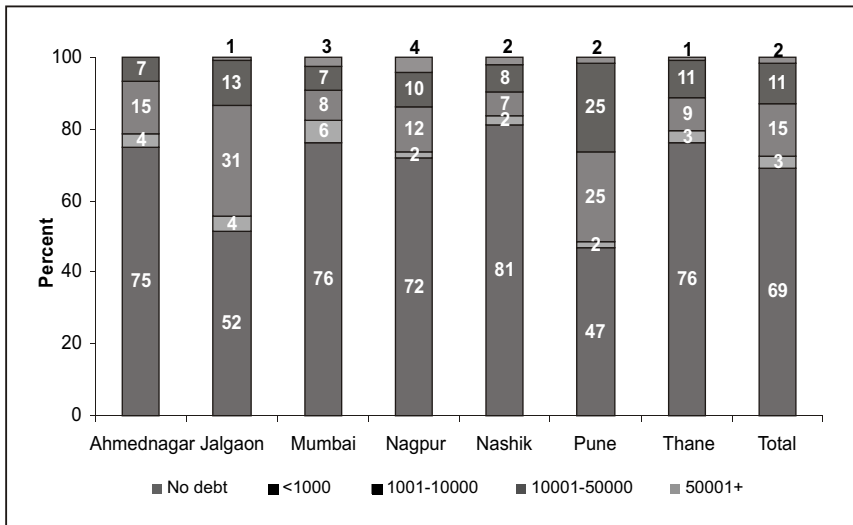




4.3 Debt

About one-third of the sex workers in Maharashtra owed some amount of money to others. This proportion was higher in Pune and Jalgaon, where half of the sex workers said they were in debt (Figure 8). About one-fifth of the women had a debt of less than Rs 10,000 while 13 percent owed more than Rs 10,000 to others.

Figure 8 : Percent of female sex workers having debt of various amounts

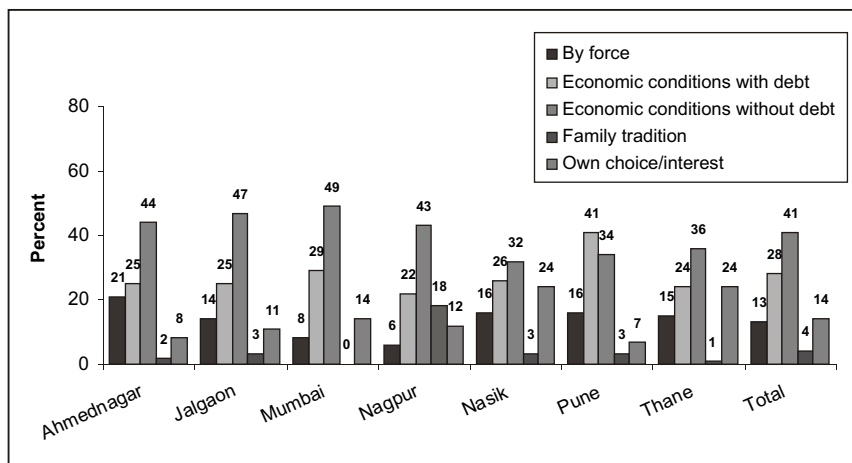


4.4 Reasons for entry into sex work

Most of the sex workers in all the districts reported having entered sex work as a result of poor economic conditions, either with or without debt. Entry into sex work by force was mentioned by more than 10 percent of the women in five of the seven districts, while 21 percent of women in Ahmednagar mentioned force (Figure 9).



Figure 9 : Reasons for entry into sex work



Note : Force including those female sex workers who were trapped by a man, woman, or boyfriend.

In qualitative interviews also, most of the female sex workers mentioned their economic condition as the main reason for their entry into sex work. While for most their poor economic condition was due to the fact that their husband had left them destitute or was not earning an income, for others it was their own interest in improving their financial earnings that led them to enter sex work.

"One girl used to come for treatment in the hospital where I was working. She became a good friend of mine. My husband was not doing any work. And the Rs.3000/- that I used to get per month made it difficult to maintain ourselves. It was difficult to educate the children. Then I decided to do other work in addition to this work. I asked that friend who used to come to the hospital about the job. I asked her if she could arrange for my work where she works. She told me that she is a 'call girl' and does sex work business. She told me that in this work you get lot of money. Then because of compulsion, I accepted to join in this business. I started this profession at Puna station. That time my age was 27 years." (30 years old, married, street-based, Pune)



"My husband used to fight a lot with me. After a few years, he got married to another woman. I had no money and started looking out for work. In my village one lady had come to worship God and she explained the prostitution work and took me to Pune city. I started the business of brothel and lot of money started coming to me. I stayed in Pune for around 2 yrs and then moved." (25 years old, separated, brothel-based, Thane)

"When I was 8 years old my Mausi (maternal aunt) brought me here for domestic work. My mausi used to do sex work. I used to do only domestic work and did not get salary but only food and accommodation. I also wanted to earn money so first time I did sex work was at 17 years old. I used to take the customer as per my choice." (25 years old, unmarried, brothel-based, Mumbai)

Survey findings also indicated that in most sites between 7 and 24 percent of sex workers mentioned they entered sex work of their 'own choice' (Table 5). From qualitative interviews it appears that 'own choice' cannot be interpreted as 'their own interest in sex work.' While it may include reasons such as wanting to earn money to afford a certain lifestyle, it also includes reasons such as 'no other option' after the woman has experienced sexual violence and rape. Police appear as violators in many narratives of the sex workers. Some of these situations may also result from 'being cheated' or 'duped' by the facilitator.

"Everything was good in my house. After finishing my 10th class, I started looking for a job. At that time our neighbour aunt had come back to the village after having done business in Bhivandi. She had told everyone in the village that she was working in a beauty parlour. She said I will get you a good job you will benefit. Nobody in my house knew that this aunty did sex work and they agreed to let me go with her. In Bhivandi, seeing a big crowd there I felt good. There were many girls with good makeup on. My aunt took me to a house and made me sit outside in front of it. She went in and after 10 minutes she came out and took me inside. There were 5 or 6 ladies and girls there and they were very friendly. I stayed with them and for 3-4 days I didn't do anything. But when I saw everybody doing sex work I also had a wish to do it. My house owner guessed my feelings and she sent a man to me. I had sex with him and enjoyed it. Then I started doing sex like that. Later I found out that my aunt had sold me to the house-owner for Rs.55000/-. She told me that



when the debt is over you can go anywhere where you want to go. She used to look after me well and I stayed with her for 4 years." (22 years old, unmarried, brothel-based, Pune)

Between 6 and 21 percent of sex workers across all the districts mentioned they had been forced or coerced into sex work. This proportion was the highest in Ahmednagar, where one-fifth of the sex workers mentioned force as a reason for entry into sex work. In-depth interviews with sex workers from Ahmednagar shed more light on how some of them were forced or duped into this work. Yet again, the role of police as perpetrators of violence against women, rather than as protectors, is highlighted in the interviews of sex workers.

"When I was 13 years old my father married me to an old man to whom he owed money. The man was a drunkard. He used to be drunk all 24 hours and we had no sexual relationship. One day he came home with his friend and both were drunk. The friend tried to force me into having sex but I ran away to my parents' home. My parents told me "your husband is everything for you" and asked me to go back to him. But I refused. They used to beat me severely and one day drove me out of house. It was night and I did not know where to go. I started wandering in the village and weeping. I came in front of the police chowki and some constables saw me crying. They came to me, spoke to me nicely and took me inside the police station. Inside, the officer was drinking alcohol. He enquired about me. I told everything to him. He told me to sit. He said that you wait here and I will bring your father here. He then called me to one room and raped me. I cried and wept. Then another constable raped me. After everything was over they told me don't tell this thing to anybody, if you tell it to anybody we will shoot you. They then took me to my house same night. And they threatened my parents and left me in my house. My mother and father were very angry with me because of this. After 3 to 4 days my mother took me to one place for doing domestic work. She told me that I had to stay there only. In front of me she took money from one lady and then went away. For 2-3 days I did the work of cleaning utensils, washing clothes, etc but wanted to go home. The house owner then told me that my mother had sold me to her for Rs. 5000/-. She told me that I had to repay her money and then I could go. And, that is how I started sex business." (19 years old, separated, dhaba-based, Ahmednagar)



"My husband used to fight with me because of his family. One day they all tried to burn me. I ran away from there to save my life. I stayed at my mother's place for two months but they were not ready to keep me with them for long. They said 'you should be in your husband's house. You live or die there. And you shouldn't come back to your mother's place.' I was fed up with them and ran away from there. I was without any support. I went to the bus stand. One lady was wandering there for quite some time. She came near me. And she said to me where you want to go, I started weeping suddenly. After that I told her my whole story. Then that lady told me the arrangements for your stay can be made. I will give you some work also. You come with me to Puna. She took me to Puna by train. The lady who was taking me to Puna had phoned her colleague to come to Puna station to take us. At Puna one man was already waiting for us. They took me to Budhwar Peth Puna and sold me to a lady for Rs.10000/-. That is when I realized this place is where sex workers live. And I was already sold to them. I couldn't do anything. The house owner there asked me to do business. And I adopted this business." (Age unknown, separated, dhaba-based, Ahmednagar)

There was one interesting case of a woman who entered sex work at the age of 57 years to support and care for her ailing son.

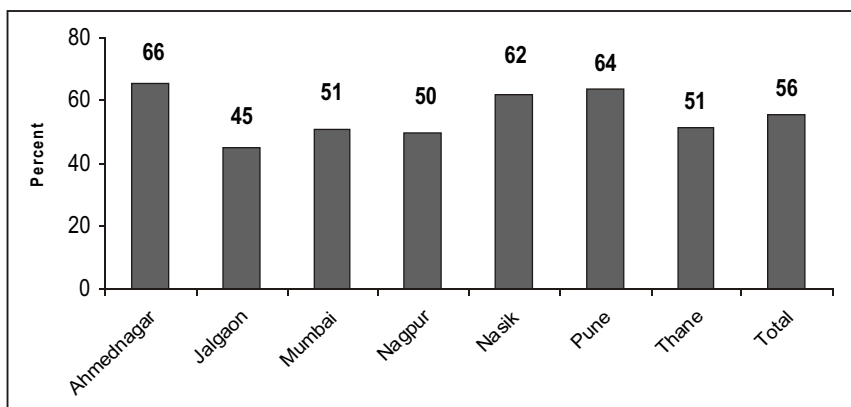
"When I started prostitution, I was 57 years old. My son is sick with AIDS. I come here at 1 pm and go back by 6 pm, my customers are in the age group of 30 to 45, who will come to me as I am much older, and even my rate is rs.200 or 400 or 100 and apart from that they have to pay Rs. 200 for the lodge some days I get one customer and some days I get two, one is my regular customer, some days I get new customer." (60 years old, street-based, separated, Thane)

4.5 Life style characteristics

More than half of the mobile female sex workers in most districts used alcohol in the month prior to the survey. The proportions of female sex workers using alcohol is highest in Ahmednagar (66 percent), followed by Nashik (62 percent) and Pune (64 percent). Drug use was reported by less than one percent of sex workers. Use of tobacco was reported by more than 80 percent of the mobile female sex workers (Table 6).



Figure 10 : Percent of mobile female sex workers who reported use of alcohol in the month prior to survey



4.6 *Autonomy*

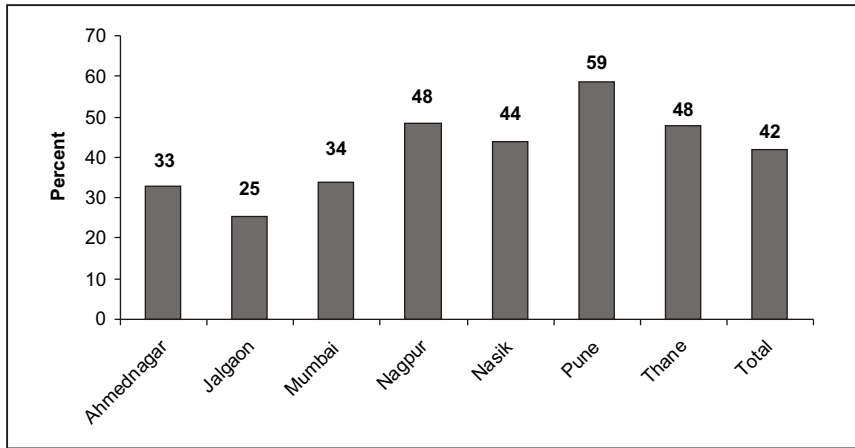
Overall, 45 percent of sex workers in Maharashtra reported having separate saving accounts in their own name. Three-fourths of mobile female sex workers in Pune and close to half in Ahmednagar, Thane, and Nashik have a savings account in their name (Table 7). This was much higher than the proportion of sex workers who had savings accounts in the other districts. The large majority (95 percent) of sex workers reported that were able to keep money aside for their needs.

"Now my father is too old so if give him some money then I save the rest of my money in the bank as I would need it in future." (25 yrs., unmarried, brothel-based, Mumbai)

Approximately 42 percent of sex workers in Maharashtra had a mobile phone. The proportion of sex workers who have cell phones in Ahmednagar, Jalgaon, and Mumbai was much lower than in the other districts (Figure 11).



Figure 11 : Percent of mobile female sex workers who reported having a cell phone

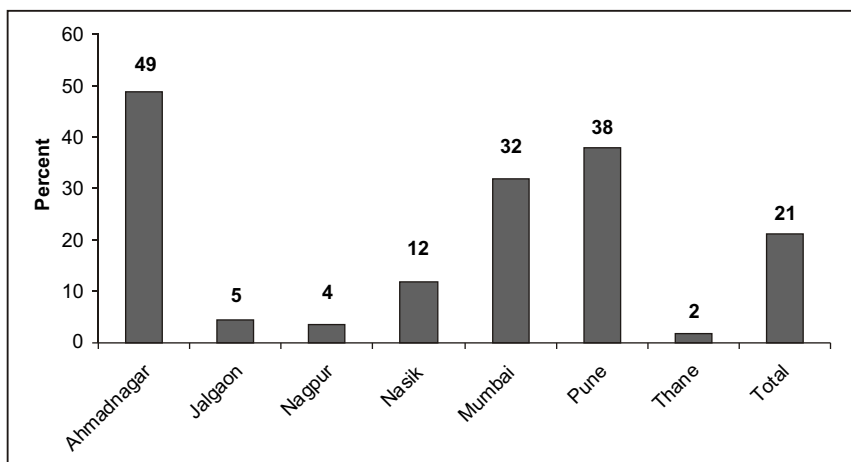


4.7 Physical violence

One-fifth of mobile female sex workers from Maharashtra reported they had experienced physical violence (beating/hitting /thrown out of the house) in the last year. Close to half of the sex workers in Ahmednagar and one-third in Mumbai and Pune reported they had experienced physical violence, whereas in other districts only about one-tenth reported experiencing violence in the last year (Figure 12). Of those sex workers who reported they had experienced violence, the main perpetrators were clients (32 percent) and rowdies (28 percent) followed by the police (24 percent) and others. Harassment from police was reported by over one-half of sex workers in Pune (see Table 8).



Figure 12 : Percent of mobile female sex workers who experienced physical violence at least once in the past year



Sex workers also report that the police harass them by threatening to put them in jail and then extort money to let them continue to practice sex work.

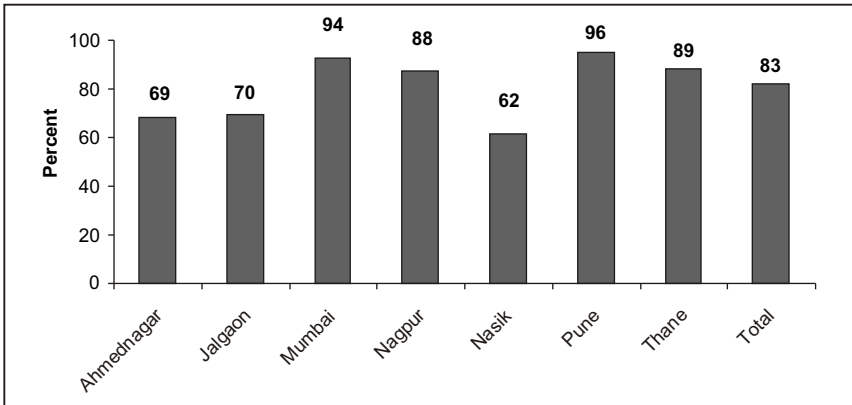
"Police come here once every 15 days and tell me they will put me in jail if I don't give them money. So I give them Rs 500 or so every two weeks." (25 years old, street based, unmarried, Pune)

4.8 Exposure to mass media and associations

Less than a fifth of the sex workers read newspaper/magazines, but more than half have listened to the radio and over three-fourths have watched television or films in the last month. The proportion of women who have watched television is the highest in Pune and Mumbai and the lowest in Nasik (62 percent) (Figure 13). In fact, the proportion of mobile female sex workers who watched television, heard the radio, or read newspapers was lowest in Nasik, indicating poor exposure to mass media (Table 9).



Figure 13 : Percent of mobile female sex workers who reported watching television in the past month



Nearly 50 percent of sex workers reported that they were members of some social organizations. The participation in NGOs/CBOs was highest in Pune followed by Ahmednagar and Jalgaon. Only one-third of sex workers in Mumbai and Thane mentioned they were members of any organization, and this proportion was even lower among sex workers in Nashik and Nagpur. Among the services received from such organizations, around 70 percent of the sex workers reported that they received condoms, 68 percent said they received knowledge about STDs, and 52 percent said they were referred to health centres. Among all the districts, it appears that sex workers in Nagpur received the fewest services from NGOs/CBOs.

"People from Saheli NGO work here and their peers give us free condoms. They also tell us about sexual diseases and how to protect us. They teach our children less than 5 years of age. They also give us tiffin to eat for Rs 15." (26 years old, brothel-based, widowed, Pune)

"They do come and give a box of condoms every month, and come and check our blood every three months, and give a check up of the whole body, so that we should not have any disease." (25 yrs old, separated, street-based, Thane)



In addition to providing HIV prevention services, some NGOs also help sex workers deal with police violence.

"If police catch you, people from Mukta Organization come immediately to help after you phone them. They pay the fine to the police and get us released. This type of help they give as no one else supports us." (22 years old, brothel-based, unmarried, Pune)





V

HIV RISK AMONG MOBILE FEMALE SEX WORKERS

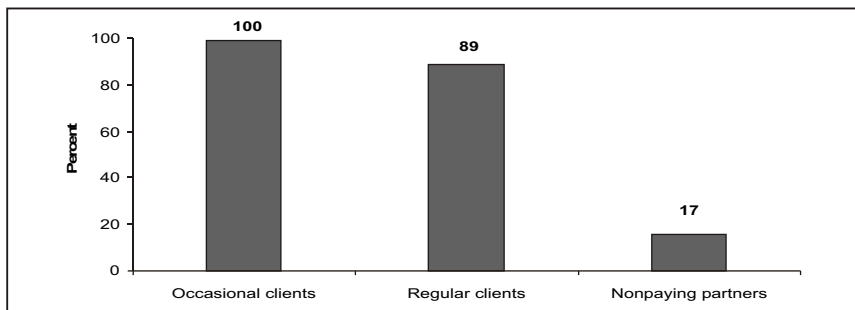
Mobile female sex workers' risk for HIV infection was measured using the indicators of consistent condom use with occasional clients, regular clients, and nonpaying partners; experience of STI symptoms in the past six months; continuing sex while having

STI symptoms; sexual violence and condom use during such incidents; and self-perception of risk for HIV. These indicators were cross-tabulated with condom negotiation variables, socio-demographic and economic characteristics, alcohol use, and violence and mobility characteristics. The association between degree of mobility and the indicators of HIV risk are examined in this chapter.

5.1 *Type of partners*

In the survey, mobile female sex workers were asked to indicate the number of partners with whom they had sex in the week prior to the survey. Almost all (99.6 percent) of the mobile female sex workers interviewed reported having sex with occasional clients in the week prior to the survey. In addition, 89 percent of mobile female sex workers reported sex with regular clients, and less than one-fifth reported sex with nonpaying partners in the week prior to the survey (Figure 14).

Figure 14 : Percent of mobile female sex workers who reported having sex with types of partners in the week prior to the survey

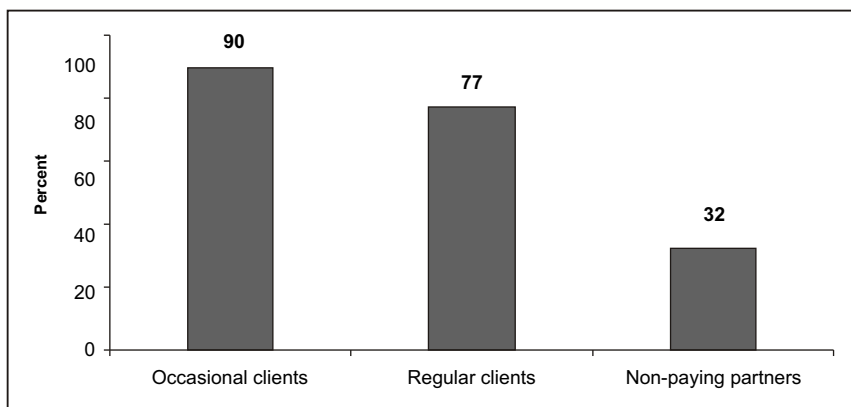




5.2 Consistent condom use with type of partners

Mobile female sex workers who reported sex with various clients were asked whether they had used condoms every time that they had sex with different types of clients in the last week. If a sex worker used condoms all the time with all clients (by type), then this is considered as consistent condom use. Analyses of consistent condom use by type of client indicate that 90 percent of mobile female sex workers used condoms consistently with occasional clients, 77 percent used condoms consistently with regular clients, and 32 percent used condoms consistently with nonpaying partners (Figure 15).

Figure 15 : Percent of mobile female sex workers who reported consistent condom use by type of clients

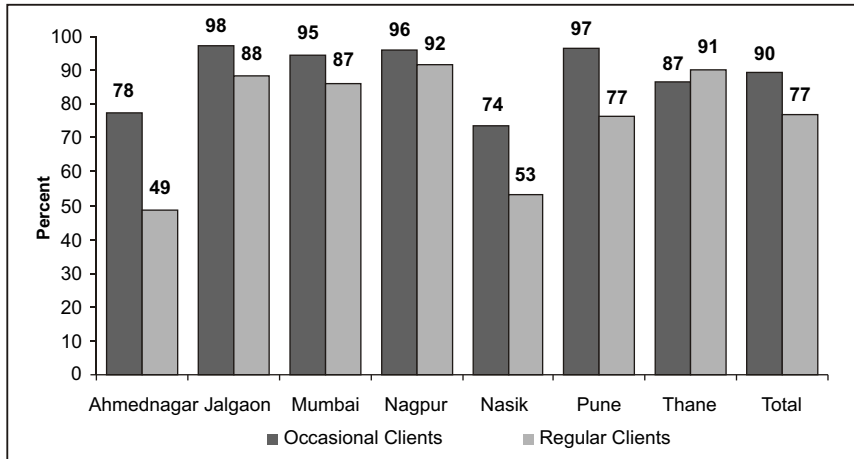


5.3 Consistent condom use with type of partners by district

The percentage of mobile female sex workers using condoms consistently with occasional clients ranged from 74 percent in Nashik to 98 percent in Jalgaon.



Figure 16 : Percent of mobile female sex workers who reported consistent condom use by type of client/partner by district



There are district-level variations in consistent condom use. A relatively higher proportion of sex workers in Jalgaon, Mumbai, and Nagpur use condoms consistently than the sex workers in other study districts. Consistent condom use specifically with regular clients is low in Ahmednagar and Nashik (see Table 10).

"I never had any boyfriend, but a truck driver was my regular customer, he used to come to me once every 4 to 5 days. He was using condoms from day one only but after some time we stopped using a condom. We started believing in each other, he was not going to anybody else apart from me, and I was not having sex with anybody else without condom." (25 years old, unmarried, brothel-based, Mumbai)

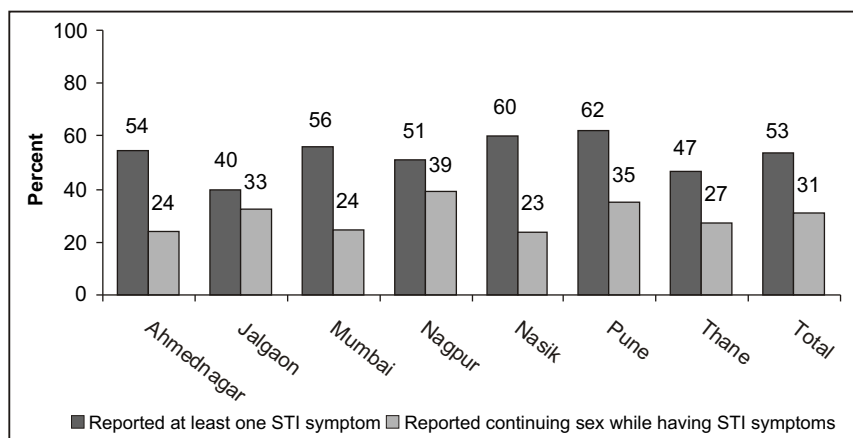
5.4 Self-reported STI symptoms

A high proportion of mobile female sex workers (40 to 62 percent) reported that they had at least one of the eight STI symptoms at least once in the past six



months. Close to one-third of the mobile female sex workers continued to have sex even after having STI symptoms (Figure 17).

Figure 17 : Percent of mobile female sex workers who reported STI symptoms and percent who continued sex work while having STIs



STI symptoms: Percentage who had at least one of the following symptoms in the last 6 months - Excessive vaginal discharge, Foul smelling discharge, Ulcers /sores in genital area, Swelling in groin area, Pain during intercourse, Itching in genital area, Pain in lower abdomen, Frequent/sometimes painful urination

About 16 percent of sex workers reported they had experienced sexual violence during sex work and were not able to use a condom. Again there were variations by district. While one-third of sex workers in Ahmednagar and Pune reported they experienced sexual violence and were unable to use condoms, in Jalgaon one-fifth reported the same and less than one-tenth in the remaining districts (Table 10).

5.5 Self-perception of HIV risk

Self-perception of HIV risk was low across districts except for Nashik and Pune, where about one-fourth of sex workers reported that they perceived themselves to be at moderate risk for acquiring HIV.



In-depth interviews indicated that sex workers felt their use of condoms with almost all their clients protected them from risk of STI and HIV.

"I was never worried (about HIV or STI), I do use condom, and check my blood every three months." (25 yrs old, separated, street-based, Thane)

While the large majority of sex workers across all districts reported that they had undergone an HIV test, a lower proportion reported they were tested voluntarily (Table 10).

5.6 Ability to use condoms and actual condom use

Condom negotiation is low in at least three of the seven study districts of Maharashtra. Slightly less than one-third (30 percent) of the mobile female sex workers reported non-use of condoms due to lack of availability. Among the study districts, the proportion of such reporting ranged from 3.6 percent in Mumbai to 63.4 percent in Ahmednagar. One-fourth of the mobile female sex workers reported non-use of condoms because of clients' refusal. The proportion of mobile female sex workers reporting non-use of condom due to clients' refusal is relatively higher in the districts of Pune (49 percent), Ahmednagar (48 percent) and Nasik (36 percent) compared to other study districts. About 70 percent of the female sex workers could convince their clients to use a condom if the clients were against it. Convincing clients for condom use is high in the districts of Pune, Jalgaon and Nasik (see Table 11).

About 70 percent of the sex workers across Maharashtra reported consistent condom use with any sexual partner. At the same time, three-fourths admitted that they have had sex without condoms with occasional clients because of unavailability of condoms. Among sex workers who said that they did not use condoms because of unavailability, 37 percent reported that they experienced physical violence and a condom was not used. Among sex workers who did not use condom because of unavailability, 70 percent had at least one STI symptom during the last 6 months and 39 percent continued to have sex despite having STI symptoms (Table 12).



One-third of all sex workers reported that they sometimes accepted the client's demand of not using a condom. 72 percent of sex workers who did not use a condom because of such use of force reported having at least one STI symptom and 38 percent reported having sex despite STI symptoms.

Sex workers were found to insist more on use of condoms with occasional clients and to a lesser extent with regular clients and nonpaying partners. Overall 31 percent of sex workers had STI symptoms during the last 6 months, and about 17 percent continued to have sex despite having STI symptoms.

There are inter-district variations in reporting lack of condom use. Sex workers in Ahmednagar and Pune were the most likely to report not using condoms because of unavailability (63 percent and 56 percent respectively) as well as because of client's insistence (48 percent and 49 percent respectively). In Mumbai, only about 4 percent mentioned they did not use condoms because they were unavailable, and 5 percent mentioned client's refusal as the reason.

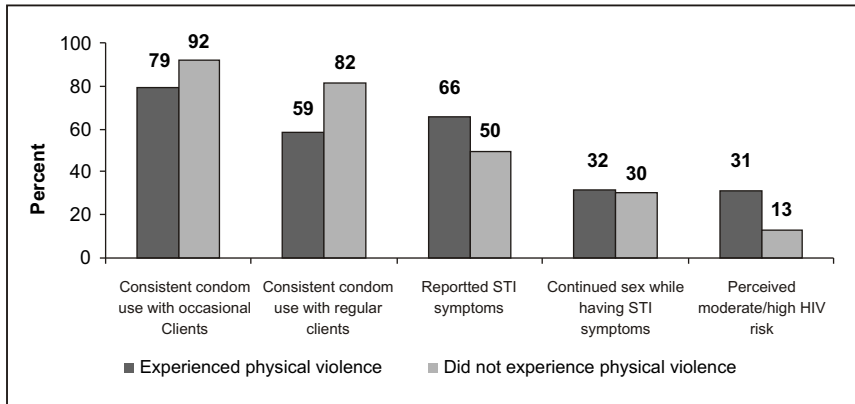
"I had sex without condoms with a few persons. What should I have done? They refused to use condoms and also gave me more money. If I keep on convincing people to use condoms, then my business will get closed." (Pune, 16)

5.7 Socio-economic insecurity and HIV risk

Those sex workers who reported violence or who consumed alcohol in the last month reported less consistent condom use as compared to those sex workers who reported they had not used alcohol and had not experienced violence. Notably HIV risk perception was substantially higher among those who had experienced physical violence (Figure 18). Condom use was more consistent among sex workers who reported sex work as their sole source of income compared with those having other income sources.

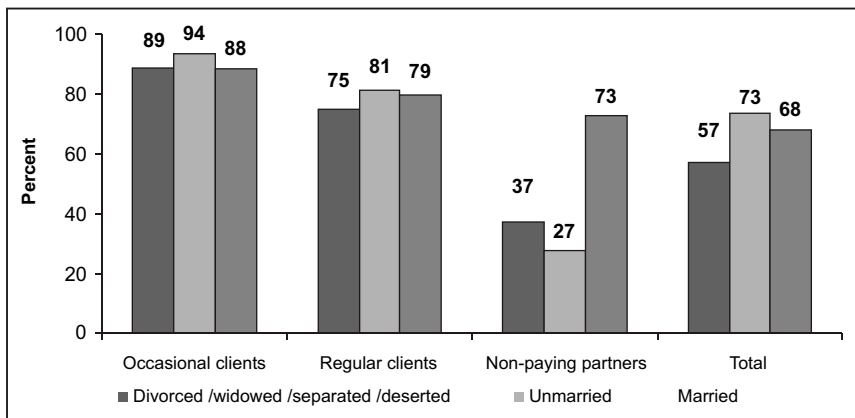


Figure 18 : Percent of mobile female sex workers who experienced physical violence and their perceived risk for HIV infection



Condom use is lowest among divorced/widowed/separated sex workers and highest among the unmarried, who also have a lower prevalence of self-reported STI symptoms in the last month.

Figure 19 : Percent of mobile female sex workers who reported consistent condom use with different partners by marital status





However, HIV risk perception is slightly lower among married sex workers. There is no regular pattern in condom use or HIV risk perception across the categories of sex workers according to their level of outstanding debt although sex workers having higher outstanding credit appear to be better informed about the risk perceptions (Table 13).

"At the end of month if I have no money to send to my parents at home, then if some customer paid me more money I would do sex with him without condom. But my madam did not know these things, although I am aware it is risky but for money I do it with good and clean-looking clients." (20 years old, unmarried, brothel-based, Thane)

"Some of my clients use condoms and some don't. If I keep on convincing people to use condoms then my business will get closed." (25 years old, separated, street-based, Ahmednagar)

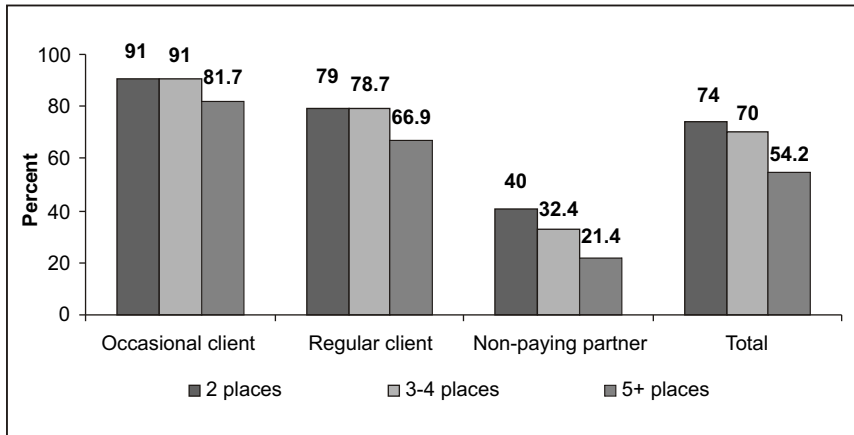
5.8 Degree of mobility and HIV risk

This study collected data from all mobile female sex workers who made at least two visits in the last two years, at least one of which was outside the district. The degree of mobility was constructed as: those who visited only 2 places, those visited 3-4 places, and those visited 5+ places. The results suggests that 36 percent of mobile female sex workers visited two places, 52 percent visited 3-4 places, and 12 percent visited 5 or more places in the last two years.

The data indicates that the number of places visited by sex workers seems to influence consistent condom use, STI symptoms, and HIV risk perception. As the mobility of the sex workers increases, there is lower use of condoms with clients (Figure 20), greater reporting of STI symptoms, and a higher risk perception of HIV infection. A similar pattern is observed for multiple moves across districts (Table 14).



Figure 20 : Percent of mobile female sex workers who reported consistent condom use with different clients by degree of mobility



During the last visit to a *Jatara*, condom use with all partners was fairly high across all study districts in Maharashtra, except for Ahmednagar where only one-third of the sex workers reported condom use (Table 3). When asked about consistent condom use with all partners, sex workers reported lower condom use when they visited *Jatara* locations or places with male migrant workers (MMW) in groups. Consistent condom use with clients varies little as duration of stay in the current place increases with the exception of use with non-paying partner where the variations range from a low of 13 percent to a high of 50 percent. Also, sex workers who visited *Jatara* or MMW locations were more likely to report STI symptoms. Reporting of STI symptoms tended to be less among those staying longer at their current place, but there are no significant differences in HIV risk perception as very few sex workers perceive themselves to be at high risk of HIV.

Consistent condom use is higher among sex workers who have been migrants for longer duration. However, for every category of migrant duration, condom use declines among those having higher mobility and those visiting more places during the migration period (Table 15). Almost equal proportions of sex



workers across all the migrant duration and mobility categories reported STI symptoms in the last six months. The lowest reporting of violence was by sex workers who had migrated over four years ago and had moved to more than four places. Risk perception of HIV, however, rises with increased mobility and increase in the number of places visited.

Consistent condom use seems to be affected by the number of places to which the sex worker has travelled. Among the separate categories of sex workers, consistent condom use is the highest among home-based sex workers who have moved only to one or two places. However, the sample size is too small to make a conclusive remark. Brothel-based sex workers seem to report the same levels of condom use irrespective of the number of places they move to. Levels of condom use decline considerably among sex workers contacted in streets, lodges, highways, and dance groups and having higher mobility and visiting more than five places. There is not much variation in having STI symptoms during last 6 months, whether by place of contact or mobility within the place of contact. Although the number of highway-based sex workers sampled for the study is small, they represent the largest proportion of sex workers who reported they experienced violence and did not use condoms. Among the larger sample of sex workers contacted in brothels and streets, close to one-fifth across all the mobility categories report they had experienced physical violence during sex and had not used condoms. Data also indicates that risk perception of HIV increases slightly with an increase in the number of places travelled to for sex workers contacted in streets, home, highway, and dance groups (Table 16).



VI

IMPLICATIONS FOR HIV PREVENTION PROGRAMES ACCORDING TO PLACE OF SOLICITATION AND SEX

Female sex workers in Maharashtra are highly mobile (over half moved to at least once across the district for sex work) and on average each mobile sex worker had visited 1.7 districts in last two years. To target such highly mobile female sex workers in HIV

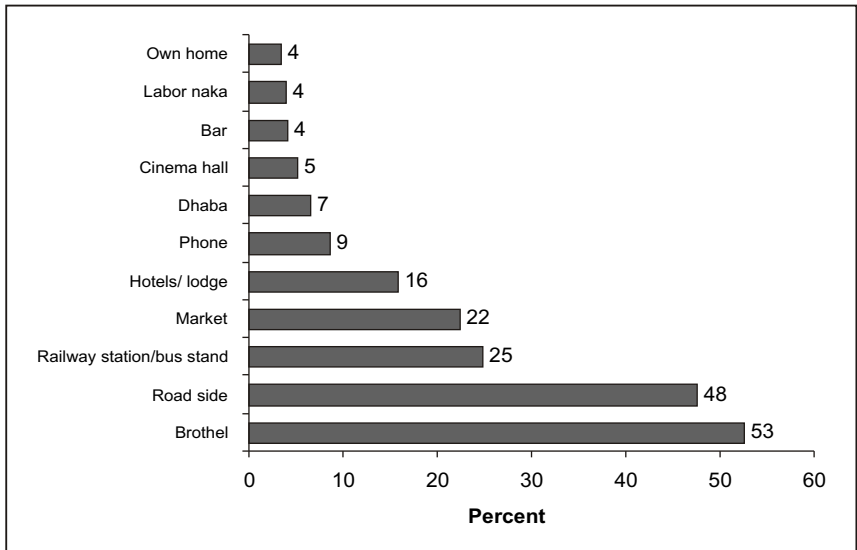
prevention programs requires a comprehensive understanding of their places of solicitation and sex. This chapter provides information on the places where the sex workers solicit clients and places where they have sex and emphasizes the need for targeting sex workers who solicit clients or have sex in certain locations. Using the commonly listed five places of solicitation or sex, the anticipated percentage of mobile sex workers being covered by programs has also been calculated. Further, the number of times each mobile sex worker interacts with HIV prevention programs was estimated.

6.1 *Places of solicitation and places of sex*

In Maharashtra, mobile sex workers solicit customers for sex in multiple places. The most commonly mentioned place was brothels (53 percent), followed by roadside (48 percent) and railway station/bus stand (25 percent) and the marketplace (22 percent) (Figure 21). There is some degree of inter-district variation in the major place of solicitation for sex. Brothels continue to be the major solicitation point for some districts, whereas for Pune, Nagpur, Mumbai, and Thane road side solicitations are predominant (Table 17).



Figure 21 : Percent distribution of mobile female sex workers according to places of solicitation for clients



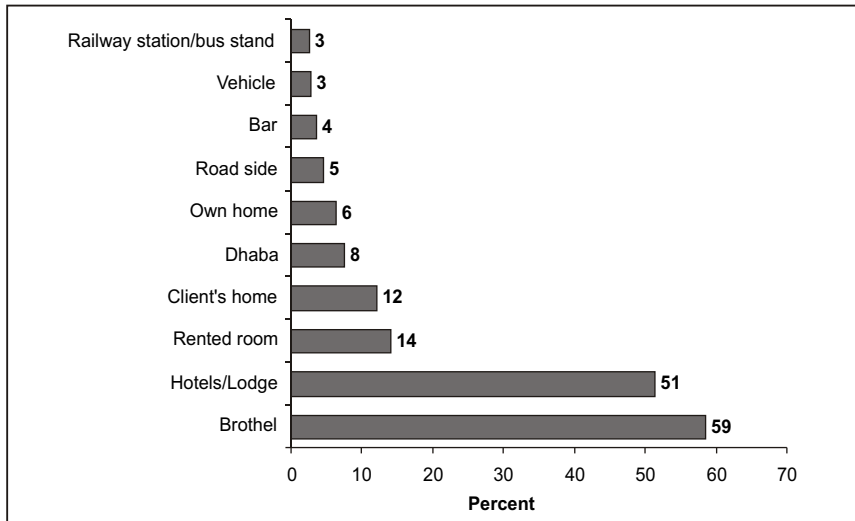
A street-based sex worker provided some details of how the lodges function when she was asked where she takes her customers for sex.

"I take them to the pravasi lodge near vasai ST depot, there we have to pay Rs. 200 for the lodging. This popular lodge is for such kind of work. The lodge managers have good relation with police and provide money to them on a regular basis for us to continue our work." (25 yrs old, separated, street-based, Thane)

Similarly, sex workers listed numerous sites where they had sex with their customers (Figure 22). Some 60 percent of the sex workers on average cited brothels as the most likely place for sex in most of the districts, reflecting a similar pattern with the place of solicitation. Hotels and lodges also constitute an important place of having sex in most of the districts, notably in Ahmednagar, Pune, Nagpur, and Thane (Table 17).



Figure 22 : Percent distribution of mobile female sex workers according to places where they have sex with clients



On examining the association between the place of contact and place of solicitation, it was evident that brothels and hotels/lodges were the two most commonly mentioned places for solicitation and sex. While the majority of sex workers contacted at brothels solicit and have sex in brothels, one-third also mentioned hotels. Hotels were also mentioned as places of solicitation and sex by the majority of those sex workers who were contacted in lodges, streets, and home.

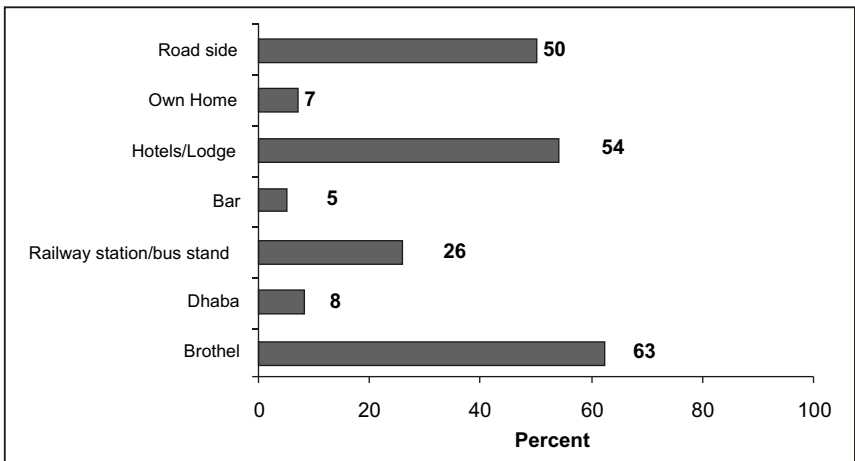
The other two prominently mentioned places for solicitation and sex were *dhabas*, mentioned by 79 percent of the sex workers contacted at highways, and railway stations/bus stands, mentioned by 67 percent of street-based sex workers. Also, bars were mentioned by one-third of the sex workers contacted at home. Thus, HIV prevention programs that seek to ensure better coverage of their interventions with sex workers can do so by focusing on the major five places listed in Table 18.



6.2 Strategies to cover mobile female sex workers in HIV prevention programs

To better inform programs about where and how to achieve optimal coverage of sex workers, researchers attempted to identify the proportion of sex workers who can be reached at different combinations of places of solicitation/sex. Data in Table 19 indicates that 84-100 percent of the sex workers can be contacted by covering three to five places that include brothels, railway station/bus stand, *dhabas*, bars, and hotels/lodges (Figure 23).

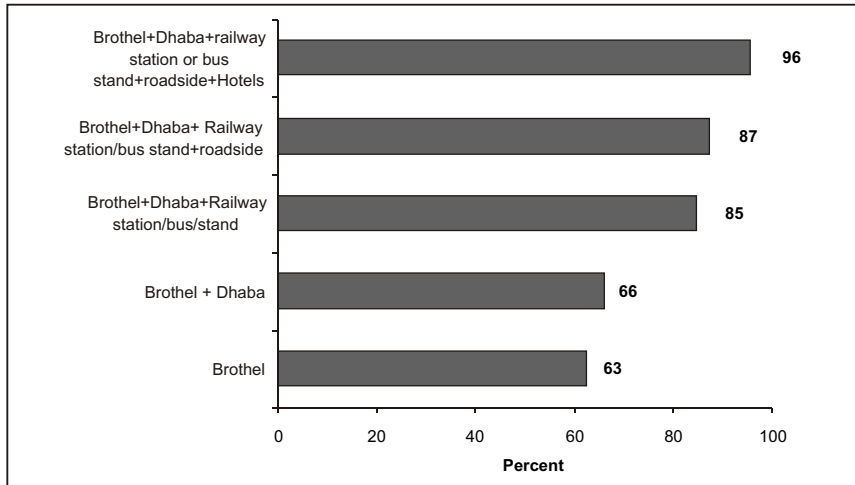
Figure 23 : Percent distribution of mobile female sex workers according to places where they either solicit clients or have sex



Currently, most intervention programs reach sex workers in brothels, *dhabas*, and roadside. If they also include hotels, bars, and railway stand/bus stops in their coverage areas they will reach almost all the mobile sex workers in the area. Also, if these five places are targeted by programs in each district, close to half the sex workers would receive at least one dose of intervention and one-third would receive two doses of intervention in a short time (see Table 19).



Figure 24 : Anticipated HIV programme coverage of mobile female sex workers if programme is implemented in the following places



If hotels are included as places of intervention in sex worker-targeted programmes (Figure 24), then it is likely that more than 95 percent of the mobile female sex workers will be covered under the programme.

Additionally, program focus on bars increases the coverage of mobile female sex workers significantly in the districts of Mumbai and Thane.

6.3 Conclusion and recommendations

Results indicate that over half of sex workers interviewed had moved at least once for sex work in the last two years, and a somewhat smaller portion had moved at least once across the district. On average, female sex workers had made 2.8 moves in the past two years for sex-work purposes and 1.7 of these moves were made across the district. Inter-district variation was evident in mobility patterns of sex workers. Female sex workers from Nashik, Nagpur, and Pune were more mobile than those from other districts. Women practicing sex work at home and in dance groups were more mobile as compared to



brothel and highway based workers, who were the least mobile. Mobility among female sex workers was the highest among sex workers aged 25 to 34 years.

This study also provided insights into the main mobility routes for female sex workers in the selected seven districts. Mumbai is one of the main places visited by sex workers from all the districts, as are the neighbouring districts of Pune and Thane. In the north of the state, there is strong connectivity between Nasik, Ahmednagar, and Jalgaon. Nagpur has stronger connectivity to its neighbouring districts in the east of Maharashtra. In the south of the state, strong connectivity is observed between Pune and Solapur and between Satara and Kolhapur. Strong inter-state connectivity is observed between Maharashtra and West Bengal, Andhra Pradesh, and Karnataka

Another type of mobility that was highlighted was related to Jataras or religious fairs. Close to half of sex workers reported they had been to a Jatara in the past year. However, it appears that travel to Jataras is most common among female sex workers from Pune, where close to three-fourths had visited a Jatara in the last year as compared to only one-third in all other districts. The southern districts of Solapur, Sangli, and Kolhapur were the most important Jatara places visited by sex workers in Maharashtra.

One-third of the mobile female sex workers interviewed in Maharashtra were in the age group 25-29 years and one-fourth in the age group 30-34 years. About half of these mobile female sex workers had never been to school, while one-third had completed less than the secondary level. At the time of the interview, half of the mobile female sex workers in the state were divorced/ widowed/ separated, and one-fourth were unmarried. In the month preceding the survey, alcohol consumption was reported by close to half of the sex workers interviewed in all districts, with the highest levels reported in Ahmednagar and Pune. While only one-fifth of the sex workers reported they experienced violence in the last year, again the highest reporting was from sex workers in Ahmednagar (49 percent) and Pune (38 percent).



Membership in a self-help group, community-based organization, non-governmental organization, or sex workers' collective was reported by the large majority of sex workers in three of the seven districts. In Nasik, Nagpur, Mumbai, and Thane, on the other hand, less than one-third reported being a member of any organization. This also translated into fewer sex workers from these four districts who reported receiving any services or information from the organizations.

Despite the disparities in the above-mentioned program coverage, there was not much difference across the districts when it came to female sex workers' reported condom use at last sex with occasional clients. While over three-fourths of sex workers in all districts reported condom use with occasional clients, there were large variations in condom use with regular clients and nonpaying partners. In fact, the lowest proportion of sex workers who reported condom use with any client was in Ahmednagar, the district with the second highest membership in any social organization and contact by outreach workers.

Consistent condom use was seen to be linked with physical violence, alcohol use, source of income, and marital status. Female sex workers who did not report violence were more likely to use condoms with all types of clients, as were those who did not use alcohol in the last month, those who earned their income from sex work only, and those who were unmarried.

In terms of assessing the link between mobility and HIV risk, sex workers going to more places report less condom use with all types of partners and slightly more STI symptoms compared to those going to fewer places. Also, female sex workers going to Jataras are at higher risk for HIV compared to those who do not. Among female sex workers who report going to Jataras, those who went in a group rather than alone report lower condom use with any type of partner and higher STIs symptoms, and they are more likely to continue to have sex while having STIs symptoms.



The study also identified the various places of solicitation and sex among female sex workers. While clients were solicited in multiple places, the most common place of solicitation was in brothels, followed by roadside and railway station/ bus stand, markets, and hotels/lodges. Brothels and lodges were the two most commonly mentioned places for having sex. Hotels/lodges were mentioned as places for sex by the majority of sex workers contacted in lodges, street, and home.

The top five places for solicitation/sex were identified as brothels, hotels/lodges, railway stations/ bus stands, *dhabas*, and bars. If HIV prevention programs cover these five places simultaneously, they can reach all sex workers in Ahmednagar and Nagpur, more than 95 percent of mobile female sex workers in Pune and Thane, and more than 85 percent in Mumbai, Jalgaon, and Nasik.





APPENDIX

Table 1 : Volume of mobility by district, type of place, place of contact, age-group

Characteristics	Percent of FSWs with specified number of moves in the last two years			Percent of FSWs with specified number of moves across district in the last 2 years			Mobile FSWs: 2+ moves and at least one across district	% moved out of state at least once in the last two years	Total N
	1+	2+	Average	1+	2+	Average			
District	%	%		%	%		%	%	
Ahmednagar	44.6	35.5	2.5	37.5	12.9	1.5	32.7	11.7	529
Jalgaon	71.9	66.3	2.5	68.4	26.0	1.5	65.3	13.8	196
Mumbai	55.0	43.9	2.3	37.3	17.4	1.9	32.9	32.5	569
Nagpur	71.2	66.6	3.1	59.9	27.3	1.7	56.7	16.6	344
Nasik	78.0	66.5	3.4	70.5	49.3	2.4	62.6	15.0	227
Pune	65.3	56.9	3.0	53.4	21.4	1.5	48.2	15.6	383
Thane	71.1	66.2	2.9	56.0	27.6	1.8	50.2	41.8	225
Type of place									
Urban	61.5	53.4	3.0	49.0	22.7	1.8	44.6	21.6	2,076
Rural	61.8	84.3	2.6	56.4	24.4	1.8	49.7	17.6	397
Place of contact									
Brothel	54.3	45.6	2.6	47.3	23.9	1.9	42.0	20.0	1,453
Lodge	66.7	57.8	3.2	55.6	24.4	1.9	53.3	17.8	45
Street	72.5	64.9	3.1	52.7	18.5	1.6	48.8	22.6	743
Home	80.2	78.0	4.0	69.5	40.7	2.0	65.9	37.4	91
Highway	56.3	44.6	2.7	65.5	15.2	1.4	39.3	17.0	112
Dance group	96.6	82.8	4.2	79.3	62.1	2.9	75.9	0.0	29
Age group									
15-19	30.6	20.8	2.4	23.6	6.9	1.5	19.4	5.6	72
20-24	58.2	50.4	2.8	48.8	21.7	1.7	44.8	22.8	450
25-29	65.2	55.6	2.8	50.5	22.5	1.7	44.6	25.8	774
30-34	66.5	58.8	3.0	56.2	26.8	1.7	52.1	21.6	541
35-39	59.9	52.6	3.0	48.2	24.0	2.0	44.1	14.3	392
40+	56.6	48.8	3.0	48.8	21.3	1.8	43.9	15.6	249
Total %	61.5	53.2	2.8	50.2	23.0	1.7	45.4	21.0	
Total N	2,473	2,473	1,522	2,473	2,473	1,241	2,473	2,473	2,473

Source: Screening questionnaire



Table 2 : Volume of mobility by age group and place of contact

	A. Nagar	Jalgaon	Mumbai	Nagpur	Nasik	Pune	Thane	Total %	Total N
Age group									
15-19	42.9	--	20.0	18.8	60.0	13.8	--	19.4	72
20-24	35.6	61.8	29.6	52.6	59.4	52.7	50.0	44.8	451
25-29	33.6	61.8	33.1	64.2	48.9	46.1	47.6	44.6	774
30-34	37.8	76.2	43.6	51.7	68.2	56.9	37.8	52.1	541
35-39	26.7	71.0	24.3	62.5	69.6	60.0	47.4	44.1	392
40+	23.7	76.0	28.3	55.6	63.6	50.0	43.5	43.9	244
Place of contact									
Brothel	32.8	61.9	27.8	51.2	63.6	36.1	44.4	42.0	1,453
Lodge	27.8*	100.0*	100.0*	100.0*	61.5	70.0	0.0	53.3	45
Street	29.2	87.5	37.1	64.3	62.7	56.5	46.2	48.8	744
Home	100.0*	100.0*	51.4	100.0*	33.3	83.9	82.1	65.9	91
Highway	36.0	82.0	50.0	100.0*	72.7	66.7	0.0	39.3	112
Dance group	--	82.4	--	--	--	--	--	75.9	29
Total %	33.7	65.3	32.9	56.7	62.6	48.2	50.2	45.4	
Total N	529	196	569	344	227	384	225		2,473

* based on less than 10 cases

Source : Screening questionnaire

- = not applicable





Table 3 : *Jatara*-related mobility and condom use by district

	A.Nagar %	Jalgaon %	Mumbai %	Nagpur %	Nasik %	Pune %	Thane %	Total %
Visited <i>Jatara</i> in last 12 months								
Yes	30.6	34.1	6.3	34.2	37.6	74.0	6.6	31.1
No	69.4	65.9	9.8	65.8	62.4	26.0	93.3	68.9
Visited in group[#]								
Group	16.1	32.6	57.1	36.4	32.0	44.3	70.0	36.5
Alone	83.9	67.4	42.9	63.6	68.0	55.7	30.0	63.2
Clients type in <i>Jatara</i> (last visit)^{##}								
Male migrants from other places	75.0	71.4	40.0	81.0	56.3	23.9	100.0	61.2
Male migrants for the same district	20.0	21.4	40.0	11.9	37.5	68.8	0.0	31.1
Local non-migrant men	5.0	7.1	20.0	7.1	6.3	6.1	0.0	6.7
Condom use with clients in last visit to <i>Jatara</i>^{##}								
with everyone	33.3	84.6	80.0	85.7	64.3	83.3	100.0	75.8
with some people	44.1	15.4	0.0	14.3	28.6	16.7	0.0	19.5
None	72.2	0.0	20.0	0.0	7.1	0.0	0.0	4.7
Total N	183	126	224	193	133	177	152	1,188

[#] for those who visited *Jatara* areas

^{##} for those who visited *Jatara* area in the last 12 months and had sex





Table 3a : Name and place of different *Jataras* in Maharashtra

District	Place of Jataka	Name of Jataka
Amrawati	Bahiram	Khandobha
Nasik	Naitale	Saptshrungi (Vani)
Nasik	Naitale	Matoba
Solapur	—	Chaita
Solapur	—	Ashadhi
Solapur	—	Ambabai
Solapur	—	Sidheshwar
Sangli	Karsundi	Birdev
Sangli	Karsundi	Bharaivnath
Aurangabad	Paithan	Eknath Shasthi
Ahmednagar	Madhi	Bhagwati
Ahmednagar	Madhi	Kanifnath
Satara	Sikhar-Signapur	Shambhu Mahadev
Kolhapur	Wadi	Ambabai
Kolhapur	Wadi	Kalbhaivav
Kolhapur	Wadi	Jyotiba
Osmanabad	Tuljapur	Tuljapur Devi

- = not specific





Table 4 : Socio-Economic and Demographic profile of mobile female sex workers[#] by district

Characteristics	A.Nagar	Jalgaon	Mumbai	Nagpur	Nasik	Pune	Thane	Total	Total
	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	N
Age group									
19-24	22.6	16.4	16.2	22.0	15.5	23.6	13.6	18.8	235
25-29	27.4	20.6	49.2	45.0	16.9	27.5	28.6	33.6	421
30-34	26.3	25.0	21.5	16.0	31.7	22.0	29.9	24.6	300
35-39	16.1	17.2	8.8	12.0	22.5	15.9	16.2	14.8	185
40+	7.5	14.8	4.2	5.0	13.4	11.0	11.7	8.9	111
Education									
Illiterate	59.6	65.9	44.2	37.8	45.1	43.5	46.1	48.1	571
<Primary (1-4 class)	14.2	11.1	17.9	12.4	21.1	24.9	16.4	16.9	201
Primary, <secondary 5-9 class)	23.0	17.5	30.8	42.5	29.3	28.2	40.9	29.5	351
High school+ (10+ class)	3.3	5.6	7.1	7.3	4.5	3.4	6.6	5.5	65
Marital Status									
Divorced/widowed/ separated									611
Unmarried	68.9	54.8	46.4	41.5	66.9	48.6	37.5	51.4	269
Married	14.2	22.2	30.4	39.5	12.0	18.6	13.8	22.6	308
Sources of Income									
Sex work only	86.9	77.8	82.1	76.2	71.4	68.9	58.6	75.3	894
Sex work + other sex- related work						5.1			78
	1.6	8.7	4.0	9.8	10.5		8.6	6.6	
Sex work + other sources						26.0			216
	11.5	13.5	13.8	14.0	18.0		32.9	18.2	
How much money do you owe currently?									
None	74.9	51.6	76.3	72.0	81.2	46.9	76.3	68.9	819
<1000	3.8	4.0	6.3	1.6	2.3	1.7	3.3	3.4	40
1001-10000	14.8	31.0	8.0	12.4	6.8	24.9	9.2	14.9	175
10001-50000	6.6	4.7	6.7	9.8	7.5	24.9	10.5	11.1	132
50001+	0.0	0.8	2.7	4.1	2.3	1.7	0.7	1.9	22
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Total N	183	126	224	193	133	177	152	1,188	

[#] those who are at least 18 years old, have moved at least two places in the last two years and one of the two places is across district



Table 5 : Reasons for entry into Sex work

Reasons	Ahmednagar %	Jalgaon %	Mumbai %	Nagpur %	Nasik %	Pune %	Thane %	Total %
By force	21.2	14	8.0	5.9	16.0	16.3	15.2	13.1
Economic conditions with debt	25.3	25.0	29.3	22.0	26.0	41.0	24.0	28.3
Economic conditions without debt	44.1	47.1	49.1	43.0	32.0	34.3	36.2	41.3
Family tradition	2.0	3	0	18.3	3.0	3.1	1.0	4.2
Own choice/interest	8.1	11.2	14.0	12.0	24	7.1	24.0	13.7
Total (N)	183	126	224	193	133	177	152	1,188

Table 6 : Mobile female sex workers' use of tobacco, alcohol and drugs in last month

	Ahmednagar	Jalgaon	Mumbai	Nagpur	Nasik	Pune	Thane	Total
Personal habits in the last month	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)
Used tobacco	83.1	78.6	80.4	88.1	82.7	83.1	80.9	82.6
Used alcohol	65.6	45.2	50.9	49.7	61.7	63.8	51.3	55.6
Used drugs	0.5	0.0	0.9	0.0	0.0	0.6	0.7	0.4
Total N	183	126	224	193	133	177	152	1,188

Table 7 : Percent of mobile female sex workers who have access to bank account, separate money, and cell phone

Autonomy	A.Nagar (%)	Jalgaon (%)	Mumbai (%)	Nagpur (%)	Nasik (%)	Pune (%)	Thane (%)	Total (%)
% women have separate bank/Post office accounts	52.5	34.1	32.9	25.6	50.4	75.1	52.3	45.4
% empowered to have money set aside	99.5	90.5	92.3	91.8	95.5	100.0	98.0	95.3
% have Cell Phones	32.9	25.4	34.0	48.2	43.6	58.8	47.7	41.8
Total N	183	126	224	193	133	177	152	1,188



Table 8 : Percent of mobile sex workers who experienced violence, and perpetrators of violence, in the last year by district

Characteristics	A.Nagar (%)	Jalgaon (%)	Mumbai (%)	Nagpur (%)	Nasik (%)	Pune (%)	Thane (%)	Total (%)
Experienced physical violence in the current place								
Often	11.5	1.6	0.9	4.1	6.0	7.9	2.0	4.9
Sometimes	36.6	0.8	2.2	1.6	21.8	29.9	--	13.3
Rarely	0.5	2.4	1.3	6.7	4.5	0.0	--	2.2
Never	51.4	95.2	95.5	87.6	67.7	62.1	98.0	79.6
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total N	183	126	224	193	133	177	152	1,188
Source of Violence[#]								
Police	5.7	20.0	--	11.1	19.5	56.3	--	23.9
Clients	34.5	60.0	50.0	33.3	41.5	18.8	--	32.1
Rowdies	54.0	--	--	5.6	9.8	14.1	--	28.4
Others	5.7	20.0	50.0	50.0	29.3	10.9	--	15.6
Total %	100.0	100.0	100.0	100.0	100.0	100.0	--	100.0
Sample(n)	88	5	2	18	41	64	--	242

[#] Among those who experienced violence

-- not applicable

Table 9 : Mobile female sex workers' exposure to media

Media exposure in the last month	Ahmednagar	Jalgaon	Mumbai	Nagpur	Nasik	Pune	Thane	Total
Read newspaper/magazine	14.2	8.7	24.6	27.5	9.8	29.9	17.1	19.9
Listen to radio	43.2	42.9	78.6	57.0	38.3	54.8	50.0	54.1
Watch movie/Television	68.9	69.8	93.8	88.1	61.7	95.5	88.8	82.5



Table 10 : Mobile female sex workers' HIV vulnerability by district

Vulnerability characteristics	A.Nagar (%)	Jalgaon (%)	Mumbai (%)	Nagpur (%)	Nasik (%)	Pune (%)	Thane (%)	Total (%)
Ability to use condom								
Have there been times condom not available and hence not used?	63.4	13.5	3.6	15.5	40.6	55.9	19.1	29.7
Have there been times when customer refused to use condom and you agreed?	47.5	16.7	4.9	13.0	36.1	49.2	17.1	25.7
Have there been times when customer refused to use condom but you convinced him to use it?	75.4	81.7	53.1	65.8	72.2	96.0	65.8	71.8
Consistent condom use with								
Occasional clients	78.1	97.6	95.1	96.4	74.0	96.8	86.8	89.7
Regular clients	48.8	88.4	86.8	92.1	53.3	76.8	90.8	77.3
Occasional/regular clients	50.8	89.7	87.5	91.7	58.6	76.8	81.6	77.2
Nonpaying partner	14.3	10.0	57.9	36.8	42.1	25.4	40.1	32.2
Any client ¹	44.8	84.9	83.9	83.4	51.9	56.5	78.9	69.6
% who had STI symptoms²	54.1	39.7	55.8	50.8	60.2	62.1	46.7	53.3
% who have STI symptoms and continue to have sex³	23.5	32.5	24.1	38.9	23.3	34.6	27.0	30.6
% who experienced sexual violence and did not use condom⁴	37.7	19.0	2.2	9.3	14.3	34.5	0.7	16.6
HIV risk perception⁵								
High	1.1	1.6	1.8	0.0	3.8	11.3	2.6	3.1
Moderate	12.0	15.1	2.2	9.8	24.1	28.8	7.2	13.4
Low	86.9	83.3	96.0	90.2	72.2	59.9	90.1	83.5
% tested for HIV	83.1	82.5	83.0	88.6	98.5	97.7	93.4	89.1
% went for voluntary testing of HIV	68.8	68.0	62.3	75.0	62.0	42.3	70.8	64.0
Total N	183	126	224	193	133	177	152	1,188

¹ Consistent condom use computed taking the weighted average of the clients that she had sex with

² percentages of sex workers who had any of the following symptoms in the last 6 months: Excessive vaginal discharge, Foul smelling discharge, Ulcers /sores in genital area, Swelling in groin area, Pain during intercourse, Itching in genital area, Pain in lower abdomen, Frequent/sometimes painful urination

³ percentages refers to all sex workers who had at least one of the STI symptoms and continue to have sex out of the total female sex workers interviewed

⁴ percentages refer to any partners who beat /physically forced women to have sex without using a condom out of the total female sex workers interviewed

⁵ percentages refers to the self-perception of risk for HIV infection



Table 11 : Availability and ability to use condoms

	Ahmednagar %	Jalgaon %	Mumbai %	Nagpur %	Nasik %	Pune %	Thane %	Total %
% reporting non use of condom due to no - availability	63.4	13.5	3.6	15.5	40.6	55.9	19.1	29.7
% reporting no use of condom due to clients refusal	47.5	16.7	4.9	13.0	36.1	49.2	17.1	25.7
% reporting use of condom after successful negotiation with a client	75.4	81.7	53.1	65.8	72.2	96.0	65.8	71.8
Total (N)	183	126	224	193	133	177	152	1,188





Table 12 : Ability to use condoms and actual condom use among mobile female sex workers

Characteristics	Consistent condom use				% had STI symptoms in the last 6 months ²	Have STI symptoms and continued to have sex ³	% experienced sexual violence and did not use condom ⁴	HIV Risk perception ⁵		Total N
	Occasional clients	Regular clients	Nonpaying partners	Any client ¹				High	Moderate	
Ability to use condom										
<i>Have there been times condom not available and hence not used?</i>										
Yes	74.4	45.7	21.6	34.8	70.8	38.8	37.1	8.2	27.8	353
No	96.1	91.2	41.9	84.3	44.9	27.2	7.9	1.0	7.3	835
<i>Have there been times when customer refused to use condom and you agreed?</i>										
Yes	72.2	42.2	21.6	30.5	71.8	38.4	36.7	9.8	31.5	305
No	95.7	89.9	40.4	83.1	46.9	28.0	9.6	0.8	7.1	883
<i>Have there been times when customer refused to use condom but you convinced him to use it?</i>										
Yes	98.8	74.0	29.5	65.8	58.6	35.1	20.0	4.1	16.5	853
No	91.9	85.5	39.6	79.4	39.7	19.4	7.8	0.6	5.4	335
Total %	89.7	77.3	32.2	69.9	53.3	30.6	16.6	3.1	13.4	
Total N	1,183	1,055	202	1,188	1,188	1,188	1,188	1,188	1,188	1,188

¹ Consistent condom use computed taking the weighted average of the clients that she had sex with

² percentages of sex workers who had any of the following symptoms in the last 6 months: Excessive vaginal discharge, Foul smelling discharge, Ulcers /sores in genital area, Swelling in groin area, Pain during intercourse, Itching in genital area, Pain in lower abdomen, Frequent/sometimes painful urination

³ percentages refers to all sex workers who had at least one of the STI symptoms and continue to have sex out of the total female sex workers interviewed

⁴ percentages refer to any partners who beat /physically forced women to have sex without using a condom out of the total female sex workers interviewed

⁵ percentages refers to the self-perception of risk for HIV infection



Table 13 : Socio-economic insecurity and HIV vulnerability among mobile female sex workers

Characteristics	% mobile FSWs who consistently use condom with				% had STI symptoms in the last 6 months ²	% who have STI symptoms and continue to have sex ³	% experience violence and not used condom ⁴	HIV Risk perception ⁵		Total
	Occasional clients	Regular clients	Non-paying partners	Any client ¹				High	Mode rate	
Physical violence in the last one year										
Yes	79.3	58.7	27.4	43.4	66.1	32.2	45.5	4.1	26.9	242
No	92.3	82.2	36.4	76.3	50.0	30.2	9.2	2.9	9.9	946
Alcohol use in the last month										
Yes	89.5	74.5	27.2	66.5	59.2	36.5	19.8	3.9	16.8	660
No	89.0	80.7	40.3	73.5	45.8	23.3	12.4	2.1	9.1	528
Source of Income										
Sex work only	90.5	77.4	28.6	71.6	51.1	28.7	16.2	2.8	10.5	894
SW+ SW related	83.3	71.4	52.6	65.4	55.1	32.1	6.4	6.4	26.9	78
SW+ non-SW related	88.7	78.9	32.8	63.0	61.6	38.0	21.8	3.2	20.4	216
Owe money										
None	88.6	75.3	35.2	69.6	51.3	29.4	13.7	3.2	10.9	819
<1,000	82.5	77.1	0.0	75.0	47.5	17.5	20.0	0.0	5.0	40
1,001-10,000	92.6	80.9	34.4	72.6	55.4	34.3	23.4	3.4	17.1	175
10,001-50,000	95.5	84.0	28.2	65.2	64.4	35.6	25.0	3.5	24.2	132
50,001+	85.5	75.0	0.0	63.6	54.5	40.9	13.6	0.0	27.2	22
Marital Status										
Divorced /widowed /separated /deserted	88.7	74.5	37.1	67.4	58.9	32.1	17.2	4.4	13.9	611
Unmarried	93.6	81.1	27.1	74.0	44.6	26.0	13.0	0.7	10.8	269
Married	88.2	79.4	72.5	70.1	49.7	31.8	18.5	2.6	14.6	308
Total %	89.7	77.3	32.2	69.9	53.3	30.6	16.6	3.1	13.4	
Total N	1,183	1,055	202	1,188	1,188	1,188	1,188	1,188	1,188	1,188

¹ Consistent condom use computed taking the weighted average of the clients that she had sex with

² percentages of sex workers who had any of the following symptoms in the last 6 months: Excessive vaginal discharge, Foul smelling discharge, Ulcers /sores in genital area, Swelling in groin area, Pain during intercourse, Itching in genital area, Pain in lower abdomen, Frequent/sometimes painful urination

³ percentages refers to all sex workers who had at least one of the STI symptoms and continue to have sex out of the total female sex workers interviewed

⁴ percentages refer to any partners who beat /physically forced women to have sex without using a condom out of the total female sex workers interviewed

⁵ percentages refers to the self-perception of risk for HIV infection



Table 14 : Mobility and HIV vulnerability among mobile female sex workers

Mobility /Migration characteristics	% mobile FSWs who consistently used condom with				% had STI symptoms in the last 6 months ²	% who have STI symptoms & continued to have sex ³	% experienced sexual violence and did not use condom ⁴	HIV Risk perception ⁵		Total N
	Occasional clients	Regular clients	Nonpaying partners	Any client ¹				High	Moderate	
Number of moves										
1-2 places	90.5	78.7	40.0	74.3	53.3	26.2	17.9	1.9	10.4	424
3-4 places	91.0	78.7	32.4	70.0	52.3	32.9	15.8	4.2	14.2	620
5+ places	81.7	66.9	21.4	54.2	57.6	34.0	16.0	2.9	18.8	144
Number of moves across districts										
1-2 districts	90.7	78.7	30.8	71.2	52.8	31.4	17.8	3.1	12.4	995
3+ districts	84.7	69.9	37.2	68.0	56.3	27.1	9.9	3.1	18.8	192
Visit to Jatarā										
No	90.9	81.1	41.6	76.7	48.2	25.7	12.5	2.0	7.7	818
Alone	92.6	73.8	36.0	65.4	58.1	39.0	17.6	10.3	9.6	136
Group	83.5	67.1	21.6	47.4	68.4	43.2	30.3	3.0	35.5	234
Visit to MMW Places										
No	90.1	77.5	33.9	70.7	52.0	29.3	16.2	3.3	12.7	1,128
Alone	94.1	88.9	11.1	55.6	88.9	72.2	22.2	0.0	16.7	18
Group	76.2	66.7	25.2	47.6	73.8	47.6	23.8	0.0	31.0	42
Duration of stay in the current place										
<=1 year	88.5	73.7	31.0	65.4	56.0	31.3	18.0	4.0	14.6	806
1-2 years	93.6	84.4	36.4	76.4	46.6	28.7	13.2	1.1	9.8	174
2-3 years	95.4	87.7	50.0	83.9	49.4	30.2	16.1	1.1	9.2	87
3-4 years	84.6	71.1	12.5	64.1	43.6	30.5	15.4	5.1	17.9	939
4-5 years	87.9	89.3	50.0	84.8	48.5	30.3	9.1	0.0	12.1	33
5+ years	89.8	88.4	40.0	83.7	51.0	32.7	12.2	0.0	10.2	49
Person accompanied to migrate to the current place										
Self	89.2	75.8	35.1	70.3	45.1	21.1	15.6	2.9	7.7	546
Husband/ Parents	86.5	75.6	42.9	66.0	57.4	39.2	13.4	3.1	18.6	97
Female friend	91.3	81.0	28.1	71.6	59.9	38.4	17.9	3.0	17.0	464
Madam/Pimp	89.5	65.5	26.7	57.9	59.6	40.4	24.6	1.8	29.8	87
Client	80.0	72.2	0.0	57.1	81.0	38.1	9.5	14.3	14.3	21
Others*	100.0	66.0	100.0	66.7	66.7	66.7	0.0	0.0	0.0	3
Total %	89.7	77.3	32.2	69.9	53.3	30.6	16.6	3.1	13.4	
Total N	1,183	1,055	202	1,188	1,188	1,188	1,188	1,188	1,188	

¹ Consistent condom use computed taking the weighted average of the clients that she had sex with

² percentages of sex workers who had any of the following symptoms in the last 6 months: Excessive vaginal discharge, Foul smelling discharge, Ulcers/sores in genital area, Swelling in groin area, Pain during intercourse, Itching in genital area, Pain in lower abdomen, Frequent/sometimes painful urination

³ percentages refers to all sex workers who had at least one of the STI symptoms and continue to have sex out of the total female sex workers interviewed

⁴ percentages refer to any partners who beat /physically forced women to have sex without using a condom out of the total female sex workers interviewed

⁵ percentages refers to the self-perception of risk for HIV infection



Table 15 : HIV vulnerability among mobile female sex workers according to mobility within migration

Migration and Mobility characteristics	% mobile FSWs who consistently used condom with				% had STI symptoms in the last 6 months ²	% who have STI symptoms and continued to have sex ³	% experienced sexual violence and did not use condom ⁴	HIV Risk perception ⁵		N
	Occasion at clients	Regular clients	Nonpaying client	Any client ¹				High	Moderate	
Migrated in <=1 year										
1-3 places	88.8	74.1	31.9	66.5	57.3	31.3	20.2	3.0	15.0	501
4+ places	88.1	73.0	29.5	63.6	58.8	31.1	14.4	5.6	14.1	305
Migrated for more than 1 year but <=2 years										
1-3 places	94.3	86.0	40.5	79.8	46.8	29.8	9.7	0.0	7.3	124
4+ places	92.0	80.0	28.6	68.0	46.0	26.0	22.0	4.0	16.0	50
Migrated for more than 2 years but <=3 years										
1-3 places	98.6	90.8	66.1	90.0	47.1	30.0	14.3	0.0	5.7	70
4+ places	82.4	75.0	40.0	58.8	58.8	41.1	23.5	5.9	23.5	17
Migrated for more than 3 years but <=4 years										
1-3 places	92.9	81.5	33.3	82.1	42.9	21.4	17.9	7.1	17.9	28
4+ places	63.6	45.5	0.0	18.2	45.5	18.2	9.1	0.0	18.2	11
Migrated for more than 4 years but <=5 years										
1-3 places	96.2	95.8	100.0	92.3	50.0	30.8	11.5	0.0	7.7	26
4+ places	57.1	50.0	33.3	57.1	42.9	28.6	0.8	0.0	28.6	7
Migrated for more than 5 years										
1-3 places	94.1	93.5	100.0	91.2	50.0	26.5	14.7	0.0	5.9	34
4+ places	80.0	75.0	0.0	66.7	53.3	36.7	6.7	0.0	20.0	15
Total										
1-3 places	91.2	79.5	35.6	73.2	53.6	30.4	17.4	2.2	12.4	783
4+ places	86.8	72.8	27.4	62.7	52.6	31.1	15.1	4.9	15.3	405
Total %	89.7	77.3	32.2	69.9	53.3	30.6	16.6	3.1	13.4	
Total N	1,183	1,055	202	1,188	1,188	1,188	1,188	1,188	1,188	

¹ Consistent condom use computed taking the weighted average of the clients that she had sex with

² percentages of sex workers who had any of the following symptoms in the last 6 months: Excessive vaginal discharge, Foul smelling discharge, Ulcers/sores in genital area, Swelling in groin area, Pain during intercourse, Itching in genital area, Pain in lower abdomen, Frequent/sometimes painful urination

³ percentages refers to all sex workers who had at least one of the STI symptoms and continue to have sex out of the total female sex workers interviewed

⁴ percentages refer to any partners who beat/physically forced women to have sex without using a condom out of the total female sex workers interviewed

⁵ percentages refers to the self-perception of risk for HIV infection



Table 16 : Percent of mobile female sex workers who use condoms consistently, continue to have sex after having STI symptoms, and self-perception of risk for HIV

Mobility by place of contact	% mobile FSWS who have used condom consistently with any client ¹	% had STI symptoms in the last 6 months ²	% who have STI symptoms and continued condom to have sex ³	% experienced sexual violence and did not use condom ⁴	Self perception of HIV risk ⁵ (High/Moderate)	N
Brothel						
1-2 places	74.3	51.8	29.8	15.8	13.2	272
3-4 places	73.7	48.6	32.1	13.0	19.0	315
5+ places	76.7	53.3	26.7	10.0	13.3	30
Lodge						
1-2 places	66.7	50.0	33.3	33.3	33.3	6
3-4 places	72.7	45.5	18.2	27.3	18.2	11
5+ places	25.0	75.0	50.0	0.0	25.0	4
Street						
1-2 places	78.6	58.9	21.4	16.1	11.6	112
3-4 places	67.1	57.5	36.8	16.2	17.5	228
5+ places	50.0	62.2	39.2	17.6	20.3	74
Home						
1-2 places	100.0	38.5	15.4	7.7	0.0	13
3-4 places	68.8	59.4	28.1	9.4	21.9	32
5+ places	65.0	70.0	45.0	20.0	25.0	20
Highway						
1-2 places	44.4	55.6	11.1	61.1	5.6	18
3-4 places	54.2	54.2	29.2	50.0	16.7	24
5+ places	16.7	16.7	16.7	50.0	33.3	6
Dance group						
1-2 places	0.0	33.3	0.0	33.3	0.0	3
3-4 places	60.0	30.0	10.0	20.0	10.0	10
5+ places	30.0	30.0	0.0	0.0	30.0	10
Total						
1-2 places	74.3	53.3	26.2	17.9	12.3	424
3-4 places	70.0	52.2	32.9	15.8	18.4	620
5+ places	54.2	57.6	34.0	16.0	20.8	144
Total %	69.6	53.3	30.6	16.6	14.5	
Total N	1,188	1,188	1,188	1,188	1,188	1,188

¹ Consistent condom use computed taking the weighted average of the clients that she had sex with

² percentages of sex workers who had any of the following symptoms in the last 6 months: Excessive vaginal discharge, Foul smelling discharge, Ulcers /sores in genital area, Swelling in groin area, Pain during intercourse, Itching in genital area, Pain in lower abdomen, Frequent/sometimes painful urination

³ percentages refers to all sex workers who had at least one of the STI symptoms and continue to have sex out of the total female sex workers interviewed

⁴ percentages refer to any partners who beat /physically forced women to have sex without using a condom out of the total female sex workers interviewed

⁵ percentages refers to the self-perception of risk for HIV infection



Table 17 : Mobile female sex worker' places of solicitation and sex (in percent), by district

	A.Nagar	Jalgaon	Mumbai	Nagpur	Nasik	Pune	Thane	Overall %
Places of solicitation								
Road side	23.1	30.5	58.1	85.5	43.7	60.4	51.3	47.5
Railway station/bus stand	8.6	6.3	23.8	27.0	19.0	45.1	40.3	24.8
Market	8.1	7.8	13.1	37.0	17.6	48.2	30.5	22.4
Hotels/ lodge	25.3	3.1	21.2	8.5	15.5	11.0	21.4	15.8
Own Home	0.0	7.8	6.2	1.0	1.4	1.1	7.8	3.5
Cinema Hall	4.3	2.3	3.1	15.5	5.6	1.1	4.5	5.2
Phone	3.2	3.7	11.2	11.0	7.0	34.1	0.0	8.6
Brothel	70.4	85.2	30.4	59.0	65.5	42.3	31.2	52.6
Rented room	1.6	0.0	2.3	1.0	2.1	0.0	1.9	1.4
Dhaba	26.9	14.1	0.4	1.0	4.9	2.7	0.0	6.6
Client's home	0.5	0.8	2.3	1.5	3.5	0.0	1.2	1.3
Bar	0.0	1.6	10.0	1.5	1.4	3.3	9.1	4.2
Vehicle	0.0	3.1	1.2	2.5	2.8	1.1	0.0	1.4
Labour naka	0.5	0.0	1.2	8.0	5.6	8.8	3.9	4.0
Places of sex								
Rented room	3.8	12.6	18.8	18.5	14.1	13.7	23.4	14.1
Hotels/Lodge	52.7	28.1	44.6	57.5	41.5	63.7	66.9	51.4
Own home	0.5	10.2	11.5	8.5	5.6	1.6	4.5	6.3
Roadside	2.7	2.3	10.8	2.5	8.5	1.1	1.3	4.6
Client's home	4.8	3.1	13.5	21.5	17.6	17.6	2.6	12.1
Brothel	72.6	83.6	41.2	63.5	69.7	58.2	33.8	58.5
Dhaba	30.6	14.1	0.4	0.0	6.5	3.8	1.3	7.5
Park/bushes	0.0	0.0	1.2	7.0	3.5	1.1	0.6	2.0
Cinema Hall	3.2	0.0	0.4	8.5	1.4	0.0	1.3	2.2
Market area	1.6	1.6	1.5	0.5	0.7	1.6	2.6	1.4
Railway station/bus stand	3.8	0.8	4.2	0.0	4.2	0.0	4.5	2.6
Vehicle	0.0	2.3	0.8	6.5	4.2	4.4	1.3	2.7
Bar	0.5	0.0	6.2	1.0	1.4	6.0	6.5	3.5
Others	1.6	0.0	0.4	0.5	3.5	1.6	0.0	1.0
Total N	183	126	224	193	133	177	152	1,188



Table 18: Mobile female sex workers' place of contact versus place of solicitation/sex

Place of contact (where interviewer met sex worker)	Place of solicitation/sex(informed by sex worker)					Any of these five
	Hotel/Lodges	Railway station	Dhaba	Bar	Brothel	
Brothel	30.1	3.2	6.3	2.1	97.2	99.0
Lodge	95.2	28.6	9.5	4.8	23.8	100.0
Street	90.3	66.7	4.1	5.3	24.4	95.2
Home	61.5	12.5	3.1	32.3	13.8	80.0
Highway	39.6	10.4	79.2	4.2	45.8	100.0
Dance group	21.7	0.0	0.0	0.0	26.1	43.5

Table 19 : Major places of solicitation or sex for mobile female sex workers, and alternative scenarios for program coverage by district

	A.Nagar	Jalgaon	Mumbai	Nagpur	Nasik	Pune	Thane	Total
Place of solicitation/sex								
Brothel	73.8	86.5	48.7	67.9	75.2	59.9	34.9	62.5
Dhaba	31.7	14.3	0.9	1.0	6.8	4.0	1.3	8.2
Railway station/bus stand	8.7	6.3	26.3	27.5	20.3	46.3	41.4	25.9
Bar	0.5	1.6	11.6	1.0	1.5	6.2	9.9	5.0
Hotels	53.6	28.6	51.1	59.6	45.1	65.5	67.8	54.2
Own Home	0.5	10.3	13.8	8.8	6.0	1.7	8.6	7.2
Road side	23.5	31.7	66.5	57.0	46.6	62.7	52.0	50.0
Anticipated mobile sex workers' coverage by the program, if it is implemented in following places								
Brothel	73.8	86.5	48.7	67.9	75.2	59.1	34.9	62.5
Brothel + Dhaba	91.3	86.5	49.6	68.9	75.2	62.1	35.5	66.0
Brothel+Dhaba+ Railway station/bus stand	97.3	90.5	71.4	85.0	85.7	92.1	73.7	84.6
Brothel+Dhaba+ Railway station/bus stand+Bar	97.3	90.5	78.6	86.0	85.7	92.7	81.6	87.2
Brothel+Dhaba+railway stn/bus stand+Bar+Hotels	100.0	93.7	87.1	99.5	92.5	98.9	98.7	95.6
Number of intervention doses sex workers would receive, if the five places are covered by the program								
0	--	6.3	12.9	0.5	7.5	1.1	1.3	4.4
1	45.9	67.5	43.3	53.4	53.4	39.9	48.0	49.1
2	41.0	10.3	35.7	34.7	27.1	38.4	46.7	34.5
3	12.0	14.3	7.6	11.4	7.5	18.1	2.0	10.4
4	1.1	1.6	0.4	--	3.8	2.1	2.0	1.5
5	--	--	--	--	0.8	--	--	0.1
Average number of times SWs will be covered in the program	<i>1.7</i>	<i>1.4</i>	<i>1.4</i>	<i>1.6</i>	<i>1.5</i>	<i>1.8</i>	<i>1.6</i>	<i>1.6</i>
TOTAL N	183	126	224	193	133	177	152	1,188



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