

HIV/AIDS CONSCIOUSNESS OF FEMALE SEX WORKERS IN SILCHAR

This chapter deals with HIV /AIDS and STI consciousness of female sex workers of Silchar town. Knowledge of sex workers about HIV/AIDS and STIs, their awareness to visit clinics for treatment and their knowledge on government provisions for HIV testing, treatment, care and support are discussed in this chapter.

5.1 HUMAN IMMUNE DEFICIENCY VIRUS

HIV or Human Immune Deficiency Virus causes AIDS. The size of the virus is so tiny that it is a thousand times smaller than the thickness of the hair and looks like a rolled up porcupine. It belongs to the family of viruses called retro viruses. Viruses are the smallest and simplest living organisms in the universe. They are so small that they cannot be seen under a light microscope. One needs an electron microscope to see them. They cause different diseases in human beings, which include measles, polio, mumps, common cold and influenza, Hepatitis B and many other deadly diseases. HIV is a virus that invades and breaks down the immune system of the body, specifically the CD4 cells. CD4 cells are those cells that help the body to fight different diseases inside our body. There are two types of HIV. One is HIV-1 and the other is HIV-2. Persons infected with HIV-2 survive longer than those infected with HIV-1. Of the entire HIV infected person in India, the

majority are HIV-1 infected about 88%. In the following table knowledge of female sex worker's about HIV is analyzed¹.

5.2 ROUTES OF TRANSMISSION

HIV spread: HIV does not spread easily by coughs and sneezes as in the case of influenza, tuberculosis or other common communicable diseases. Unlike malaria, insects do not carry it or unlike cholera and jaundice, it is not carried in contaminated water or food, nor is it caught by casual skin contact. HIV is presents in a number of body fluids, such as blood, semen, vaginal fluid, cerebrospinal fluid, tears and saliva. However, it appears those fluids that provide sufficient viruses for transmission are blood, semen, breast milk and vaginal secretions. The virus is found in macrophages and lymphocytes in these fluids. The macrophages serve as a reservoir of AIDS virus. The virus is transmitted through fluids of one individual to other by primary modes. These primary modes are – sexual behavior, transfusion of contaminated blood and mother to infant during pregnancy. **HIV does not spread** through saliva, tears, sweat or urine as these fluids contain insufficient virus to cause infection. It is important to mention that HIV does not spread for sharing food, using same toilet, staying and playing together, mosquito bite or shaking of hands and hugging etc².

¹ Binod K Sahu (2009), *AIDS and Population Education*, Sterling Publisher, New Delhi.

² Parul R Sheth (2003), *AIDS a fatal Gateway*, p-24, NISCAIR, CSIR, New Delhi.

5.3 SYMPTOMS OF HIV

Primary HIV infection causes persistent fever, lethargy, malaise, muscle weakness, headache, and pain in or around the eyes, sensitivity to bright light and sore throat and skin rashes. In most people, these symptoms resolve themselves and usually do not recur. However, not all people infected with HIV, develops symptoms of primary infection. In addition to these symptoms, HIV – positive persons may develop a condition known as lymphadenopathy; enlarge lymph nodes that are detectable by touch and which remains enlarged for a minimum of three months. This is because the virus gets disseminated throughout the lymphatic system in the body. Swollen lymph nodes in the armpits, neck or groin are common in HIV infection, as well as in other viral infections. In the periods of asymptomatic infection, during which the person looks and feels healthy, many non specific early symptoms may develop. Chronic low grade fever, persistent fatigue, diarrhea lasting up to two weeks, rashes or other skin conditions, unintentional weight loss of at least five kilograms, night sweats and mild infections of mouth or throat occur. The minor symptoms of HIV infection are cough for more than a month, itching on the skin, skin rashes, herpes simplex, swollen gland and fungal infections of the mouth. The major symptoms of HIV infection are weight loss- more than10 % of the body weight, diarrhea- persistent diarrhea for more than a month, fevers-for more than a month³.

³ Ibid

5.4 AIDS (Acquired Immune Deficiency Syndrome)

AIDS is a medical diagnosis for a combination of symptoms, which results breakdown of the immune system. “A” stands for acquired which means that it is obtained or received by a person and is something which is not genetically inherited. “ID” stand for Immune Deficiency which means there is deficiency in the immune system or that the immune system is weakened. “S” stand for syndrome. Syndrome is used to emphasize that AIDS is not just one disease or symptoms but presents as a group of disease or symptoms. It cannot be diagnosed on the basis of one sign and symptoms alone. All the symptoms of AIDS such as high fever, diarrhea, loss of weight, TB can be symptoms of other diseases too⁴.

5.5 STI (Sexually Transmitted Infections)

STI are sexually transmitted infections. They are spread by sexual contact. There are many different types of STIs caused by bacteria or viruses. Some of the common STIs are gonorrhea, syphilis, chancroids and herpes. HIV/AIDS is also a STI since it is mostly spread through sexual contact. The presence of STIs is a cause for concern. If they are detected and treated early, they do not cause severe problems except HIV, Hepatitis-B and Herpes. If they are not detected and treated early, they may cause a lot of damage to the body resulting in illness, disability and even death. The chances of acquiring HIV/AIDS increased if one has STIs. HIV/AIDS cannot be cured. Relationship of STI with HIV/AIDS is common such as if a person has STI his /her chances of getting HIV/AIDS increases tenfold since the virus can easily enter through the sores and cuts in the skin. Therefore,

⁴ Ibid

one who has STIs is also at risk for HIV infection, both through the behavior as well as through the increased risk associated with STIs themselves. So far all STIs do not have the same symptoms, it is extremely important to note that many women and some men have an STI without any sign and symptoms⁵.

5.6 PRELIMINARY TEST OF STI OR VDRL TEST

The VDRL is known as venereal discharge research laboratory test. This is a screening test for syphilis. It measures substances called antibodies; body may produce syphilis if come in contact with the bacteria. This bacterium is called *Treponema pallidum*. The test is similar to the newer rapid plasma reagin (RPR) test. Health care provider may order this test if anyone have signs and symptoms of a sexually transmitted illness (STI)⁶.

5.7 NEED OF AWARENESS FOR HIV PREVENTION

Many people are now aware of the dangers of HIV and yet each year millions of people become infected with the virus. It is therefore vital that HIV and AIDS awareness goes beyond simply providing information and that it is supported by other prevention efforts such as providing condoms and clean injecting equipments and making testing facilities available and accessible to all the beneficiaries. In order to ensure that people are willing and able to turn the knowledge they gain from HIV and AIDS into action, they need more than basic

⁵ Ibid

⁶ EC Tramont (2010), *Treponema pallidum* Principles and Practice of Infectious Diseases, KA Workowski, S. Berman (2010), Centers for Disease Control and Prevention (CDC). Sexually transmitted diseases treatment guidelines, 2010. MMWR Recomm Rep. Retrieved on 5th January 2013 from, <http://www.ncbi.nlm.nih.gov>.

scientific facts. HIV and AIDS education needs to motivate people by making them aware that what they are learning is relevant to their lives. Empowerment is also important, as people must be in a position where they are able to take control of their sexual behavior or habit of drugs use. Awareness is a crucial factor in preventing the spread of HIV. The huge number of deaths that might still be prevented through sustained awareness to core group vis a vis general population.

So far researcher has discussed about basics of HIV/AIDS on the basis of the secondary study materials. Now the researcher on the basis of field data collected by her intends to correlate the concept of awareness as well as consciousness of female sex workers of Silchar town on HIV/AIDs. The level of consciousness has been measured by various variables pertaining to STI and HIV/AIDS consciousness. The following discussion presents the details of HIV/AIDs consciousness of the respondents.

5.8 FEMALE SEX WORKERS KNOWLEDGE ON HIV

Table 5.01 (a)

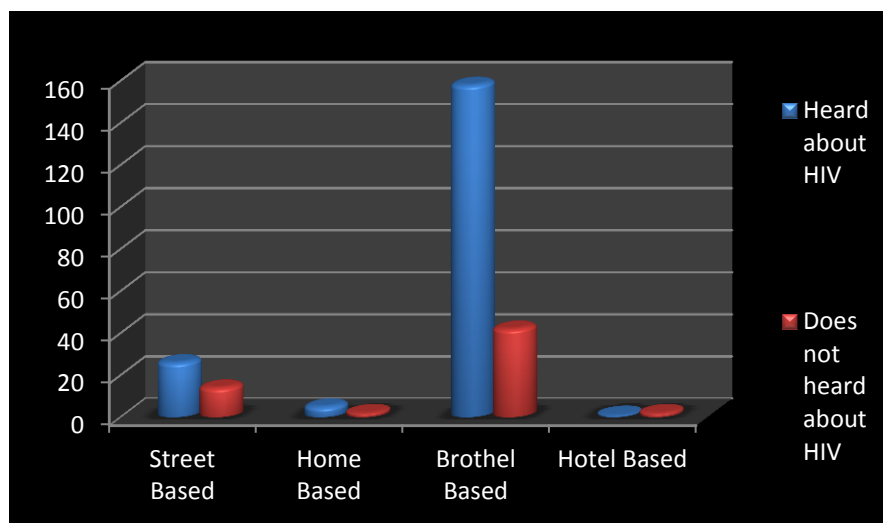
Female sex workers who heard about HIV

Heard about HIV	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	26 (65%)	5(71%)	158 (79%)	1(33.33%)	190 (76%)
No	14(35%)	2 (29%)	42 (21%)	2(66.66%)	60 (24%)
Total	40 (100%)	7 (100%)	200 (100%)	3 (100%)	250 (100%)

Source Field data collected by the researcher

It is observed from the above table that out of total 250 female sex workers in the Silchar town a majority (76%) of them have heard about HIV. Out of total brothel based female sex workers 79% of them have heard about HIV followed by street based 65%, home based 71% and hotel based 33.33%. It is also observed that 66.66 % hotel based female sex workers have not heard about HIV followed by street based 35%, home based 29 % and brothel based 21%.

The following graphical representation depicts the percentage of female sex workers who heard about HIV. It is clear from the graph that a vast majority of brothel based female sex workers have heard about HIV as compared to other sex workers.



Graphical representation of respondent's heard about HIV

It is observed from the study that female sex workers have heard about HIV/AIDs from different sources. The following table depicts the different sources from where sex workers have heard about HIV/AIDs.

Table 5.01 (b)**If yes, Respondent's sources of HIV information**

Sources of HIV information	Street Based	Home Based	Brothel Based	Hotel Based	Total
Only friend's	3(12%)	2(40%)	24(15%)	-	29(15%)
Friends & Radio	2(7%)	1(20%)	5(3%)	-	8(4%)
Friends, Radio & Television's	8(30%)	-	43(27%)	-	51(27%)
Friends, Radio Television & News Paper	2(8%)	-	4(3%)	-	6(3%)
Friends, Radio Television's, News Paper, Government Hospital & NGOs	-	-	-	-	-
From above all sources	11(43%)	2(40%)	82(52%)	1(100%)	96(51%)
Total	26(100%)	5(100%)	158(100%)	1(100%)	190(100%)

Sources: Field data collected by the researcher

The above table is closely linked with the table no. 5.01 (a). The study reveals that the street based female sex workers who have heard about HIV among them 12% has gathered source of HIV information only from friends, 7% has received HIV information from friends and radio, 30% has received HIV information from friends, radio & television, 8% has received HIV information from friends, radio television & news paper and a maximum numbers of female sex i.e. 43% have received HIV information from all the above sources including information provided by NGOs and government hospitals. Among home based female sex workers who have heard about HIV among them 40% has gathered source of HIV information only from friends, 20% has received HIV information from friends and radio, 40% have received HIV information from all the sources including NGO and government hospitals. Among brothel based female sex workers who

have heard about HIV among them 15% has gathered source of HIV information only from friends, 3% has received HIV information from friends and radio, 27% has received HIV information from friends, radio & television, 3% has received HIV information from friends, radio television's & news paper and a maximum numbers of female sex i.e. 52 % have received HIV information from all the source including NGO and government hospitals. The only hotel based female sex worker who has heard about HIV has received information from all the sources.

The level of consciousness of the female sex workers who have heard about HIV is further analyzed to study the depth and sufficient knowledge about Human Immune Virus among female sex workers of Silchar town.

Table 5.01 (c)
Respondent knowledge on HIV

What is HIV?	Street Based	Home Based	Brothel Based	Hotel Based	Total
An STD (Sexually Transmitted Disease)	3(12%)	-	21(14%)	-	24 (13%)
A fatal disease	8 (31%)	2(40%)	79(50%)	-	89 (47%)
A virus that cause AIDS	15 (57%)	3(60%)	58 (36%)	1(100%)	77 (40%)
Total	26(100%)	5 (100%)	158(100%)	1(100%)	190(100%)

Sources: Field data collected by the researcher

It is observed that out of 26 street based female sex workers who heard about HIV 11% of them have replied it is a kind of sexually transmitted infection, 30% of them have replied it is a fatal disease and 57% of them have replied it is a virus

that causes AIDS. Among home based who have heard about HIV, 40% of them replied it is a fatal disease and 60% of them replied it as a virus that causes AIDS. Among 158 number of brothel based female sex workers who heard about HIV, 13% of them have replied it is a kind of sexually transmitted infection, 50% of them have replied it is a fatal disease and 36% of them have replied it as a virus that causes AIDS. Only one hotel based female sex worker heard about HIV and she replied that it is a virus that causes AIDS.

To measure depth of their knowledge respondents were further asked about how HIV spreads. But it is observed that the knowledge of respondents regarding the spread of disease is limited and not adequate.

Table 5.01 (d)
Respondent’s knowledge on spread of HIV

How does HIV spread?	Street Based	Home Based	Brothel Based	Hotel Based	Total
Answered properly	8(31%)	1(33.33%)	52(33%)	1(100%)	62(33%)
Answered partially correct	7 (27%)	1(33.33%)	30(19%)	-	38(20%)
Answered incorrectly	11(42%)	1(33.33%)	76(48%)	-	88 (47%)
Total	26(100%)	5(100%)	158(100%)	1(100%)	190(100%)

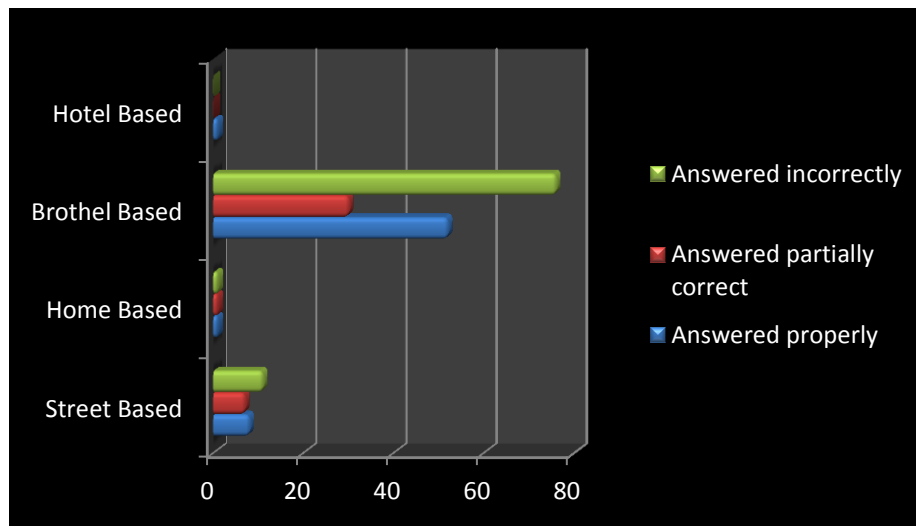
Sources: Field data collected by the researcher

The above table is closely linked with the table number 5.01 (a). It is observed from the study that 31% of street based female sex workers who know HIV answer properly all four routes of transmission of HIV followed by home based

33.33 % answer properly all four routes of transmission, brothel based 33% and (only 1 FSW) 100% hotel based female sex worker answer properly all four routes of transmission. The respondents who answer partially correct the routes of HIV transmission 27% of them are street based followed by 33.33% of them are home based and 19% of them are brothel based. Those who could not reply all four routes of transmission out of them, street based 42%, followed by 33.33% home based and 48% of them are brothel based female sex workers.

Therefore it is clear from the above table that majority of the female sex workers of silchar who have heard about HIV among them 33% answered properly how HIV spreads followed by 20% answered partially correct and a vast majority i.e. 47% answered incorrectly how HIV spread.

The following graph illustrates the above data.



Graphical representation of Respondent's knowledge on how does HIV spread

Respondents, those who know HIV properly, are further asked to reply for which HIV does not spread. The table below depicts the knowledge of respondents on how HIV does not spread.

Table 5.01 (e)**Respondent's knowledge on how HIV does not spread**

How does HIV do not spread?	Street Based	Home Based	Brothel Based	Hotel Based	Total
Answered properly	5 (20 %)	1 (20%)	69(43 %)	1(100%)	76 (40%)
Answered partially correct	4(15 %)	1(20%)	27(17%)	-	32(17%)
Answered incorrectly	17(65 %)	3(60%)	62(40%)	-	82 (43%)
Total	26(100%)	5(100%)	158(100%)	1(100%)	190 (100%)

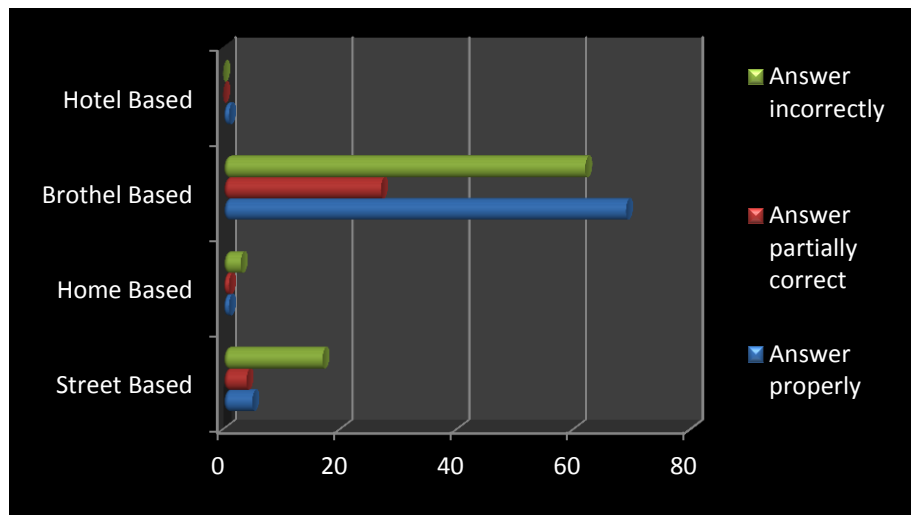
Sources: Field data collected by the researcher

The above table is closely linked with the table no 5.01 (a). It is observed that among the street based female sex workers who heard about HIV 20% of them answered properly, 15% of them gave partially correct answer and 65% provided incorrect answer. Among home based female sex workers 02% answered properly, 20% provided partially correct answer and 60% gave wrong answers. Among brothel based female sex workers 43% provided all correct answers, 17% gave partially correct answers and 40% provided wrong answers. The only 1 hotel based female sex worker who gave all correct answers.

It is observed from the data that majority of the respondents who heard about HIV among them only 40% of female sex workers answered properly how HIV do not spread followed by 17% answered partially correct answered and a vast majority i.e. 43% answered incorrectly how HIV do not spread.

Therefore it is clear from the data that respondents are confused and have misconception about routes of HIV transmission.

The graphical representation of the above fact on how does HIV not spread is given below to provide a detailed and convenient analysis.



Graphical representation of Respondent's knowledge on how does HIV do not spread

Knowledge on symptoms of HIV infection is an important part of HIV consciousness. Respondent are also asked about their knowledge on symptoms of HIV infection and their reply pertaining to the same question is depicted in the following table below.

Table 5.01 (f)**Respondent's knowledge on symptoms of HIV**

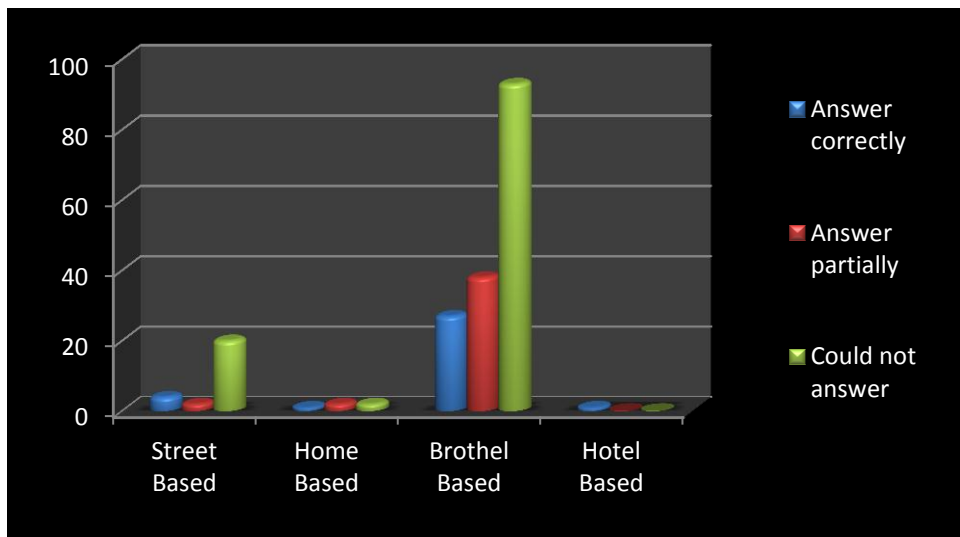
Do you know the symptoms of HIV?	Street Based	Home Based	Brothel Based	Hotel Based	Total
Correct answer	4(16%)	1(20%)	27(17%)	1 (100%)	33 (17%)
Partially correct	2 (8%)	2(40%)	38(24%)	-	42(23%)
Could not answer	20(76%)	2(40%)	93(59%)	-	115(60%)
Total	26(100%)	5 (100%)	158 (100%)	1 (100%)	190 (100%)

Sources: Field data collected by the researcher

The table is closely linked with the table no. 5.01 (a). While respondents are asked about symptoms of HIV, 16% of street based female sex workers who know HIV properly replied all answers for symptoms of HIV correctly, 8% of them gave partially correct answer and 76% of them are not able to answer at all. Among home based female sex workers who know HIV properly 20% of them answered properly, 40% of them provided partially correct answer but rest 40 % of them could not answer at all. Among brothel based female sex workers 17% of them replied correct answer, 24% of them gave partially correct answer and rest 59% of them could not answer. Among hotel based female sex workers (1FSW) 100% of them know all correct symptoms of HIV.

It is clear from the table that majority of the respondents who heard about HIV among them only 17% of them have knowledge about the symptoms of HIV who

gives correct answered followed by 23% gives partially correct answered and 60% of them could not answered.



Graphical representation of Respondent's knowledge about symptoms of HIV

The researcher has so far illustrated respondent's knowledge on HIV and highlighted their depth as well as limitation of knowledge. Since HIV turns into AIDs in its later stage therefore it is felt by the researcher to illustrate the knowledge of respondents on AIDs epidemic. The following part of this chapter details the above fact.

5.9 FEMALE SEX WORKER'S KNOWLEDGE ON AIDS

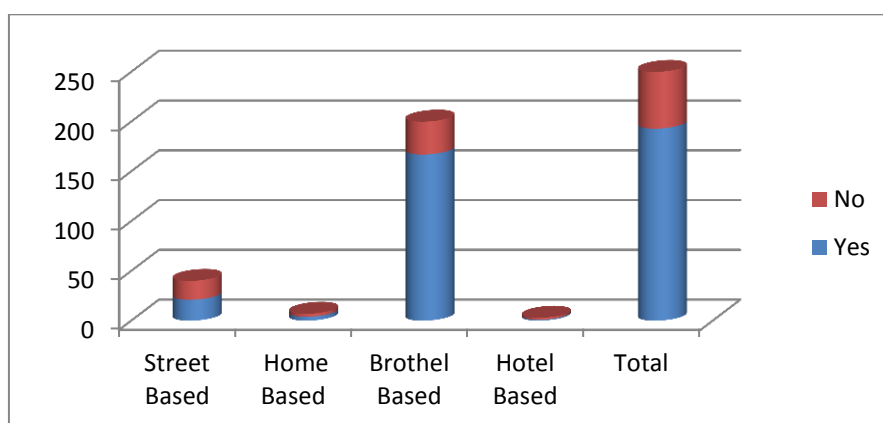
Table 5.02 (a)

Female sex worker's knowledge of AIDS

Heard about AIDS	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	21 (52.5%)	4(57%)	167(83.5%)	1(33.33%)	193(72.2%)
No	19(47.5%)	3(43%)	33 (16.5%)	2(66.66%)	57 (22.8%)
Total	40 (100%)	7(100%)	200 (100%)	3 (100%)	250(100%)

Source: Field data collected by the researcher

The study reveals that out of total 250 female sex workers in the silchar town a vast majority 72% of them have heard about AIDS whereas 22.8% have not heard about AIDS. Out of total brothel based female sex workers 83.5 % of them have heard about AIDS followed by street based 52.5 %, home based 57 %, and hotel based 33.33%. It is also observed that 66.66 % hotel based female sex workers have not heard about AIDS followed by street based 47.5%, home based 43 % and brothel based 16.5%.



Graphical representation of respondent's heard about AIDS

Table 5.02 (b)
Respondent reply on severity of AIDS

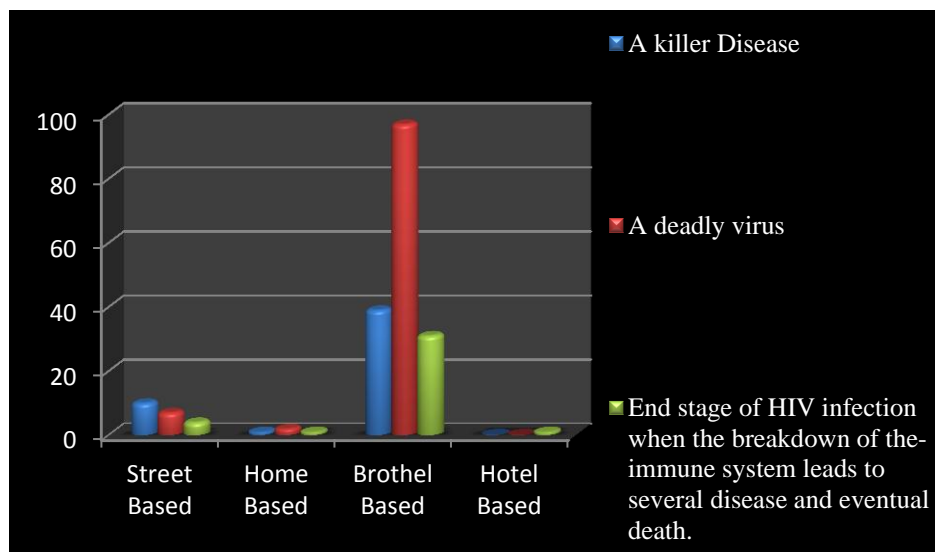
What is AIDS?	Street Based	Home Based	Brothel Based	Hotel Based	Total
A killer Disease	10 (47 %)	1(25%)	39 (24%)	-	50 (26%)
A deadly virus	7 (33 %)	2 (50%)	97 (58%)	-	106 (55%)
End stage of HIV infection when the breakdown of the-immune system leads to several disease and eventual death.	4 (20%)	1(25%)	31(18%)	1(100%)	37 (19%)
Total	21(100%)	4(100%)	167(100%)	1(100%)	193(100%)

Sources: Field data collected by the researcher

The above table is closely linked with the table no.5.02 (a). It is observed that out of 21 street based female sex workers who heard about AIDS 47 % of them replied AIDS as a killer disease, 33% of them replied it as a deadly virus and 20 % of them replied it as end stage of HIV infection leading to the breakdown of the-immune system followed by several diseases and eventual death. Among home based female sex workers who heard about AIDS 25 % of them replied it as a killer disease, 50% of them replied it as a deadly virus and 25 % of them replied it as end stage of HIV infection leading to the breakdown of the-immune system followed by several disease and eventual death. Among brothel based female sex workers who heard about AIDS 24 % of them replied AIDS as a killer disease,

58% of them replied it as a deadly virus and 18 % of them replied it as end stage of HIV infection leading to breakdown of the-immune system followed by several disease and eventual death. Among hotel based female sex workers only one female sex worker who said it end stage of HIV infection.

Therefore it is clear from the data that out of total respondents who heard about AIDS among them 26% of them replied AIDS is a killer disease 55% replied AIDS is a deadly Virus and only 19% of them replied AIDS is a end stage of HIV infection when the breakdown of the-immune system leads to several disease and eventual to death. So it is clear that majority of the respondents who do not have knowledge on severity of AIDS.



Graphical representation of respondents reply on severity of AIDS

Table-5.03**Key information that respondents know about HIV/AIDS**

What are Key information that respondent's know about HIV/AIDS	Street Based	Home Based	Brothel Based	Hotel Based	Total
HIV is a serious health problem which is not curable	10 (25%)	3 (44%)	107 (53.5%)	1 (33.33%)	121 (48.4%)
Knowledge of HIV/AIDS prevention and control	3 (7.5%)	-	8 (4%)	-	11 (4.4%)
Know about ART	12 (30%)	2 (28%)	33 (16.5%)	-	47 (18.8%)
Information about HIV testing and counseling	15 (37.5%)	2 (28%)	52 (26%)	2 (66.66%)	71 (28.4%)
Total	40 (100%)	7 (100%)	200 (100%)	3 (100%)	250 (100%)

Source: Field data collected by the researcher

The key information that respondents know about HIV is highlighted in the above table no- V.3. It is found that key information on HIV/AIDS is not known to all female sex workers. The first key information on seriousness of HIV/AIDS is known to only 25% street based female sex workers followed by home based 44%, brothel based 53.5%, hotel based 33.33%. Second information given in the above table is regarding prevention and control of HIV/AIDS is known to 7.5% street based and only 4% brothel based female sex workers. Sex workers of Silchar town have little knowledge of ART. About 30% street based sex workers know about ART followed by 28% home based and 16.5% brothel based female sex workers. The table also depicts that all sex workers are not aware of HIV testing and counseling. Only 37.5% street based sex workers know about HIV testing and counseling followed by 28% home based female sex workers, 26% brothel based and 66.66% brothel based female sex workers.

So far it is clear from the data that out of total female sex workers who have heard about AIDS 48.4% of them have key information on seriousness of HIV/AIDs followed by 4.4% of them have key information regarding prevention and control of HIV/AIDs, 18.8% of them have key information on knowledge of ART and 28.4% of them have key information regarding HIV testing and counseling.

Table 5.04 (a)

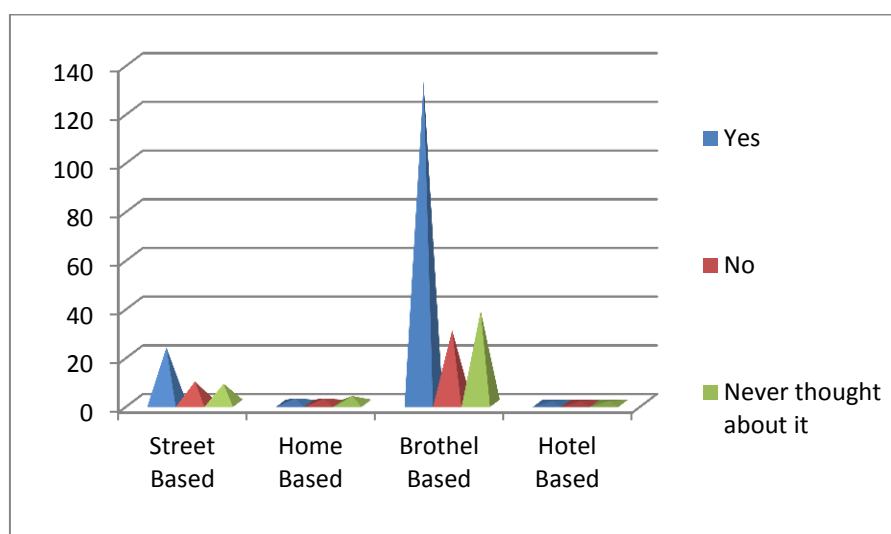
Respondents' apprehension on HIV/AIDs

Worried of being infected with HIV or contracting AIDS	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	23(57.5%)	2 (29%)	132(66%)	1(33.33%)	158(63.2%)
No	9 (23%)	2 (29%)	30 (15%)	1(33.33%)	42 (16.8%)
Never thought about it	8 (20%)	3 (42%)	38 (19%)	1(33.33%)	50 (20%)
Total	40(100%)	7(100%)	200(100%)	3 (100%)	250 (100%)

Source: Field data collected by the researcher

The study reveals that out of 250 female sex workers of silchar town 63.2% have worried of being infected with HIV or contracting AIDS. The rest 16.8% and 20% have not worried and never thought of being infected with HIV or contracting AIDS. It is also observed that out of total street based female sex workers 57.5% are worried about it followed by home based 29%, brothel based 66% and hotel based 33.33%. It is also found that 23% street based followed by home based 29%, brothel based 15% and hotel based 33.33% are not worried of being infected with HIV or contracting AIDS. The data also reveals that street based 20%

followed by home based 42%, brothel based 19% and hotel based 33.33% have never thought of being infected with HIV or contracting AIDS.



Graphical representation of respondent's apprehension of being infected with HIV/AIDS

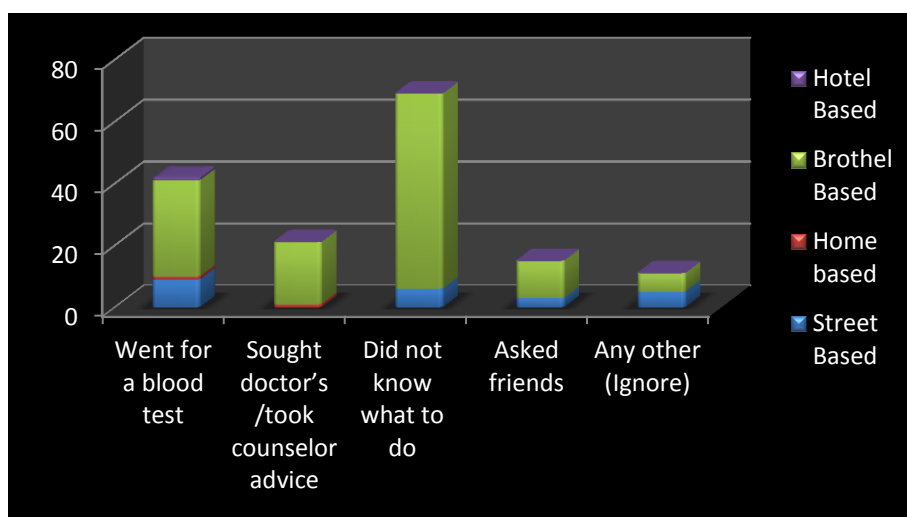
Table 5.04 (b)

Action taken by respondents who have apprehension on HIV/AIDS

What action did the respondents take	Street Based	Home based	Brothel Based	Hotel Based	Total
Went for a blood test	9(40%)	1(50%)	31(23%)	1(100%)	42(26%)
Sought doctor's /took counselor advice	-	1(50%)	20(15%)	-	21(13%)
Do not know what to do	6 (26%)	-	63(47%)	-	69(44%)
Asked friends	3(13%)	-	12(10%)	-	15 (10%)
Negligence	5(21%)	-	6 (5%)	-	11(7%)
Total	23(100%)	2(100%)	132(100%)	1(100%)	158(100%)

Source: Field data collected by the researcher

The above table is linked with the table no. 5.04 (a) and it depicts the action taken by the respondents who have apprehension on HIV/AIDs. The data presented in above table shows that out of total female sex workers 26% of them went for blood test, 13% of them went to doctors for consultation, 44% of them did not know what to do, 10% of them asked and shared with their peers and 7% of them who were having negligence for consulting the matter with others thinking that nothing would happen to them. This group of sex worker does not give importance to their health problem.



Graphical representation of action taken by the respondents who have apprehension of being infected with HIV/AIDS

Table-5 .05 (a)

Respondent knowledge on prevention of HIV/AIDS

Knowledge on prevention of HIV/AIDS	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	23 (57.5%)	3(43%)	143(71.5%)	1(33.33%)	170 (68%)
No	17(42.5%)	4 (57%)	57 (28.5%)	2(66.66%)	80 (32%)
Total	40(100%)	7(100%)	200(100%)	3(100%)	250(100%)

Source: Field data collected by the researcher

The study reveals that out of total 250 female sex workers living in silchar town 68% have knowledge on prevention of HIV and 32% are not having knowledge about prevention of HIV. Among all street based sex workers 57.5% have knowledge on prevention of HIV/AIDS followed by home based 43%, brothel based 71.5% and hotel based 33.33% have knowledge on prevention of HIV. The data also shows that 42.5% street based followed by 57% home based, 28.5% brothel based and 32% hotel based female sex workers do not have HIV prevention knowledge.

Table-5.05 (b)

Respondents knowledge on how to prevent HIV/AIDS

Knowledge on how to prevent HIV/AIDS	Street Based	Home Based	Brothel Based	Hotel Based	Total
Sexual abstinence	-	-	-	-	-
Sexual abstinence & Being faithful to one uninfected partner	-	-	6 (5%)	-	6(3%)
Sexual abstinence, Being faithful to one uninfected partner & Condom Use	8 (35%)	-	89(62%)	-	97(57.5%)
Sexual abstinence, Being faithful to one uninfected partner, Condom Use & Safe blood transfusion.	7 (30%)	1 (33.33%)	17 (12%)	-	25(15%)
Sexual abstinence, Being faithful to one uninfected partner , Condom Use, Safe blood transfusion& By not sharing needles	-	-	-	-	-
Sexual abstinence, Being faithful to one uninfected partner , Condom Use, Safe blood transfusion, By not sharing needles, Early abortion and PPTCT programme	-	1 (33.33%)	-	-	1(0.5%)
Above all	8 (35%)	1 (33.33%)	31(21%)	1(100%)	41(24%)
Total	23(100%)	3(100%)	143(100%)	1(100%)	170(100%)

Source: Field data collected by the researcher

The knowledge of female sex workers on prevention of HIV/AIDs is further analysed in the above table. Respondents are asked on how to prevent HIV/AIDs. The reply of respondents are analysed in the above table which reveals that out of total 170 numbers of female sex workers who have knowledge on HIV prevention 3% have replied that HIV can be prevented through Sexual abstinence and being faithful to one uninfected partner, 57.5% replied that HIV can be prevent through Sexual abstinence, Being faithful to one uninfected partner & Condom Use. The reply of 15% of them is HIV can be prevent through Sexual abstinence, Being faithful to one uninfected partner, Condom Use & Safe blood transfusion where as 5% of them replied HIV can be prevent through Sexual abstinence, Being faithful to one uninfected partner Condom Use, Safe blood transfusion, by not sharing needles, early abortion and PPTCT program and 24% replied HIV can be prevent through Sexual abstinence, Being faithful to one uninfected partner , Condom Use, Safe blood transfusion, by not sharing needles, early abortion and PPTCT programme.

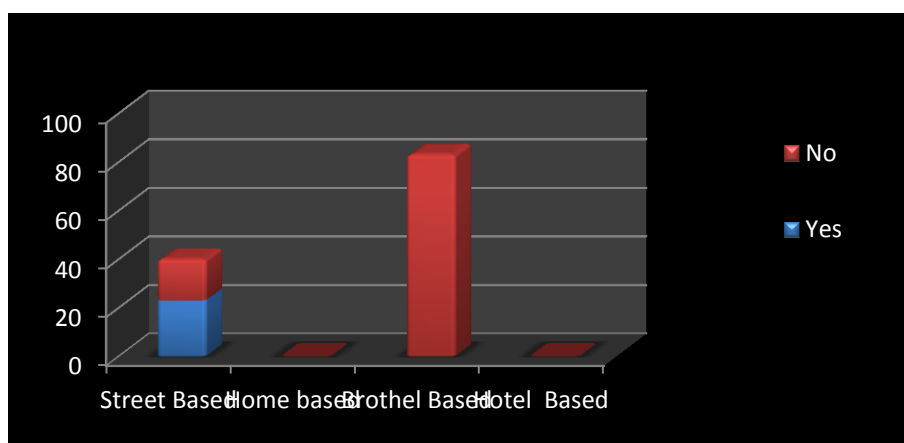
Table 5.06
Whether HIV/AIDS spreads through general contact

Whether HIV/AIDS spread through contact	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	23(57.5%)	4(57%)	117(58.5%)	2 (66.66)	114 (45.6)
No	17(42.5%)	3 (43%)	83 (41.5%)	1(33.33%)	136(54.4%)
Total	40(100%)	7 (100%)	200(100%)	3(100%)	250(100%)

Source: Field data collected by the researcher

The study reveals that out of total female sex workers among street based 57.5%, followed by home based 57%, brothel based 58.5%, 66.66% hotel based female sex workers replied HIV spread through shaking hands, hugging, using same toilets etc. It is also important to notice that among street based 42.5% followed by home based 43%, brothel based 41.5%, and hotel based 33.33% replied correctly that HIV does not spread through contact like touching, hugging, shaking hands, playing and using same utensils etc.

The following graph depicts the reveals data.



Graphical representation of HIV/AIDS spreads through general contact

Table- 5.07(a)

Respondents gone for HIV testing and Counseling

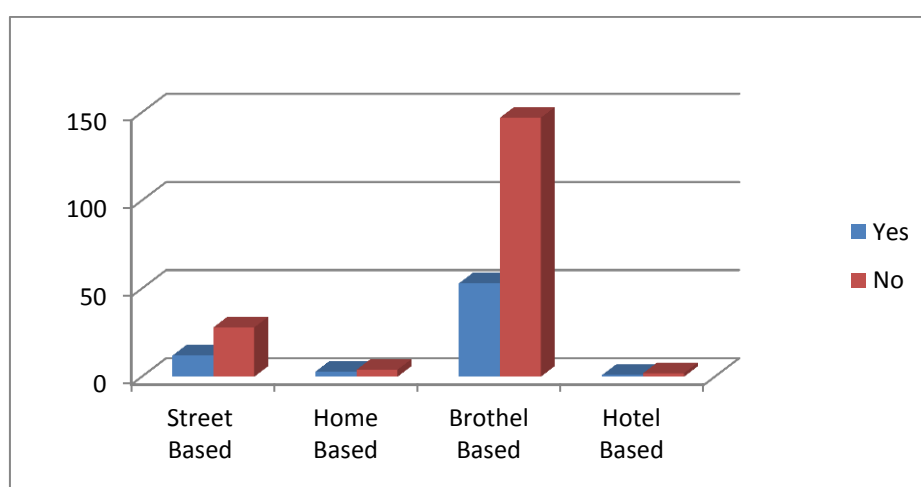
Gone for HIV testing and Counseling	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	12 (30%)	3(43%)	53(26.5%)	1(33.33%)	69 (27.6%)
No	28 (70%)	4(57%)	147(73.5%)	2(66.66%)	181(72.4%)
Total	40 (100%)	7 (100%)	200 (100%)	3 (100%)	250(100%)

Source: Field data collected by the researcher

The above table reveals that out of total respondents 27.6% of them have gone for HIV testing and counseling and 72.4% of them have not gone for HIV testing and

counseling. Among street based female sex workers 30%, followed by home based 43%, brothel based 26.5% and hotel based 33.33% have gone for HIV testing and counseling. A vast majority of female sex workers such as 70% from street based followed by home based 57%, brothel based 73% and hotel based 66.66% have not gone for HIV testing and counseling.

The following graphical representation depicts the percentage of female sex workers who gone for HIV testing and Counseling



Graphical representation of the respondents gone for HIV testing and Counseling

Table 5.07(b)

If yes, when did they go for testing and counseling.

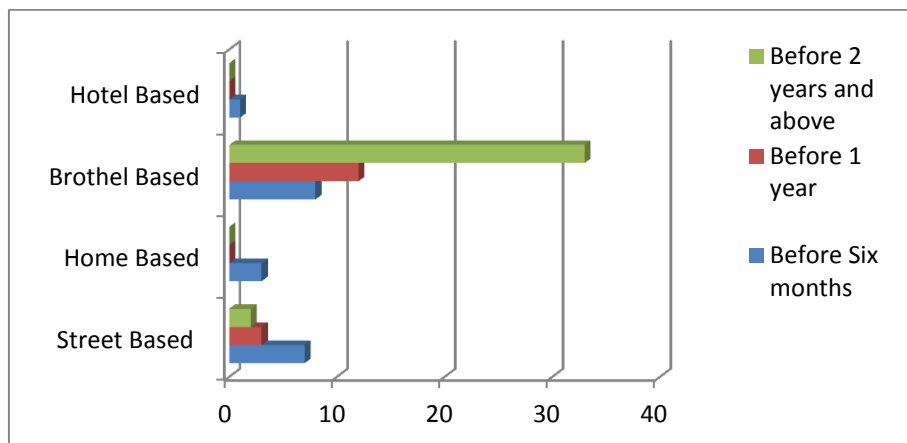
When did you go for testing and Counseling	Street Based	Home Based	Brothel Based	Hotel Based	Total
Before Six months	7(58%)	3(100%)	8(15%)	1(100%)	19 (28%)
Before 1 year	3(25%)	-	12 (23%)	-	15 (21%)
Before 2 years and above	2(17%)	-	33(62%)	-	35 (51%)
Total	12 (100%)	3(100%)	53(100%)	1(100%)	69(100%)

Source: Field data collected by the researcher

The respondents who have gone for HIV testing and counseling are also further asked when they went for testing and counseling and the fact is highlighted in the above table. Out of total female sex workers 28% of them went for HIV testing and counseling before six month, 21% went before one year and 51% went before two years and above. It is also observed that among street based 58% followed by home based 100%, brothel based 15% and hotel based 100% went for HIV testing and counseling before six months. A few numbers among street based 25% and brothel based 23% went for HIV testing and counseling before one years. Street based 17% and brothel based 62% went for HIV testing and counseling before two years and above.

Therefore it is observed that female sex workers of Silchar town who do not maintain regularity of HIV testing and counseling after each six months.

The following graphical representation depicts the percentage of female sex workers when did they go for testing and counseling.



Graphical representation of the respondents when did they go for testing and counseling

Table-5.07 (c)

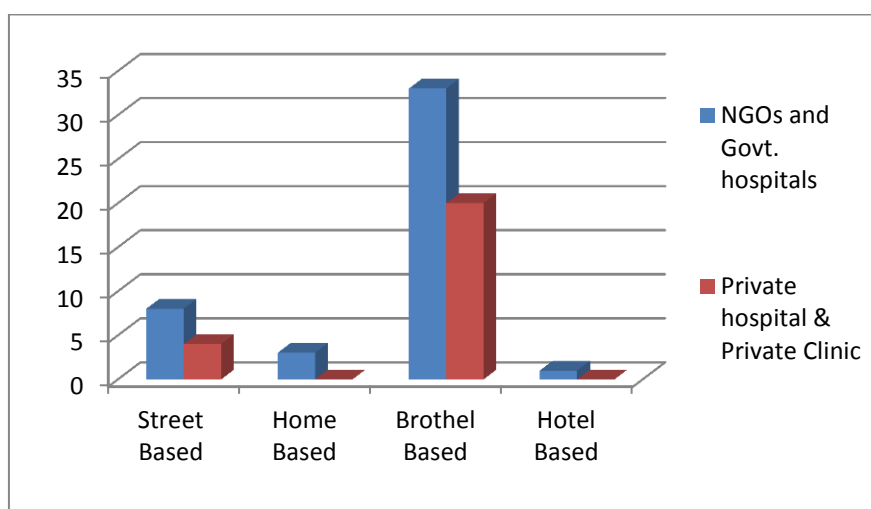
Place of HIV testing and Counseling

Place of testing and counseling	Street Based	Home Based	Brothel Based	Hotel Based	Total
NGOs and Govt. hospitals	8 (67%)	3 (100%)	33 (62%)	1(100%)	45 (65%)
Private hospital & Private Clinic	4(3%)	-	20 (38%)	-	24 (35%)
Total	12 (100%)	3(100%)	53(100%)	1(100%)	69(100%)

Source: Field data collected by the researcher

The respondents are further asked where they went for HIV testing and counseling. It is observed from the above table that out of total respondents who went for HIV testing and counseling among them 65% replied that they prefer NGO and Govt. hospital for HIV testing and counseling whereas 35% replied they prefer private hospital and clinics for HIV testing and counseling. Among street based it is observed that 67% of them go to NGOs and Govt. hospitals whereas 3% of them go to private hospital and private clinics for HIV testing and counseling . Among home based it is observed that 100 % of them go to NGOs and Govt. hospitals for HIV testing and counseling. Among brothel based it is observed that 62% of them go to NGOs and Govt. hospitals whereas 38% of them go to private hospital and private clinic for HIV testing and counseling . All hotel based (only one) 100 % sex workers go to NGOs and Govt. hospitals for HIV testing and counseling.

The following graphical representation depicts the percentage of female sex workers Place of HIV testing and Counseling.



Graphical representation of the respondents Place of HIV testing and Counseling

Table-5.08

Awareness on various services of HIV/AIDS

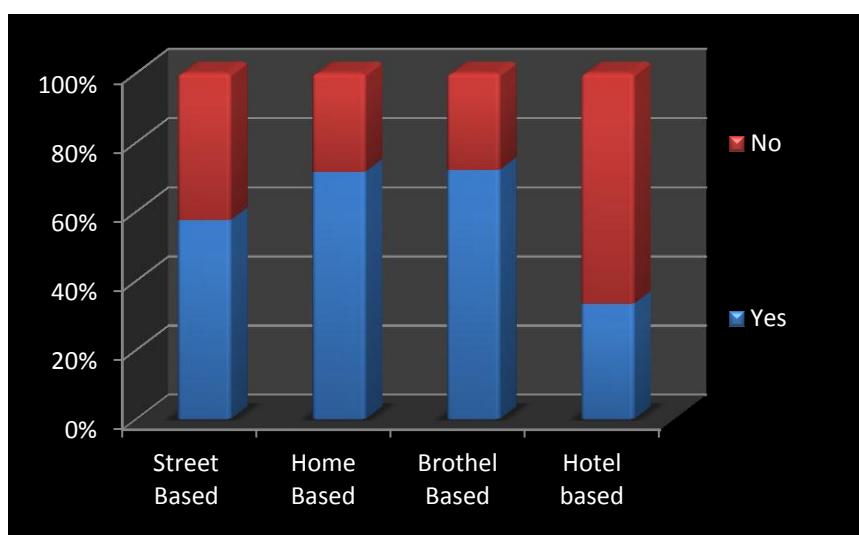
Aware of treatment services of HIV/AIDS	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	23(57.5%)	5 (72%)	144(72%)	1(33.33%)	173(69.2%)
No	17(42.5%)	2(28%)	56 (28%)	2(66.66%)	77(30.8%)
Total	40 (100%)	7(100%)	200(100%)	3 (100%)	250 (100%)

Source: Field data collected by the researcher

The study represents that out of total female sex workers 69.2% of them are aware of treatment services of HIV/AIDS whereas 30.8% of them are not aware about treatment services of HIV/AIDS. It is observed that among street based 57.5% followed by home based 72%, brothel based 72%, hotel based 33.33% are aware

of treatment services of HIV/AIDS whereas street based 42.5% followed by home based 28%, brothel based 28% and hotel based 66.66% of them are not aware about treatment services of HIV/AIDS.

The following graphical representation depicts the percentage of data.



Graphical representation of respondent's awareness on various services of HIV/AIDS

5.10 FEMALE SEX WORKERS KNOWLEDGE ON ART

Table-5.09 (a)

Respondents knowledge on ART

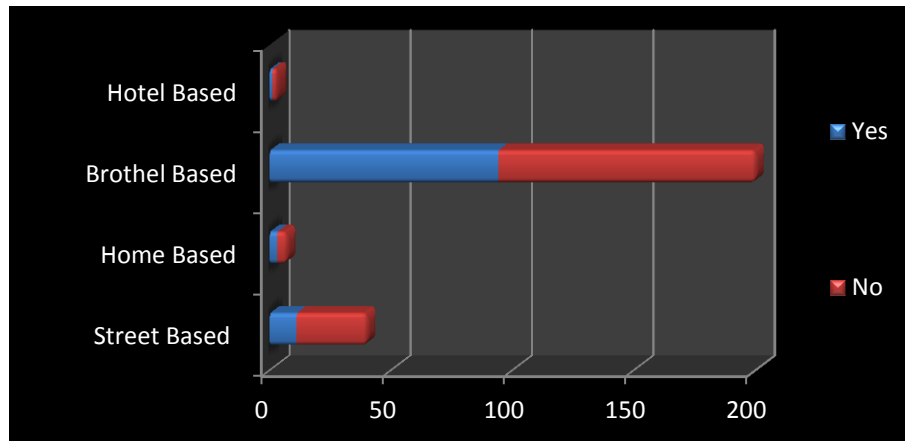
Knowledge on ART	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	11 (27.5%)	3(43%)	94 (47%)	1(33.33%)	109(43.6%)
No	29 (72.5%)	4 (57%)	106 (53%)	2(66.66%)	141(56.4%)
Total	40(100%)	7(100%)	200(100%)	3 (100%)	250(100%)

Source: Field data collected by the researcher

From the above table it is observed that out of total female sex workers in silchar town 43.6% of them have heard about ART (Anti retro viral therapy) whereas 56.4% of them have not heard about ART. Among street based 27.5% followed by

home based 43%, brothel based 47%, hotel based 33.33% of them have heard about ART whereas those who have not heard about ART are street based 72.5% followed by home based 57%, brothel based 53% and hotel based 66.66% .

The following graphical representation depicts the percentage of female sex workers knowledge on ART.



Graphical representation of respondent's knowledge on ART

The respondents who have knowledge on ART are further asked from which sources they have gathered knowledge on ART. The following table depicts the respondent's source of gathering knowledge on ART.

Table-5.09 (b)**If yes, Respondents source of gathering knowledge on ART**

If yes than from where did you come to know about ART	Street Based	Home Based	Brothel Based	Hotel Based	Total
Only Govt. Hospital	-	-	-	-	-
Govt. Hospital &NGO sources	7 (64%)	2(66.66%)	63 (67%)	1(100%)	73 (67%)
Govt. Hospital, NGO sources & Neighbors	-	-	-	-	-
Govt. Hospital, NGO sources, Neighbors, Friends & newspaper	-	-	16(17%)	-	16 (15%)
Above all sources	4 (36%)	1(33.33%)	15(16%)	-	20 (18%)
Total	11(100%)	3(100%)	94(100%)	1(100%)	109(100%)

Source: Field data collected by the researcher

The above table is linked with the table no. 5. 09 (a). It is observed from the above table that out of total 109 respondents who have knowledge on ART among them 67% have gathered knowledge from Govt. hospital &NGOs, 15% have gathered knowledge from the source of Govt. hospital, NGOs, neighbours, friends & newspapers whereas 18% of them have gathered knowledge on ART from above all sources. The study also reveals that 64% of street based female sex workers followed by 66.66% home based, 67% brothel based and 100% hotel based female sex workers have gathered knowledge of ART from Govt. hospitals and source of NGO. It is also found that only 17% of brothel based female sex workers have

gathered knowledge of ART from source of Govt. hospital, NGOs, neighbors, friends & newspaper. The data also highlights that 36% street based female sex workers followed by 33.33% home based and 16% have gathered knowledge of ART from above all sources.

5.11 FEMALE SEX WORKERS KNOWLEDGE OF STI

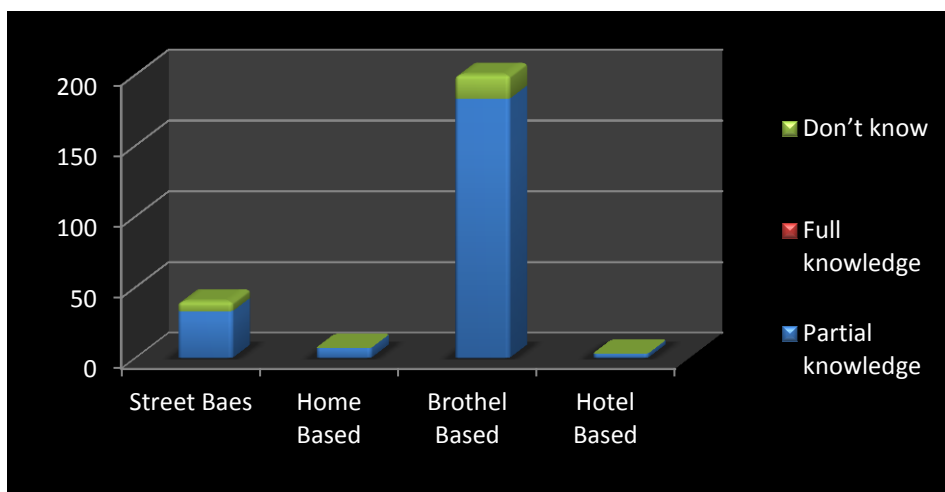
Table 5.10
Respondent's knowledge of STI

Knowledge of STI (White discharge, gonorrhea, syphilis, vaginal ulcer etc.)	Street Based	Home Based	Brothel Based	Hotel Based	Total
Partial knowledge	33 (82.5%)	7(100%)	183(91.5%)	3(100%)	226(90.4%)
Full knowledge	0 (00%)	0 (00%)	0 (00%)	0 (00%)	0 (00%)
Don't know	7(32.5%)	0(00%)	17(8.5%)	0(00%)	24 (9.6%)
Total	40 (100%)	7(100%)	200 (100%)	3(100%)	250 (100%)

Sources: Field data collected by the researcher

It is observed from the table that among street based female sex workers no one has full knowledge on STIs, 82.5% of them have partial knowledge on STIs and 17.5% of them are unknown about it. Among home based female sex workers it is observed that 100% have partial knowledge about STIs. Among brothel based female sex workers it is found that 91.5% are having partial knowledge and only 8.5% are quite ignorant about the infection. Again in hotel based female sex workers it is found that 100% of them have partial knowledge about the infections.

Therefore it is clear from the above tables that out of total female sex workers living in silchar town among them no one has full knowledge on sexually transmitted infections followed by 90.4% of them have partial knowledge of sexually transmission infections and 9.6% of them respondents who do not know STI.



Graphical representation of respondent's knowledge of STI

Table 5.11 (a)

Occurrence of STI among respondents

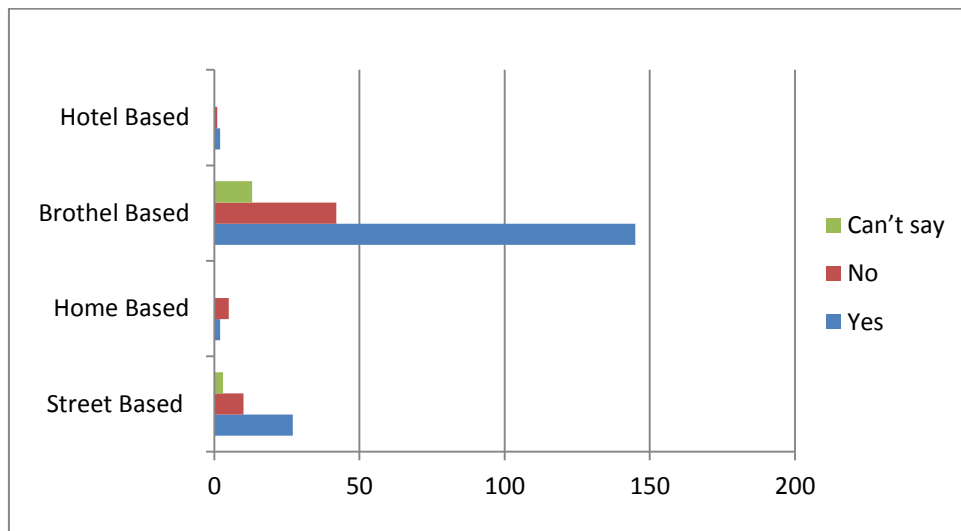
Did you get any sexually transmitted infection in last three months?	Street Based	Home Based	Brothel Based	Hotel Based	Total
Yes	27(67%)	2(28%)	145(72%)	2(66%)	176(70.4%)
No	10(25%)	5(71%)	42(21)	1(33%)	58(23.2%)
Can't say	3(7%)	-	13(6%)	-	16 (6.4%)
Total	40(100%)	7 (100%)	200 (100%)	3 (100%)	250(100%)

Source: Field data collected by the researcher

The study revealed that out of total female sex workers 70.4% of them have sexually transmitted infections in last three months, only 23.2% of them have no

sexually transmitted infections and 6.4% can't say whether they have STI or not . Among street based female sex workers 67% got sexually transmitted infection in the last three months, 25% have not suffered with STIs and 7% cannot say about the infection. Among home based female sex workers 28% got sexually transmitted infection in the last three months and 71% have not experienced it. Among brothel based female sex workers 72% got sexually transmitted infection in the last three months, 21% have not faced it 6% could not say about the infection. Among hotel based female sex workers 66% got sexually transmitted infection in the last three months and 33% have not suffered.

Therefore it is clear from the above data that majority of the female sex workers is having sexually transmitted infections.



Graphical representation of occurrence of STI among respondents

Table 5.11 (b)
If yes, Place of STI treatment

Where did you go for sexually transmitted infection treatment?	Street Based	Home Based	Brothel Based	Hotel Based	Total
Govt. hospital	2 (8%)	-	6(4%)	-	8(4%)
NGO clinic	10 (37%)	1(50%)	-	1 (50%)	12(7%)
Mobile STI clinic of NGO			55 (38%)		55(31%)
private clinics	3 (11%)	-	16 (11%)	1(50%)	20 (11%)
Negligence/ do not allowed going for treatment.	12 (44%)	1(50%)	68 (46%)	-	81 (47%)
Total	27(100%)	2 (100%)	145(100%)	2 (100%)	176 (100%)

Source: Field data collected by the researcher

The above table is closely linked with the table no V.11 (a).The respondents who have STI problem in last three months also further asked about place of STI treatment. It is observed that 4% of them went to Govt. hospital, 7% of them went to NGO clinic, 31% of them went to Mobile STI clinic of NGO, 11% went to private clinics and a majority of 47% who negligence and sometimes do not allowed to going for treatment. It is observed from the study that among street based 8% of them went to Govt. hospital followed by brothel based 4%. The respondents who went to NGO clinic it is observed that among 37% of street based followed by50% of them are home based and 50% of them are hotel based. The respondent who only attended to Mobile STI clinic of NGO is only 38%

brothel based female sex workers because NGO reach and provide door to door treatment to them and the respondents who went to private clinics it is observed that among 11% of them are street followed by 11% brothel based and 50% hotel based female sex workers. The respondents who are Negligence or do not allowed to go for treatment are 44% street based followed by 50% home based and 46% brothel based female sex workers.

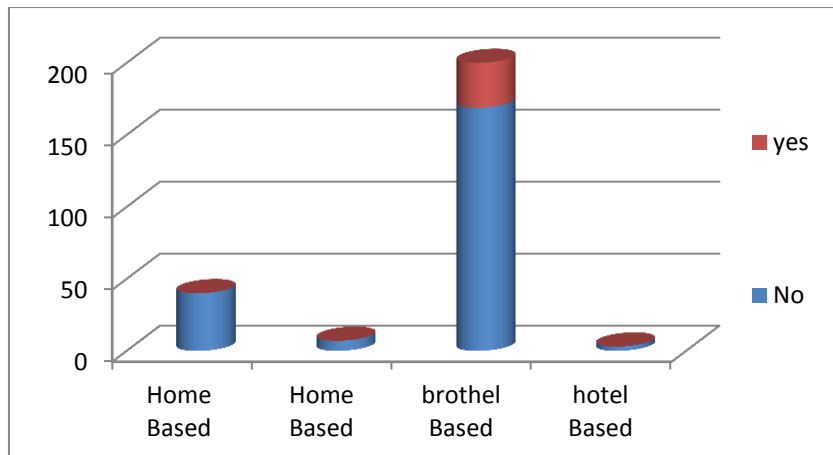
It is observed that majority of the female sex workers who either negligence or they are not allowed to going for treatment of sexually transmitted infections.

Table 5.12
Respondent's Attendance to STD clinic for VDRL test

Gone for VDRL test	Street Based	Home Based	Brothel Based	Hotel Based
No	40 (100%)	7 (100%)	169(85.5%)	3 (100%)
yes	-	-	31 (15.5%)	-
Total	40 (100%)	7 (100%)	200 (100%)	3 (100%)

Source: Field data collected by the researcher.

It is observed that only 15.5% of brothel based female sex workers went for RPR test in Mobile Medical Unit. As information is collected by the researcher from the key informant (doctor) that once a camp was organized by National Rural Health Mission through Mobile Medical Unit (MMU) where a few numbers of female sex workers attended for HIV and RPR test with the help of local NGO. Rest of other sex workers including street based, home based, and hotel based female sex workers have not gone for the test during the year of field work data collection.



Graphical representation of Respondent's Attendance to STD clinic for VDRL test

5.12 SUMMARY

It is observed from the study that female sex workers of Silchar town are not fully aware of HIV and AIDs. They are one of the vulnerable groups but their level of consciousness and awareness is not sufficient to protect them from occurrence of deadly disease like HIV. Even they are not regularly going to STI clinics or other medical clinics for testing STI infection. Most of them are not attending clinics due to ignorance, lack of knowledge, location of clinics and other compulsions. They are also not having knowledge about government facilities available for diagnosis, treatment, care and support for STI, HIV and AIDs.