Socio-Demographic Characteristics of Clients of Female Sex Workers and their Perspectives, Behaviors and Attitude on HIV and AIDS in Pokhara Valley: A Necessary Enquiry

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Abstract

The current situation of HIV in Nepal is different from when the first case was diagnosed in 1988. Till date (2009) total positive cases reported are 14787 out of which 13005 are receiving HIV care. There are gaps and challenges to be addressed in the fight against HIV and AIDS. In this context, clients of Female Sex Workers have no sincere knowledge of STIs, HIV and AIDS and their practices of safer way while visiting Female Sex Workers. Due to emerging sex market and number of Female Sex Workers exposure centers in Pokhara, the number of their clients is also unexpectedly growing. The sex practice depends upon the knowledge and behavior themselves and awareness toward such sexual complications, how to be safe from STI and HIV amongst Clients of FSW. The research should be to identify certain hidden facts which motivate to the clients to engage such activities.

Introduction

The current situation of HIV in Nepal is different from when the first case was diagnosed in 1988. Till date (2009) total positive cases reported are 14787 out of which 13005 are receiving HIV care. There are gaps and challenges to be addressed in the fight against HIV and AIDS. Nepal is low prevalence country for HIV and AIDS (0.49 percent). However, some of the groups show evidence of a concentrated HIV epidemic e.g. sex workers, migrant population and intravenous drug users (IVDU’s), both in rural and urban areas. Since 1988 when the first case was diagnosed Ministry of Health and Population/Department of Health Service (MoHP/DoHS) and different stakeholders came forward to address HIV and AIDS issues. The main focus was given to preventive aspects. In 1995 MoHP in consultation with different stakeholders developed a policy for the control of HIV and AIDS. However, the activities were implemented in a sporadic and disorganized manner. The real state about the spread of the epidemic in Nepal is not clear since the details available are on the basis of risk group. As regards the risk group, the prevalence rate is high. Perhaps it may not represent it prevalence rate of the general population [1-4]. As of 2007, national estimates indicate that approximately 70,000 adults and children are infected with the HIV virus in Nepal, with an estimated prevalence of about 0.49% in the adult population. As of June 2007, a total of 9756 cases of HIV, 1454 AIDS cases and 423 AIDS deaths had been reported to the National Centre for AIDS and STD control (NCASC). According to our study, we got cumulative number of Reported HIV cases 9614 up to 2007 that is just 142 cases lesser than NCASC reported. Like wise up to 2009 projected is 14833 which differs with actual reported cumulative number of HIV cases by 46 cases[1-4]. Informants indicated that the clients of the FSWs come from a wide range of professions and social classes. Most of the informants said that FSWs entertained both government and non-government employees as well as police officers and officials as their most common clients. Others stated Nepali army men and taxi drivers to be clients, whereas some also mentioned foreign army recruits (Lahurey). Very few informants had knowledge of drug addicts frequenting FSWs. Businessmen, porters/coolies, young hooligans, merchants, and the sons of rich men also were mentioned to visit sex workers.

Unsafe sex is a major cause of transmission of HIV and AIDS. In Pokhara valley, the estimation is about FSW is 500-1000. The number of clients of FSW is higher than the estimation of the population of Female Sex Workers. The Clients of Female sex Workers are from different groups, occupations who regularly contacts with FSW. Studies have shown that there is higher proportion of clients of FSW from Transport Workers (TW), Uniform Services (US), Labors, and other identified and unidentified clients excluded from the above classes are known as clients of Female Sex Workers.

In this context, clients of Female Sex Workers have no sincere knowledge of STIs, HIV and AIDS and their
practices of safer way while visiting Female Sex Workers. Due to emerging sex market and number of Female Sex Workers exposure centers in Pokhara, the number of their clients is also unexpectedly growing. The sex practice depends upon the knowledge and behavior themselves and awareness toward such sexual complications, how to be safe from STI and HIV amongst Clients of FSW. The research should be to identify certain hidden facts which motivate to the clients to engage such activities. Similarly, such studies previously not covered the behavior and attitude and the academic point of view in Pokhara. That's why the study on clients of Female Sex Workers is contextual in Pokhara sub-metropolitan city at present.

While sex work is a universal phenomenon, it is also frequently illegal. This makes it difficult to determine the true extent of the sex work industry, although it is acknowledged substantial and has apparently been increasing in recent years. This increase has been attributed to various factors, including changes in political, civil and socioeconomic conditions and increased population mobility. Significantly, higher rates of HIV infection have been documented among sex workers and their clients as compared to most other population groups within a country. HIV infection often spreads among sex workers before spreading into the general population. The true extent of HIV transmission from sex workers and their clients to other populations remains generally unknown [5].

The epidemic in Nepal is driven by injecting drug use and sexual transmission. Numerous social, economical and cultural factors drive injecting and sexual behaviors among various most-at-risk groups. Given the nature of Nepal's concentrated HIV epidemic, the focus of the response has been maintained with prevention programmes targeting key populations at higher risk. Most recent estimates of people living with HIV show that 42% of all HIV cases in Nepal are among seasonal labor migrants, 15% among clients of sex workers and 26% are wives or partners of HIV-positive men. The prevalence of HIV in the adult population in Nepal is 0.49% [6].

The Clients of FSWs are from different socio-demographic characteristics. Therefore, the real social problem of the clients of the FSWs differs from the research problems among them according to their background, knowledge, behaviors, practices and attitudes regarding to HIV, AIDS and sexually transmitted diseases. The widely persisted social problems among the clients is that majority of clients of FSWs are from lower socio-economic background that causes their less sensitivity and consciousness toward safer sex and protection from infection of STDs and HIV.

Combined qualitative and quantitative research showed that clients' knowledge, attitude and behavior call for immediate interventions. Which should probably first target the five major client groups: transport workers, service employees, migrant workers, uniform services holders, injecting drug users and businessmen as most clients of FSWs. Policy makers and implementers of HIV interventions need to be convinced that these are needed and feasible[7].

Conclusion and Suggestion

Only that a few researches have done among clients of FSWs to examine their knowledge, attitude and behavior, practices on sexuality and sexual relation with FSWs. Studies show that the clients of FSW are most vulnerable to infection. However, most studies are conducted from the projects point of view that's why the research problems identified by previous project researches differ from the academic research. Some research questions for the research study are as follow:

- What are the socio-demographic characteristics of the clients of the FSWs?
- What is the occupational background of the majority of the clients of FSWs?
- What about the knowledge, behavior, attitude and practices on sexuality and behavior change communication?
- What are the impacts on socio-economic affairs of Clients of FSW due to the practice of sexual contact with commercial female sex workers?

References

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