

REPORT
ON
KNOWLEDGE ON AIDS TRANSMISSION AND PREVENTION
AMONG THE ADOLESCENTS AND YOUTHS

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Table of Contents

<u>SECTION</u>	<u>PAGE</u>
<i>Executive Summary</i>	<i>i</i>
1 INTRODUCTION.....	1
1.1 FOREWORD.....	1
1.2 OBJECTIVE.....	1
2 BACKGROUND	2
3 METHODOLOGY.....	3
3.1 BACKGROUND.....	3
3.1.1 Target respondents	3
3.1.2 Target location.....	3
3.2 SAMPLE SIZE AND DISTRIBUTION.....	4
3.2.1 Sample size for quantitative study.....	4
3.2.2 Sample size for qualitative study.....	6
3.3 INFORMATION PROBE.....	6
3.3.1 Quantitative survey.....	6
3.3.2 Qualitative survey.....	8
3.4 DATA COLLECTION AND ANALYSES.....	8
3.5 ORGANIZATION OF THE REPORT.....	9
4 QUALITATIVE FINDINGS: NON-CSW	10
4.1 RESPONDENT PROFILE.....	10
4.1.1 Adolescent boys	10
4.1.2 Adolescent girls	10
4.2 ATTITUDE TOWARDS REPRODUCTIVE ISSUES	10
4.2.1 Adolescent boys	10
4.2.2 Adolescent girls	10
4.3 KAP TOWARD PUBERTY	11
4.3.1 Adolescent boys	11
4.3.2 Adolescent girls	11
4.4 AWARENESS OF SEXUAL BEHAVIOR.....	12
4.4.1 Adolescent boys	12
4.4.2 Adolescent girls	13
4.5 AWARENESS OF STD.....	13
4.5.1 Adolescent boys	13
4.5.2 Adolescent girls	13
4.6 AWARENESS OF AIDS.....	14
4.6.1 Adolescent boys	14
4.6.2 Adolescent girls	14
4.7 AWARENESS OF SUROCKKHA.....	14
4.7.1 Adolescent boys	14
4.7.2 Adolescent girls	15

Table of contents (cont.)

<u>SECTION</u>	<u>PAGE</u>
5 QUANTITATIVE FINDINGS: NON-CSW	16
5.1 RESPONDENT PROFILE.....	16
5.1.1 Age.....	16
5.1.2 Guardian.....	16
5.1.3 Occupation of guardian.....	16
5.1.4 Education.....	16
5.1.5 Income of respondents.....	17
5.1.6 Household income	17
5.2 ATTITUDE TOWARD REPRODUCTIVE ISSUES	17
5.2.1 Awareness.....	17
5.2.2 Sensitivity towards discussion of reproductive issues	17
5.3 FAMILY PLANNING AWARENESS	18
5.3.1 Marital status.....	18
5.3.2 Occupation of spouse.....	18
5.3.3 Last schooling level of spouse	18
5.3.4 Number of children of married respondents.....	18
5.3.5 FP practice by married respondents	18
5.4 KAP ON PUBERTY.....	18
5.4.1 Recognition of puberty of boys	18
5.4.2 Recognition of puberty of girls	19
5.4.3 Perception of boys regarding nocturnal pollution	19
5.4.4 Perception of boys regarding masturbation.....	19
5.4.5 Perception of girls regarding menstruation	19
5.5 PERCEPTIONS ABOUT PREGNANCY	20
5.5.1 Beginning age of pregnancy.....	20
5.5.2 When can a boy make a girl pregnant	20
5.6 AWARENESS OF SEXUAL BEHAVIOR.....	21
5.6.1 Perception about knowledge required for safe intercourse	21
5.6.2 Sexual harassment	21
5.6.3 Partner in first intercourse	21
5.6.4 Awareness of unmarried persons having sex.....	21
5.6.5 Awareness of married persons having sex with other than spouse	22
5.7 AWARENESS OF STD.....	22
5.7.1 General awareness of STD	22
5.7.2 Perceptions about symptoms of AIDS.....	22
5.7.3 Perceptions about symptoms of syphilis.....	22
5.7.4 Perceptions about symptoms of Gonorrhea.....	23
5.7.5 Knowledge on transmission of STD.....	23
5.7.6 Knowledge on treatment of STD.....	23
5.7.7 Knowledge on prevention of STD.....	23

Table of contents (cont.)

<u>SECTION</u>	<u>PAGE</u>
5.8 AWARENESS OF AIDS	24
5.8.1 General awareness of AIDS.....	24
5.8.2 Knowledge on transmission of AIDS.....	24
5.8.3 Knowledge on prevention of AIDS.....	24
5.8.4 Source of and attitude toward knowledge on AIDS.....	24
5.8.5 Attitude toward AIDS patient.....	25
5.9 AWARENESS OF CONDOM.....	25
5.9.1 Awareness of condom.....	25
5.9.2 Awareness on use of condom.....	25
5.10 AWARENESS OF SUROCKKHA	25
6 QUALITATIVE AND QUANTITATIVE FINDINGS: CSW	26
6.1 RESPONDENT PROFILE.....	26
6.1.1 Girl sex workers.....	26
6.1.2 MSM & Hizra.....	26
6.2 KAP TOWARD PUBERTY	27
6.2.1 Girl sex workers.....	27
6.2.2 MSM & Hizra.....	28
6.3 AWARENESS OF SEXUAL BEHAVIOR.....	28
6.3.1 Girl sex worker	28
6.3.2 MSM & Hizra.....	28
6.4 AWARENESS OF STD AND AIDS.....	29
6.4.1 Girl adolescent workers.....	29
6.4.2 MSM & Hizra.....	29
6.5 AWARENESS OF SUROCKKHA	30
6.5.1 Girl sex worker	30
6.5.2 MSM & Hizra.....	30
5.6.1 Perception about knowledge required for safe intercourse	iv

List of Annexure

Annexure-1:	Questionnaire on All Group
Annexure-2:	Questionnaire on CSW
Annexure-3:	Data Tables on All Group
Annexure-4:	Data Tables on CSW

Executive Summary

Foreword

Social Marketing Company (SMC) commissioned Research and Computing Services Private Limited (RCS) to conduct a KAP survey on AIDS among Adolescents and Youths on AIDS. The study was conducted among boys and girls of age between 12-19 years and respondent segmentation was done by student, labor, garments worker and transport worker.

Objective

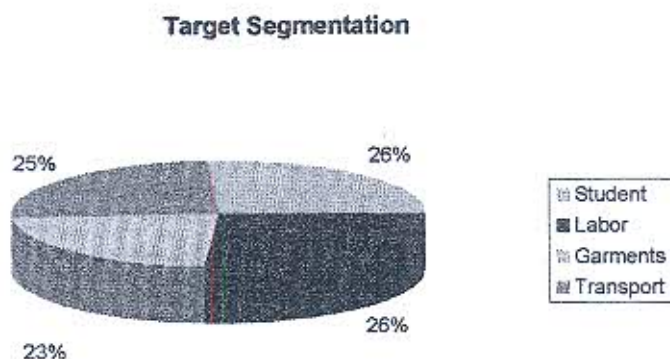
The primary objective of the survey was to gather data for providing a benchmark on specific key indicators to measure the BCC intervention on the defined target group. In addition, input was obtained for development of the program's communication approach for a target audience possessing the characteristics of the respondents surveyed under this project.

Methodology

The present survey has been designed to have conformity with the earlier KP surveys on STD/AIDS for Social Marketing Company. Both quantitative and qualitative techniques, interview using structured questionnaire and focus group discussions respectively, were used for gathering information. Sample sizes to be dealt with quantitative and qualitative techniques were also determined separately.

Coverage

The designated number of respondents was interviewed from each cluster based on random start point selection and consecutive coverage method. The proportion of each cluster in the total target audience is illustrated in the following figure.



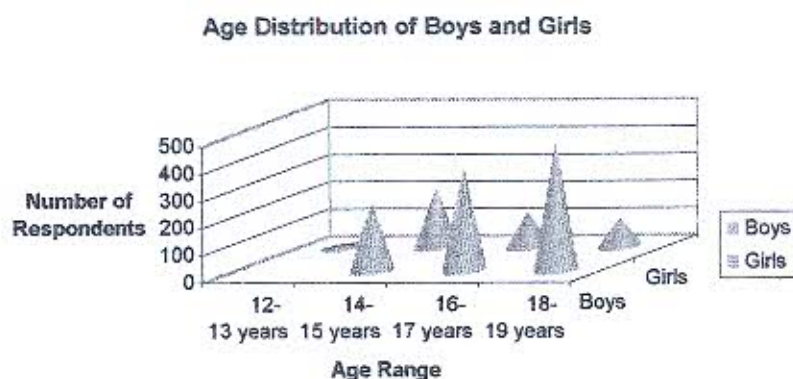
Organization of Findings

Findings of KAP data relating to the various respondent group was organized into the following issues:

- Respondent Profile
- Attitude towards Reproductive Issues
- Family Planning Awareness
- KAP on Puberty
- Perceptions about Pregnancy
- Awareness of Sexual Behavior
- Awareness of STD
- Awareness of AIDS
- Awareness of Condom
- Awareness of Surockkha

Respondent Profile

Age distribution of boys and girls interviewed under the survey is shown in the following figure. Majorities of boys are within 16-17 years and majorities of girls are between 14-15 years.



Father is the guardian of the respondent in 69.1% cases followed by mother in 11% cases. Business and services are the top ranking occupations among guardians.

Seventy-nine percent of respondents had schooling and Class III-V is the average last schooling level for those who did not ever have schooling or had highest level below class V. Among respondents who had either no schooling or last highest schooling level is below Class V, 33.6% can read and write, 19.8% can not read and write, and 46.7% can sign only.

Attitude toward Reproductive Issues

All of the respondents are aware of reproductive issues regardless of whether they discuss it with their guardians or not. Only 2.7% of overall audience reported that they have discussed reproductive issues with their father while 19.6% reported that they have discussed with their mother.

Family Planning Awareness

Ninety-one (91.2%) percent of the respondents are unmarried. Seven percent (7.2%) of the respondent are married while 1% and 0.4% are divorced and separated respectively.

Sixty-three (63.4%) of the married respondents do not practice any FP method while 6.3% and 26.8% use condom and pill respectively. It was found that condom usage rate by spouse is highest among the students (50%).

Condoms that are used by them include Raja (57.1%) and Panther (42.9%) respectively and Pills include Maya (13.3%), Femicon (46.7%), Nordette-28 (6.7%), and Sukhi (33.3%).

KAP on Puberty

Twenty-six (25.5%) from the boy respondents told that boys recognize their puberty at the age of 14-15 years while Twenty-five percent (24.7%) of the girl respondents termed 12-13 years as the age of reaching puberty. Fifty percent of the boys told that they became aware of their puberty when they started feeling attracted toward girls and had experienced nocturnal pollution. Ninety-three (93.2%) of the girls observed menstruation as the major indicator of puberty while 49.1% refer to growth of breast.

Perceptions about Pregnancy

Forty-three (42.8%) of the boys could not tell the age at which a girl becomes capable to become pregnant. Thirteen percent (13.2%) of the boys termed 18 years of age as the beginning age of pregnancy while 9.7% termed 14 years as the beginning age.

Fifty-seven percent (57.2%) of the girls could not tell the beginning age of pregnancy. Twelve percent (12.2%) termed 18 years as the beginning age while 7.2% and 6.8% termed 15 years and 14 years as the beginning age respectively.

Awareness of Sexual Behaviour

5.6.1 Perception about knowledge required for safe intercourse

Fifty-seven percent (57.1%) of the boys told that condom should be used during intercourse as safety measure. Thirty-two (31.9%) could not tell anything in response to this question. Forty-seven percent (47.2%) of the girls do not know what should be known for safe intercourse. Twenty-four (23.6%) name use of condom as safety measure while 11.6% suggested use of condom only for having sex with other than spouse.

Thirty-six percent (35.8%) of the boys told that adolescents are sexually harassed by mastans spoiled boys. Thirty-eight percent (38.3%) could not answer this question. Seventy-four percent (74.2%) of the girls also think that adolescents are sexually harassed by mastans spoiled boys drunkards. Seven percent (7.4%) identified lover as the oppressor while 7.2% identified neighbor as the one. In the case of girls, only 9.2% girls failed to answer this question.

Sixty-three percent (63.3%) of the boys told that first intercourse takes place between husband and wife and 62.2% told that it takes place between lovers. Eighty-seven percent (87.1%) of the girls believe that husband and wife are the mutual first partners of intercourse. Forty-two percent (41.9%) think that first intercourse takes place between lovers and 16.6% think it to be between friends.

Awareness of STD

Eighty-three percent of the boys are aware of at least one STD while 86% of the girls is aware of at least one STD. Sixty-six percent (65.5%) of the boys believe that having intercourse with sex workers is likely to transmit STD. Forty-one percent (41.2%) of the girls believe that having intercourse with someone with STD transmits STD.

Awareness of AIDS

Ninety-five percent (95.3%) of the boys are aware of AIDS while 97.4% of the girls are aware. Eighty-one percent (80.9%) of the boys gathered knowledge on AIDS from TV while 84.3% of the girls had TV as their source of knowledge.

Seventy-nine (78.8%) of the boys would ask the patient to take doctor's advice while 58.1% of the girls would do the same. Twenty-six (26.4%) of the boys and 29.8% of the girls affirmed that they would help and not hate the patient.

Awareness of Condom

Eighty-nine percent (89.4%) of the boys have seen condom while 44.5% of the girls had seen it. Twenty-three (22.5%) of the boys have bought condom while 8.3% of the girls bought condoms and these groups included students, labors and garments workers.

Awareness of Surockkha

Thirty-seven percent (36.5%) of the boys are aware of Surockkha while 36.2% of the girls are aware. Among the boys who are aware of Surockkha, percentage of school students (55.7%) are more than others and among the girls, percentage of labors (56.3%) are more than others.

Thirty-two percent (32.2%) of the boys and 32.5% of the girls could not tell what Surockkha does.

Thirty-seven percent (37.1%) of the boys and 36.1% of the girls have talked to activists of Surockkha. Fifty-five percent (55.3%) of the boys got advice on STD and use of condom from Surockkha activist while 38.3% of the girls knew about STD and 51.7% got advise on AIDS from Surockkha activists.

Ninety percent of the boys have seen items of Surockkha while 90% of the girls have seen the items. Top ranking items seen by the boys include comb (63.7%), pen (40%), calendar (38.3%) and poster (32.6%). Top ranking items seen by the girls are poster (41.7%), booklet (46%), comb (38.3%), and mirror (30%).



1 Introduction

1.1 Foreword

Social Marketing Company (SMC) commissioned Research and Computing Services Private Limited (RCS) to conduct a study on **“Knowledge on AIDS Transmission and Prevention among the Adolescents and Youths.”** The study was conducted among youth and adolescents to observe the level of knowledge among the respondents group on AIDS transmission and prevention and subsequently to gather and analyze information on the same. The target audience for this survey included adolescents and youths from different walks of life including commercial sex workers. In order to ensure proper representation of the population by the target audience, the two- stage stratified cluster sampling strategy was employed for deriving at the target audience surveyed under this project.

1.2 Objective

The followings are the primary objectives of the study on “Knowledge on AIDS Transmission and Prevention among the Adolescents and Youths.”

1. To gather data for providing a benchmark on specific key indicators to measure the Behavior Change Communication (BCC) intervention on the defined target group.
2. To gather input for development of the program's communication approach for a target audience possessing the characteristics of the respondents surveyed under this project.

2 Background

Social Marketing Company (SMC) was established in 1990 through conversion of the erstwhile GoB managed and bilaterally funded Family Planning Social Marketing Project (FPSMP). The company is presently engaged in social marketing of non-clinical family planning products and oral rehydration salts (ORS).

Social Marketing Company (SMC) has undertaken reproductive health protection program through education and condom promotion among population segments in Bangladesh who are at high risk of contracting HIV and other STDs through sexual transmission. The target population for condom distribution and promotion and AIDS/STD education will be commercial sex workers (CSW) and their clients in different commercial sex establishments (CSE).

However, at this phase SMC also intends to contract out the conduction of the study to assess the knowledge level of the adolescents and youth on AIDS transmission and prevention and for this purpose they have taken the initiative to conduct this study. The study also covers adolescent sex workers in order to assess level of KAP of this section of CSW with a view to understand need of focused AIDS/STD education for this group.

Social Marketing Company (SMC) reaches a large population through its various Behavior Change Communication (BCC) programs. Among these programs, STD/AIDS Prevention Program communication communicates through education and condom promotion by reaching out to specific communities in Bangladesh who are at a higher risk to contracting HIV and other STDs through sexual transmission. From the experience of the program's BCC intervention, it has been seen that there is a high occurrence of risky behavior among the adolescent and youth population. Moreover, these people have hardly any access to correct knowledge and information, which leads them to seek information on sensitive issues from unreliable and sources. In the wake of the dangerous epidemic, it is more than important to know this group of people, find out their knowledge level and common queries they have regarding sensitive health issues in the intervention areas. STD/AIDS Prevention Program reaches this group from time to time and it is thus essential to find out the status of knowledge, attitude and behavior in this group and how the program should intervene in its successive stages for behavioral change among this particular group. Hence, the need for a research on adolescents and youth emerged.

3 Methodology

3.1 Background

The present survey has been designed to have conformity with the earlier KP surveys on STD/AIDS for Social Marketing Company. Both quantitative and qualitative techniques, interview using structured questionnaire and focus group discussions respectively, were used for gathering information. Sample sizes to be dealt with quantitative and qualitative techniques were also determined separately.

3.1.1 Target respondents

The target population selected for appraising the level of Knowledge on *AIDS Transmission and Prevention among the Adolescents and Youths* included both adolescents (12-19 years) and youths (up to 24 years). This is also one of the population segments that are intervened by STD/AIDS Prevention Program of SMC. The sample comprising of the target respondents of this survey included adolescents and youths from both in-school and out-of-school population. Adolescent commercial sex workers comprised one category of the sample that was dealt with separate questionnaire.

The following categories of respondents were interviewed for the study:

- School students (from grades 8 to 12)
- Restaurant boys / Laborers
- Garment workers
- Transport helpers/assistants
- Commercial Sex Worker

3.1.2 Target location

The target audiences were interviewed from the following program locations:

- Tongi
- Narayanganj
- Chittagong
- Khulna
- Rajshahi
- Hilli
- Barishal

It should be noted here that as our survey teams failed to identify sufficient number of CSW in Hilli, we had to extend our coverage to Barishal only to include commercial sex workers.

3.2 Sample Size and Distribution

3.2.1 Sample size for quantitative study

As per sampling design, the survey was conducted among 1565 Non-CSW primary respondents and 190 CSW primary respondents. For Non-CSW primary respondents, we have applied the following statistical formula to determine the appropriate sample size to fulfill the objective with validity at a higher level but cost wise at a lower level. The statistical significance of this sample size is as follows:

$$n = \frac{p(1-p)z^2}{e^2} \times \text{deft}$$

Where n - is the desired size of sample
 p - is the expected prevalence of knowledge on the selected indicators
 Z - is the standard normal value with 95% confidence = 1.96
 e - is the desired level of error in the estimate or the precision desired
 deft - is the design effect due to the deviation from simple Random Sampling to cluster Sampling

Although the value of p, i.e., prevalence of knowledge about different indicators of STD/AIDS varies with the indicators, we assumed that the values vary within 30% to 70%, based on the experience in different studies. Therefore, the value of p assumed as 50-60% for which the sample size is reasonably higher.

However, 'e' is assumed as upto $\pm 7\%$ at area level or audience level, and about 3% at aggregate. That is, for each target audience, the estimates available with 7% plus or minus precision while the aggregate at 3% plus or minus. Again, for each area, for all audience the estimate is available with 7% plus or minus precision. Under these considerations, the minimum sample size reached as 275-300 with a deft = 1.5 - for individual audience.

The actual number of the different audiences in the different program areas is shown in Table I. Actual numbers of audiences in different program area were decided on the basis of proportion of target population in these areas. For example, as garments workers were not available in Rajshahi, Khulna, and Hilli compared to Tongi and Narayanganj, number of garments workers in the target audience also diminished to zero. All the sub samples contain proportionate number of adolescents and youth in all of the sub-samples are in proportion with the size of audience population¹.

¹ Population audience refer to population on the basis of a particular criterion, e.g., population audience for garments workers, population audience for transport workers, etc.

Table 1
Number of audience under quantitative survey in different programme area

Program area	School Student	Restaurant boy/Labour	Garment worker	Transport worker	CSW	All audiences
Tongi	65	65	131	65	7	333
Narayanganj	79	65	114	65	77	400
Chittagong	65	68	113	67	44	357
Khulna	65	65	0	65	2	197
Rajshahi	66	75	0	70	4	215
Hillti	70	65	0	65	Nil	200
Barishal	Nil	Nil	Nil	Nil	56	56
All area Sub-Total	410	403	358	397	190	1,758

For CSW primary respondents, the sample size was limited to availability and time constraints. However, the sample size of 190 CSW could be considered higher also reason for which is explained below.

According to our sampling plan, it was figured out that 275-300 would be the desired sample size of this study. Given this, if we are to calculate a corrected sample (to be derived from the desired sample size), the following formula would be applied:

$$n_c = \frac{n}{1+n/N}$$

Where n - desired sample size
 n_c - derived sample size
 N - Population

Now, if we consider n, the desired sample size, as 5% of the population, then the value of n/N would be equal to .05. In this way, we can generate the following list of different adjusted sample sizes with respect to n/N:

For	n/N=.05	n _c = 275 / (1+.05)	=	262
	n/N=.10	n _c = 275 / (1+.1)	=	250
	n/N=.20	n _c = 275 / (1+.2)	=	230
	n/N=.30	n _c = 275 / (1+.3)	=	212
	n/N=.40	n _c = 275 / (1+.4)	=	196

Considering the above calculation, we can safely conclude that the sample size of 190 CSW is adequate as the sample size might account for 40% of the population in the target locations considering the population of adolescent commercial sex workers to be finite.

3.2.2 Sample size for qualitative study

We have also conducted focus group discussions for qualitative analysis. The target audiences for focus group discussion in the program location were reached at Tongi, Narayanganj, Chittagong, Khulna, Rajshahi and Hilli, all town-based areas. The categories of respondents selected for FGDs are as follows:

- School Students (From grades 8 to 12)
- Restaurant boys / Labour
- Garment workers
- Transport helper/assistants
- Commercial Sex Worker (MSM and Hizra)

The numbers of Focus Group Discussions (FGDs) conducted in the sample locations are shown in the following table:

Table 2
Number of Focus Group Discussion in different programme area

Program area	School Student	Restaurant boy / Labour	Garment worker	Transport worker	MSM & Hizra	Total FGDs
Tongi	1	1	1	1	Nil	4
Narayanganj	1	1	1	1	Nil	4
Chittagong	1	1	1	1	Nil	4
Khulna	1	1	1	1	6	10
Rajshahi	1	1	1	1	Nil	4
Hilli	1	1	1	1	2	6
All area Sub-Total	6	6	6	6	8	32

Note: 2 from Hilli are Hizra and 6 from Khulna are MSM

3.3 Information Probe

3.3.1 Quantitative survey

Structured questionnaire was used for collecting quantitative information through in-depth interview of respondents. The following structure was used in designing information probe with a view to appraise level of knowledge, attitude and behavior of adolescents and youths on AIDS:

Respondent Profile

- Age
- Sex
- Education
- Relationship with family
- Occupation and income

Attitude toward Reproductive Issues

- Awareness of reproductive issues
- Sensitivity towards learning reproductive issues

Family Planning Awareness

- Marital Status
- Education of spouse
- Use of FP Methods

Knowledge, Attitude and Perception Regarding Puberty

- Recognition of puberty
- Perception and attitude towards experience of puberty
- Other information relating to knowledge, attitude and perception relating to puberty

Awareness of Sexual Behavior

- Precautions for safe intercourse
- Perception on sexual harassment
- Knowledge on first experience of intercourse
- Sexual behavior of married and unmarried males
- Sexual behavior of married and unmarried females
- FP methods used in intercourse with other than spouse

Awareness of Sexually Transmitted Disease

- General awareness of STD and their symptoms
- Knowledge and attitude toward treatments for STD related ailments
- Perceived level of knowledge on STD
- Other information relating to further learning

Awareness of AIDS

- General awareness and nature of AIDS
- Perceived measures of prevention of AIDS
- Source of knowledge on AIDS
- Perception about knowledge on AIDS
- Attitude towards AIDS patient

Condom Purchase Behavior

- Whether aware of condom
- Whether condom purchased
- Attitude towards condom purchase

Condom Use and Awareness

- Perceived use of condom
- Source of knowledge on perceived use of condom
- Level of knowledge on use of condom

Surockkha Awareness

- General awareness of *Surockkha*
- Perceived activities of *Surockkha*
- Perception about activists of *Surockkha*
- Knowledge on items of *Surockkha*

3.3.2 Qualitative survey

Probing techniques in FGD involved indirect conversation leading to discussion questions. Participants in FGD were asked a series of questions based on the structured questionnaire used for quantitative survey. Traditional FGD guidelines practiced by RCS resource persons were followed during the FGDs.

3.4 Data Collection and Analyses

Structured questionnaires were used to collect field level data. Questionnaires were finalized after detailed considerations over the intended information coverage. A sense of conformity was maintained with the questionnaires of the other KAP surveys on STD/AIDS awareness.

All questionnaires were prepared in Bengali version and were pretested before final approval. Open and closed-ended questions and probing techniques were used in the questionnaires and both quantitative and qualitative techniques were used. Sample copies of questionnaire used in data collection are presented in Annexure-1.

The data processing methodology adopted included use of modern computerized statistical tools, advanced microcomputer systems, and employed an experienced and well-trained data entry/processing team to deliver meaningful output from survey data. The following points contain detailed description of the methodology followed in data processing:

1. After completion of question design, the approach for data processing was determined. This involved, *inter alia*, determination of appropriate statistical tools, techniques and formula to be applied to survey data in order to obtain required output information. The approach was finalized after a critical appraisal of output information requirement after discussion with SMC officials for comment and concurrence.

2. Data entry modules were prepared and data entry operators were acquainted with the system. In order to ensure accuracy of data entry, the operators employed were experienced and trained in data entry operations. The computer program developed incorporated built-in control techniques in order to minimize data entry errors. In order to ascertain accuracy of the output, the program was subject to test run using dummy data.
3. After completion of data entry, hard copy listing of data entered and stored in suitable storage and backup media was taken. This was used to conduct 10% random checking of data against survey questionnaires. If more than 2% error is detected in this process, a further random sample of 20% was taken and checked accordingly. Alterations were made to store data as necessary.
4. After satisfactory checking of entered data was completed, live data was fed into Microsoft Excel for analysis and table building. The output obtained from the system was subsequently translated into query tables presented in this report.

3.5 Organization of the Report

We present summary analyses of findings relating to each group in the following chapters. The next chapter includes findings from focus group discussions followed by chapters including analyses of information obtained from quantitative survey. The sequence of presentation of quantitative information has been made to follow the structure of information probe. Detailed statistical tables of relating to target respondents are presented in annexures. These tables are organized according to sequence of questions used in the questionnaires.

4 Qualitative Findings: Non-CSW

4.1 Respondent Profile

4.1.1 Adolescent boys

Age of adolescent boys interviewed in FGD ranged from 13 to 19 years. Each group of respondents, namely, students, labors, garments workers, and transport workers were interviewed separately.

The educational level of students was class VIII. The levels of education of labors were from none to class VIII and that of transport workers were also from none to class VIII. Among all of these respondents, only 2 transport workers were married and occupation of wife of both of them were housewives. Among those who are married, only one couple has adopted FP method namely, Norplant.

4.1.2 Adolescent girls

Age of adolescent girls interviewed ranged from 14 to 19 years. Each group of girls was also interviewed separately.

The educational level of students ranged from Class VII to Class XII. That of labors were from class VI to class VII and of garments workers were from non-formal to class VIII. Among the respondents, 2 were found to be married, one of them being a student and the other one a labor. The girl who is a labor and married is now a divorcee.

4.2 Attitude towards Reproductive Issues

4.2.1 Adolescent boys

All of the respondents were found to be aware of reproductive issues. However, majority of them expressed reluctance towards discussing reproductive issues with their respective guardians. Only 3 labors revealed that they had discussed these with their respective fathers. None of the respondents discuss reproductive issues with their mother.

Major reasons for those who refuse to discuss with their guardians were mentioned as shyness and fear. This group prefers friend and sister in-law (wife of elder brother) as the source of knowledge on reproductive issues.

4.2.2 Adolescent girls

Adolescent girls who participated in the FGD are aware of reproductive issues. However, none of them had discussed and would not discuss this with their father. Reasons for not preferring father is the gender of father and shyness of the respondents. In fact, one respondent had found the idea of asking this question to father as absurd.

Preference towards source of knowledge on reproductive issues was identified by respondents as, according to priority set by them, mother, sister, friend, and sister in-law (wife of elder brother).

4.3 KAP toward Puberty

4.3.1 Adolescent boys

Boys identified the followings as indicators of puberty of boys:

-	18 years/20 years	70%
-	Growth of beard/mustache	55%
-	Physiological change	60%
-	Age of marriage	60%
-	Nocturnal pollution	40%
-	Ability to earn money	80%

And the following characteristics were identified by them as indicators of puberty of girls:

-	14 years/16 years	55%
-	Growth of breast	85%
-	Growth of body	70%
-	Age of marriage	40%
-	Menstruation	30%
-	Behavior	45%

Replying to another question, number of boys who liked the experience of nocturnal pollution almost equaled the number of boys who disliked it. One-third of the respondents shared the experience to their friends.

Almost all of them think that nocturnal pollution occurs when a boy mates with a girl in his sleep/dream. They have seen this as an event, which weakens and harms body.

Regarding ability to reproduce, they have mentioned that a boy can make a girl pregnant after 18 years of age through intercourse and marriage. Referring to the girls, they have mentioned that a girl can become pregnant through intercourse or marriage after menstruation.

4.3.2 Adolescent girls

Girls identified the followings as indicators of puberty of boys:

-	Growth of beard/mustache	70%
-	Physiological change	60%
-	Age of marriage	60%
-	Attraction towards girls	55%
-	Dress/behavior	45%

And the following characteristics were identified by them as indicators of puberty of girls:

-	14 years/16 years	60%
-	Growth of breast	70%
-	Growth of body	65%
-	Age of marriage	45%
-	Menstruation	80%
-	Behavior	60%
-	When everyone talked about	

Replying to another question, girls who had experienced menstruation got afraid and screamed. Few of them told that they hate that experience. Except few, none of the girls had idea about menstruation before experiencing it.

Regarding ability to reproduce, they have mentioned that a boy can make a girl pregnant even after 14 years of age through intercourse and marriage. Referring to the girls, they have mentioned that a girl can become pregnant through intercourse or marriage after menstruation.

4.4 Awareness of Sexual Behavior

4.4.1 Adolescent boys

Almost 80% of the boys have mentioned that using condom during intercourse is a reliable safety measure. Ten percent of the respondents think of taking doctor's advice while the rest could not tell anything.

Almost 70% of the boys think that first experience of intercourse takes place between husband and wife. Sixty percent think that it takes place between lovers and 10% think it can occur between friends, cousin and sex workers.

More than 70% boys told that adolescents are harassed sexually by both male of female of immoral character. Few have identified Terrorist, Madrassa Teacher and Hotel Staff as the oppressors. About 10% could not answer this question.

More than 60% boys told that they have known unmarried male and female, who have sex with others mainly, sex workers. Explanation for this behavior was given by them as to satisfy sexual urge. Less than 5% have told that they know married male and females who have sex with other than spouse. Major reason for married male is to satisfy passion and that for married female is to earn money. Almost none of them could tell whether these males and females use FP method or not.

4.4.2 Adolescent girls

The girls outlined a set of options as safety measures for intercourse. These are:

- Using condom
- Knowledge on AIDS
- Knowledge on STD
- Knowledge on safe intercourse
- Not having intercourse during menstruation
- Knowing whether partner has STD
- Age
- Not having intercourse if pregnant over 6 months
- Do not know

More than 90% of the girls told that first experience of intercourse takes place between husband and wife. About 10% told that first experience takes place with sex worker. Only a handful named friends, cousin, brother in-law (husband of elder sister) as the ones with whom first experience of intercourse takes place.

More than 90% have identified mastans and drunkards as the ones causing sexual harassment to adolescents. About 10% girls told that sexual harassment is caused by cousins. A handful named rich relative, lover, and brother in-law (husband of elder sister) who harass adolescents sexually.

Surprisingly, none of the girls told that they know someone, male or female, married or unmarried, who has illicit intercourse. Only a handful mentioned that they doubt a few but are not sure about it.

4.5 Awareness of STD

4.5.1 Adolescent boys

All participants know that there are certain diseases that are STD but all of them could not tell name and symptoms of STD. About 90% of them could name Syphilis and Gonorrhea and about 80% could tell name of AIDS. NONE of them, as they claimed, had ever suffered from STD.

Major reasons for STD, as identified by respondents, included not using condom during intercourse and using syringe/blade for excessive long time. Ninety percent of them told they prefer treatment by doctor for STD and half of them told that tablet and injection could be used for treatment.

4.5.2 Adolescent girls

All participants name AIDS as the major STD and about 50% name Syphilis and Gonorrhea as other STD known to them. Like the boys, the girls also claimed that none of them had ever suffered from STD.

Major reasons for STD, as identified by girls, were as follows:

- Mating with someone affected with STD
- Having intercourse with sex workers
- Unhygienic practices

Like the boys the girls also think that one should seek advice from doctor if suffer from STD.

4.6 Awareness of AIDS

4.6.1 Adolescent boys

Eighty percent of the respondents could tell name of AIDS as a major disease. The level of knowledge of the respondents on transmission and prevention of AIDS was more or less adequate as all of them identified the following ways in which AIDS could be transmitted:

- Taking blood without examination/from AIDS patient
- Not using condom during intercourse

More than 80% mentioned that AIDS could also spread if syringe/blade are not cleaned before used or used for excessive long time. Fifty percent mentioned mating with AIDS patient as a reason for transmission of AIDS. For prevention of AIDS, they suggested to avoid the above mentioned practices.

4.6.2 Adolescent girls

All of the girls are aware of AIDS. All of them have identified the following as the major means of transmission of AIDS:

- Using syringe/blade of AIDS patient
- Mating with AIDS patient
- If AIDS mother conceives

Other responses included mating with sex workers and taking blood from AIDS patient. For prevention of AIDS, they also suggested to avoid the above mentioned practices.

4.7 Awareness of Surockkha

4.7.1 Adolescent boys

The respondents those who are aware of existence of Surockkha among them 70% could not tell about activities of Surockkha. The remaining of the respondents told that Surockkha give advice on AIDS and use of condom. About 30% of the respondents told that they had seen and received calendar, key ring, pen and comb from Surockkha.

4.7.2 Adolescent girls

Fifty percent of the girls are aware of Surockkha. According to them, Surockkha advises on awareness and prevention of AIDS and about 90% of girls who are aware of Surockkha had met with Surockkha activists. Among those who are aware of Surockkha, 60% have seen Surockkha distributing key ring, sticker, poster, pen and fan.

5 Quantitative Findings: Non-CSW

5.1 Respondent Profile

5.1.1 Age

Majority of boy students is of 16-17 years of age (47%) while majority of labors is of 18-19 years of age (39.6%). Majority among garments and transport workers are 18-19 years of age, 60.7% and 50.7% respectively.

Majority of girl students, labors, and garments workers are 14-15 years of age, 57.1%, 43.8% and 37.6% respectively. Second major sub-group of girl students is from 16-17 years of age (26.3%) while that of labor and garments workers are from 18-19 years of age, 25% and 31.2% respectively.

5.1.2 Guardian

Father is the guardian of the respondent in 69.1% of all respondents. Respondents guardians of whom is father is 89%, 63.6%, 55.9%, 66.1% respectively in case of student, labor, garments workers and transport workers. Eleven percent of all respondents have mother as their guardian and 6% of all respondents have brother as their guardian.

5.1.3 Occupation of guardian

Business and service are the top ranking occupations among guardians, 22.7% and 20.4% respectively. Eleven percent of the respondents' guardian's occupation is agriculture. Housewife, labor and rickshaw pulling are the occupation of respectively 9.4%, 8.7%, and 6.1% of the guardians of the respondents.

5.1.4 Education

Seventy-nine percent of labors had schooling while 69% and 76.5% of garments and transport workers had schooling. Among the labors, garments workers, and transport workers who had schooling, only 1.5%, 2%, and .3% respectively go to school at present. Last highest level of schooling that tops among labors, garments workers, and transport workers are between Class IV-V. The quantitative estimates of share of the respondents in this class are 35.1%, 41.3%, and 40.4% respectively for labor, garments workers and transport workers. Among respondents who had either no schooling or last highest schooling level is below Class V, 33.6% can read and write, 19.8% can not read and write, and 46.7% can sign only.

5.1.5 Income of respondents

Forty-seven percent of the respondents from labors, garments workers and transport workers have an average monthly income range between Taka 1,001-2,000. Twenty-three percent have income between Taka 2,001-3,000 and 21.2% have income below 1,00 Taka.

If income of respondents is analyzed separately for labor, garments and transport workers, it is seen that below 1,000 Taka is the income of second major group of labor and garments workers (25.5% and 31% respectively) while between Taka 2,001-3,000 is the income of second major group of transport workers (33.1%).

5.1.6 Household income

The top ranking income among households of students, labors, garments and transport workers are Taka 4,001-6,000 (23.5%), Taka 2,001-4,000 (39%), Taka 2,001-4,000 (52.8%) and Taka 2,001-4,000 (40%) respectively. 19.8% of the students' household income is above 12,000 Taka. It is surprising to note that 5.2% and 4.5% of labor and transport workers' household income is also above 12,000 Taka.

5.2 Attitude toward Reproductive Issues

5.2.1 Awareness

All of the respondents are aware of reproductive issues regardless of whether they discuss it with their guardians or not. Only 2.7% of overall audience reported that they have discussed reproductive issues with their father while 19.6% reported that they have discussed with their mother.

5.2.2 Sensitivity towards discussion of reproductive issues

Major reasons for not discussing reproductive issues with guardians is shyness, as 77.1% for not discussing with father and 78.8% for not discussing with mother. A good size of respondents, 10.2% of those who do not discuss with father and 13.8% of those who do not discuss with mother, feel comfortable with friends/contemporaries for discussion on this issue.

Eight-seven (86.9%) of the boys prefer boy friend for discussion while 52.8% of the girls prefer girl-friend for discussion. Thirty-five (35.4%) percent and 33.6% of the girls prefer mother and sister respectively for discussion. Eight percent (7.7%) of the boys and 17% of the girls prefer sister-in-law (wife of elder brother) for discussion. It should also be observed that in the case of girl labors, 75% prefer mother for discussion while in the case of girl student and garments workers, 37.1% and 30.7% prefer mother for discussion respectively. In the latter two groups, they prefer girl friend most for discussion (58% and 49.5% respectively).

5.3 Family Planning Awareness

5.3.1 Marital status

Ninety-one (91.2%) percent of the respondents are unmarried. Seven percent (7.2%) of the respondent are married while 1% and 0.4% are divorced and separated respectively.

5.3.2 Occupation of spouse

In 51.8% cases, the occupation of respondents' spouse is housewife and in 25% cases, the occupation is service.

5.3.3 Last schooling level of spouse

Last schooling levels of spouse of respondents in descending order are Class III-V (29.5%), Class V-VIII (27.7%) and Class I-III (24.1%). Eight percent of the respondents' spouse has completed S.S.C. while 5.4% have completed Class IX-X.

5.3.4 Number of children of married respondents

Thirty percent of the married respondents have children.

5.3.5 FP practice by married respondents

Sixty-three (63.4%) of the married respondents do not practice any FP method while 6.3% and 26.8% use condom and pill respectively. It was found that condom usage rate by spouse is highest among the students (50%).

Condoms that are used by them include Raja (57.1%) and Panther (42.9%) respectively and Pills include Maya (13.3%), Femicon (46.7%), Nordette-28 (6.7%), and Sukhi (33.3%).

5.4 KAP on Puberty

5.4.1 Recognition of puberty of boys

Twenty-six (25.5%) from the boy respondents told that boys recognize their puberty at the age of 14-15 years while 14.1% and 11% termed age between 12-13 years and 16-17 years as the age of puberty respectively.

Fifty percent of the boys told that they became aware of their puberty when they started feeling attracted toward girls and had experienced nocturnal pollution. Forty-two (41.6%) told that other physiological changes also made them aware of their puberty.

Sixteen (15.5%) from the girl audience told that they recognize boys reaching puberty at the age of 14-15 years, Fifty-six (55.7%) termed growth of beard and mustache as indicator of boys' puberty while 39.3% termed change in height and weight as indicator.

5.4.2 Recognition of puberty of girls

Thirty percent (29.5%) of the boys have told that they think a girl reaching puberty at the age of 12-13 years. Thirteen (13.1%) termed 14-15 years as the age of puberty for girls.

Sixty-one percent (60.8%) of the boys termed growth of breast as the indicator of puberty of girls while 36.2% termed change in height and weight of body as indicator. Forty-five (45.3%) of the boys identify puberty of girls by their behavior.

Twenty-five percent (24.7%) of the girl respondents termed 12-13 years as the age of reaching puberty. Ninety-three (93.2%) observed menstruation as the major indicator of puberty while 49.1% refer to growth of breast. Twenty percent (20.3%) identified puberty of girls by their behavior.

5.4.3 Perception of boys regarding nocturnal pollution

Forty-six percent (45.5%) of the boys think that nocturnal pollution occurs when they mate with girls in their dreams. Nineteen percent (19.3%) and 12.3% termed bad thoughts about girls as the cause of nocturnal pollution. Seventeen percent (17.3%) explained it as ejaculation while asleep.

The reaction among the boys over experience of nocturnal pollution is mixed. Twenty-six (26.3%) liked it while 19.4% disliked it. Twenty-one percent (20.7%) hated the experience and 10.7% got afraid.

Most of them, 35.8%, talked about it with their friends. However, 20.7% did nothing and 11.7% took shower in the morning.

Seventy-two percent (72.5%) think that nocturnal pollution weakens body while 29.7% think it as harmful for body. Only 7.7% think it as a natural and harmless process.

5.4.4 Perception of boys regarding masturbation

Sixty-three percent (62.7%) think that masturbation weakens body and 30.1% think that it causes loss of health. Twenty one percent think that masturbation could lead to diminishing sexual powers. However, 17.7% of the respondents told that they do not know what masturbation is.

5.4.5 Perception of girls regarding menstruation

Thirty-seven percent (36.7%) of the girls had experienced menstruation at the age of 13 years and 36% had experienced it at the age of 12 years. Twelve- percent (11.8) reported that they have experienced it at the age of 14 years.

Sixty-one (61.1%) of the girls became scared at the first instance of menstruation. Other reactions were mixed. Thirty-five percent (34.7%) of the girls did not know about menstruation before experiencing it.

Fifty percent (49.7%) of the girls became aware of menstruation from their friend and 30.2% from their sister. Only 16.4% of the girls knew about it from their mother and 12.6% from their sister-in-law. However, it should be noted that in the case of labors, 75% knew about menstruation from TV.

5.5 Perceptions about Pregnancy

5.5.1 *Beginning age of pregnancy*

Forty-three (42.8%) of the boys could not tell the age at which a girl begins to become pregnant. Thirteen percent (13.2%) of the boys termed 18 years of age as the beginning age of pregnancy while 9.7% termed 14 years as the beginning age.

Fifty-seven percent (57.2%) of the girls could not tell the beginning age of pregnancy. Twelve percent (12.2%) termed 18 years as the beginning age while 7.2% and 6.8% termed 15 years and 14 years as the beginning age respectively.

Apart from age, 79.8% of the boys think girls can become pregnant through intercourse. However, 66.3% of the boys think that girls can become pregnant after marriage while 24.2% think that a girl is able to become pregnant after menstruation.

Seventy percent (69.7%) of the girls think that a girl can become pregnant after marriage. However, 34.3% think that a girl can become pregnant through intercourse and 38.2% told that after menstruation a girl gains the ability to become pregnant.

5.5.2 *When can a boy make a girl pregnant*

Thirty-nine percent (39.4%) of the boys could not tell the age at which a boy can make a girl pregnant. However, 10.9% told that after 18 years of age it becomes possible for boys. Nonetheless, 71.7% know that boys can make a girl pregnant through intercourse. Fifty-eight percent (57.5%) think a boy can do it just by marrying and 22.6% think being adult as the beginning.

Sixty-two percent (62.2%) of the girls could not tell the age a boy could make a girl pregnant. Like the boys, 10.5% of the girls think that a boy can do it after 18 years of age.

Fifty-five percent of the girls told that a boy can make a girl pregnant after marriage and 30.6% told that the boys could do it through intercourse.

5.6 Awareness of Sexual Behavior

5.6.1 Perception about knowledge required for safe intercourse

Fifty-seven percent (57.1%) told that condom should be used during intercourse as safety measure. Seventeen percent (17.2%) suggested use of condom for having intercourse with other than spouse and 12.4% asserted on knowing whether the partner has STD. Thirty-two (31.9%) could not tell anything in response to this question.

Forty-seven percent (47.2%) of the girls do not know what should be known for safe intercourse. Twenty-four (23.6%) name use of condom as safety measure while 11.6% suggested use of condom only for having sex with other than spouse. Ten percent (10.3%) asserted on knowledge on transmission of AIDS for safe intercourse.

5.6.2 Sexual harassment

Thirty-six percent (35.8%) of the boys told that adolescents are sexually harassed by *mastans / spoiled boys*. Thirty-eight percent (38.3%) could not answer this question.

Seventy-four percent (74.2%) of the girls also think that adolescents are sexually harassed by *mastans / spoiled boys / drunkards*. Seven percent (7.4%) identified lover as the oppressor while 7.2% identified neighbor as the one. In the case of girls, only 9.2% girls failed to answer this question.

5.6.3 Partner in first intercourse

Sixty-three percent (63.3%) of the boys told that first intercourse takes place between husband and wife and 62.2% told that it takes place between lovers. Thirty-three percent (33.2%) think that this occurs with someone known and 31.5% think cousins as the first partners. Thirty percent (29.8%) think that it occurs between friends and 18.6% think first partner could be brother in-law (husband of elder sister).

Eighty-seven percent (87.1%) of the girls believe that husband and wife are the mutual first partners of intercourse. Forty-two percent (41.9%) think that first intercourse takes place between lovers and 16.6% think it to be between friends. Eleven percent (11.4%) thinks that first intercourse takes place with someone known.

5.6.4 Awareness of unmarried persons having sex

Sixty one percent (60.5%) of the boys do not know whether any unmarried person has sex. However, 36.4% knows unmarried male and 2.6% knows unmarried female who have sex.

Seventy-eight percent (77.7%) of the girls are unaware of sexual experience of unmarried persons while 10.7% think that unmarried persons do not have sex. However, 4.4% knows unmarried male and 7.2% knows unmarried females who have sex.

Average number of unmarried male having sex known to boys is 3.9 and that of unmarried female is 3.1.

Average number of unmarried male having sex known to girls is 3.5 and that of unmarried female is 2.2.

5.6.5 Awareness of married persons having sex with other than spouse

Seventy-six percent (75.5%) of the boys do not know whether any married person has sex with other than spouse. However, 19.3% knows married male and 4.6% knows married female who have sex with other than spouse.

Seventy-seven percent (76.6%) of the girls are unaware of illicit sexual experience of married persons while 10.9% think that married persons do not have illicit sex. However, 5.9% knows married male and 6.6% knows married females who have illicit sex.

Average number of married male having illicit sex known to boys is 3.7 and that of unmarried female is 3.3.

Average number of married male having illicit sex known to girls is 2.6 and that of unmarried female is 2.0.

5.7 Awareness of STD

5.7.1 General awareness of STD

Eighty-three percent of the boys are aware of at least one STD while 86% of the girls is aware of at least one STD.

5.7.2 Perceptions about symptoms of AIDS

Fifty-eight percent (57.6%) of the boys who are aware of AIDS are unaware of symptoms of AIDS. Twenty-three percent (22.7%) mention loss of weight while 12.7% mentioned weakness as symptoms.

Forty-six percent (46.2%) of the girls do not know about symptoms of AIDS. However, 19.7% term's loss of weight, 15.9% terms weakness, and 10% terms fever as symptoms of AIDS.

5.7.3 Perceptions about symptoms of syphilis

Twenty-two percent (21.6%) of the boys who are aware of Syphilis are unaware of symptoms of Syphilis. Forty-six percent (45.5%) mention infection of genital organs while 35.1% mentioned secretion of pus from genital organs.

Sixty-seven percent (66.7%) of the girls do not know about symptoms of Syphilis.

5.7.4 Perceptions about symptoms of Gonorrhea

Forty-two percent (41.6%) of the boys who are aware of Gonorrhea are unaware of symptoms of Gonorrhea. Twenty-seven percent (26.7%) mention pus from genital organs while 14.9% mentioned infection of genital organs as symptoms.

Sixty-seven percent (66.7%) of the girls do not know about symptoms of Gonorrhea. However, 16.7% term's infection of genital organs and another 16.7% termed pus from genital organs as symptoms of Gonorrhea.

5.7.5 Knowledge on transmission of STD

Sixty-six percent (65.5%) of the boys believe that having intercourse with sex workers is likely to transmit STD. Fifty-six percent (56.1%) think that STD can be transmitted if condom is not used during intercourse while 20.4% told that STD can be transmitted through having sex with someone with STD.

Forty-one percent (41.2%) of the girls believe that having intercourse with someone with STD is likely to transmit STD. Thirty-five percent (35.3%) think that STD can be transmitted if condom is not used during intercourse while 35.3% replies indicated that STD can be transmitted through having sex without condom.

5.7.6 Knowledge on treatment of STD

Ninety-two percent (91.8%) of the boys think that doctor should be consulted for treatment while 10.4% think health worker should be consulted. Eighty-one percent (80.7%) of the girls suggest doctor should be consulted while 10.7% prefer health workers.

5.7.7 Knowledge on prevention of STD

Sixty-seven percent (66.6%) of the boys suggest use of condoms for prevention of STD while 47.8% prefer to avoid intercourse with sex workers in order to prevent STD. Avoiding intercourse with other than spouse for prevention of STD gained support from 22.1% of the boys.

Forty-seven percent (47.1%) of the girls suggest use of condoms for prevention of STD while 23.5% prefer to avoid intercourse with affected ones in order to prevent STD. Avoiding intercourse with other than spouse for prevention of STD gained support from 47.1% of the girls.

5.8 Awareness of AIDS

5.8.1 General awareness of AIDS

Ninety-five percent (95.3%) of the boys are aware of AIDS while 97.4% of the girls are aware. Ninety-nine percent of the boys (99.2%) and girls (99.1%) identified AIDS as a disease. Eighty-six percent boys know that consequence of AIDS is death while 87.9% of the girls are aware of this consequence.

5.8.2 Knowledge on transmission of AIDS

Intercourse with sex worker, not using condom during intercourse, using syringe/needle used by AIDS patient, and taking blood from AIDS patient were identified as means of AIDS transmission by 46.9%, 44.6%, 45.7% and 40.2% of the boys respectively.

Intercourse with AIDS patient, using syringe/needles used by AIDS patient, and taking blood from AIDS patient were identified as means of transmission of AIDS by 42.8%, 60.8%, and 47.1% of the girls.

5.8.3 Knowledge on prevention of AIDS

Sixty-six percent (65.6%) of the boys consider using condom during intercourse as a measure for prevention of AIDS. Not having sex with sex worker, not using syringe/needles used by AIDS patient, and examining blood before taking were identified as prevention of AIDS by 40.8%, 43.8%, and 40.2% of the boys respectively.

Fifty-eight percent (58.1%) of the girls consider not using syringe/needle used by AIDS patient as a measure for prevention of AIDS. Other measures included not having intercourse with AIDS patient (28.7%), using condom during intercourse (28.9%), not having oral sex (34.5%) and having only one sex partner (44.4%), according to the girls.

5.8.4 Source of and attitude toward knowledge on AIDS

Eighty-one percent (80.9%) of the boys gathered knowledge on AIDS from TV while 84.3% of the girls had TV as their source of knowledge.

Seventy-two percent (72.3%) of the boys think that they benefit from knowledge on AIDS while 46.9% of the girls think so.

Boys told that they have come to know about prevention of AIDS and that is how they were benefited. Opinions of the girls were also the same. Message that gained highest attention from the boys is avoiding intercourse (37.8%) and girls' attention was drawn to taking blood from known ones only (21.7%).

Ninety-three percent (92.6%) of the boys told they want to know more on AIDS while 81% of the girls expressed the same interest. Cause and spread of AIDS is the most wanted area for both boys and girls for new knowledge.

5.8.5 Attitude toward AIDS patient

Seventy-nine (78.8%) of the boys would ask the patient to take doctor's advice while 58.1% of the girls would do the same. Twenty-six (26.4%) of the boys and 29.8% of the girls affirmed that they would help and not hate the patient.

5.9 Awareness of Condom

5.9.1 Awareness of condom

Eighty-nine percent (89.4%) of the boys have seen condom while 44.5% of the girls had seen it. Twenty-three (22.5%) of the boys have bought condom while 8.3% of the girls bought condoms and these groups included students, labors and garments workers. Only 2.2% of the boys reported facing difficulty in buying condom while none of the girls reported difficulties in purchasing condom.

Fifty-nine percent (58.5%) of the boys mention prevention of HIV/AIDS as the use of condom while 40.2% mention birth control as the reason. Forty-nine percent (48.5%) of the girls mention prevention of HIV/AIDS as the use of condom while 41.9% mention birth control as the use.

5.9.2 Awareness on use of condom

Thirty-six percent (35.5%) of the boys told that they know how to use condoms while 11.4% of the girls told that they know. Fifty-eight (57.5%) of the boys knew about how to use from friends while 44.7% of the girls learnt from their husband.

About 93% of the boys could tell the right way to use condom while 81% of the girls could answer correctly.

5.10 Awareness of Surockkha

Thirty-seven percent (36.5%) of the boys are aware of Surockkha while 36.2% of the girls are aware. Among the boys who are aware of Surockkha, percentage of school students (55.7%) are more than others and among the girls, percentage of labors (56.3%) are more than others.

Thirty-two percent (32.2%) of the boys and 32.5% of the girls could not tell what Surockkha does.

Thirty-seven percent (37.1%) of the boys and 36.1% of the girls have talked to activists of Surockkha. Fifty-five percent (55.3%) of the boys got advice on STD and use of condom from Surockkha activist while 38.3% of the girls knew about STD and 51.7% got advice on AIDS from Surockkha activists.

Ninety percent of the boys have seen items of Surockkha while 90% of the girls have seen the items. Top ranking items seen by the boys include comb (63.7%), pen (40%), calendar (38.3%) and poster (32.6%). Top ranking items seen by the girls are poster (41.7%), booklet (46%), comb (38.3%), and mirror (30%).

6 Qualitative and Quantitative Findings: CSW

In this section, the reader is requested to note that findings of MSM and Hizra are based on qualitative survey and that of adolescent girls (commercial sex workers) are based on quantitative survey.

6.1 Respondent Profile

6.1.1 Girl sex workers

Sixty-one percent of the girls were of age between 18-19 years while 21% were of age between 16-17 years. Another 13% were from the age group 14-15 years. Only 1% was between 12-13 years and 4% were above 19 years of age.

Only 28% of the girls had schooling and 72% of them had their last schooling between Class I-V. Fifteen percent had their last schooling between Class VI-VIII and 11% studied upto Class IX. Two percent girls had received non-formal education only. Out of 53 girls who had schooling, only 4% still continue to go to school. It was revealed that main reason for non-schooling was financial insolvency (64% of those who either never had schooling or do not go to school at present).

However, only 10% of the girls who never had schooling or had studied below Class V can read and write, 60% can not read and write and 30% can only sign.

Fourteen percent of the girl sex workers live with father, mother, brother or sister of their family and 15% live with their husbands. The remaining 71% live mainly with non-relatives who run the sex business where they work. It should be noted that those who live with other than their family, 45% of them left family only to earn money.

6.1.2 MSM & Hizra

Among the MSM & Hizra, 4 were aged 16 years (including 2 Hizras), 2 were 15 years old, and the rest were 14 and 18 years old respectively.

One Hizra never had schooling. Among the MSMs, all of them still go to school and 5 of them are studying in class VIII and 1 of them in Class IX. The other Hizra who stopped going to school had his last schooling upto class IV.

All of the MSM and Hizra who were interviewed live with their father.

6.2 KAP toward Puberty

6.2.1 Girl sex workers

Girl sex workers identified the followings as indicators of beginning of puberty of boys:

-	12 years/15 years	16%
-	16 years/20 years	20%
-	Growth of beard/mustache	31%
-	Attraction towards females	17%
-	Increase in weight & height	15%
-	Change in behavior	14%
-	Ability to mate	11%
-	Nocturnal pollution	10%

Twenty-four percent do not know surely as what could be the indicator of beginning of puberty of boys.

And the following characteristics were identified by them as indicators of beginning of puberty of girls:

-	10 years/12 years	32%
-	13 years/14 years	11%
-	Menstruation	83%
-	Growth of breast	45%
-	Age of marriage	8%
-	Behavior	8%

Nine percent of the girl sex workers were not sure what could be the indicator of beginning of puberty of girls.

Replying to another question, 75% girl stated that they had their first experience of menstruation within 13 years of age. Ten percent had their first experience within 14-16 years of age while 15% could not recall their first experience. Almost all of them either got afraid or felt bad during their first experience. Thirty-six percent shared their experience with their mother while 48% told it to other relatives. Only 16% were aware of it before first experience. Among those who were aware beforehand 33% knew it from their friends, 20% each from *bhabhi* and other relative, 17% from sister and 13% from mother. Many of these knew it from multiple sources.

Regarding ability to reproduce, 54% could not tell the beginning age of pregnancy of girls while 33%, 27% and 21% percent mentioned about mating, menstruation, and getting married as enabling to become pregnant. Sixty-three percent of the girls could not tell the beginning age at which boys can make a girl pregnant although 51% mentioned that boys can do so through mating.

6.2.2 MSM & Hizra

MSMs identified the followings as indicators of beginning of puberty of boys:

-	16 years	1 out of 6 (the rest could not tell age)
-	Growth of beard/mustache	1 out of 6
-	Can understand everything	2 out of 6
-	Attraction towards girls	1 out of 6
-	Could not tell	2 out of 6

And the following characteristics were identified by them as indicators of beginning of puberty of girls:

-	18 years	1 out of 6 (the rest could not tell age)
-	Growth of breast	3 out of 6
-	Age of marriage	1 out of 6
-	Could not tell	2 out of 6

According to one Hizra age of beginning of puberty of girls is 12 and according to other it is 16. Other indicators identified by them include growth of breast, menstruation, attraction towards boys and change of behavior. Replying to another question, they identified the age of beginning of puberty of boys as 16 and 12 years respectively. Other indicators identified by them include nocturnal pollution and growth of beard.

Only 1 out of 6 MSM knew about nocturnal pollution before first experience from neighboring senior boy. All of them felt normal during their first experience and some of them did nothing and few shared with their friends.

6.3 Awareness of Sexual Behavior

6.3.1 Girl sex worker

Seventy-two percent girl sex workers identified using condom as means to safe sex. Thirteen percent recommended condom for having sex with other than wife and 14% could not tell anything.

6.3.2 MSM & Hizra

All MSM think that using condom is the safest means to sex. The Hizras too think alike.

6.4 Awareness of STD and AIDS

6.4.1 Girl adolescent workers

Ninety-six percent of the girl sex workers know name and symptoms of at least 1 STD. However, although 86% of the girls are aware of HIV/AIDS only 43% could mention at least one symptoms. Symptoms mentioned by them include becoming thinner, weakening of body, feeling feverish, itches in genital organs, blood infection, black spot under eyes, anemia, distaste for food, infection in mouth etc. Compared to awareness of AIDS, only 51% and 27% know name of Syphilis and Gonorrhea respectively.

Reasons for STD as mentioned by them include not using condom during intercourse (40%), mating with infected ones (24%), injection through infected syringe/needles, mating indiscriminately, and unhygienic practices. Surprisingly, only 8% of the girl sex workers mentioned that they had suffered from venereal diseases.

Regarding HIV/AIDS, 86% knows that consequence of HIV/AIDS is death. Fifty-nine percent think that not using condom during intercourse is the major reason for spread of HIV/AIDS. Thirty-eight percent think that mating with infected ones and using infected needles/syringe are other ways through which AIDS spread. Some misconception prevailed among the interviewees as they mentioned living with infected ones (1%), shaking hands with infected ones (9%) are also means of transmission of AIDS.

Fifty-four percent of the girl sex workers came to know about AIDS from Surockkha while 39% from TV and 12% from NGO workers. Seventy-three percent of those who know about AIDS think they were benefited with knowledge on AIDS as they now take precautions mainly, using condom during intercourse (72%).

Seventy-three percent think that they are not risk-prone to AIDS as they use condom during intercourse and refrain from activities that cause AIDS. Seventy percent wants to know more about AIDS and their needs are mainly how AIDS is spread (33%), how AIDS can be cured (33%), detail about AIDS (32%), etc. Fifty-eight percent of those who do not know about AIDS think that they already know enough about AIDS. Thirty-five percent just do not have interest to know.

6.4.2 MSM & Hizra

5 out of 6 MSM know name of HIV/AIDS, Syphilis and Gonorrhea. The remaining one knows name of HIV/AIDS only. The Hizras know name of HIV/AIDS only. Their responses regarding symptoms of HIV/AIDS include reddening of testicles, tonsil like development in throat, fever, and cough.

Reasons for STD identified by MSM and Hizra include mating with infected persons and mating indiscriminately. Not using condom was identified them as the major reason for both STD and AIDS.

All of them know that consequence of AIDS is death and main source of their knowledge is Surockkha workers. They think they take precautions now mainly because of their knowledge and want to know more about the disease.

6.5 Awareness of Surockkha

6.5.1 Girl sex worker

Sixty-three percent know about Surockkha and 32% and 29% of them mentioned that Surockkha advise on venereal disease and use of condom respectively. Among those who know about Surockkha, 87% had talked to Surockkha workers and during interaction 70% of them were told about use of condom. Forty-two percent and 21% could recall advice on venereal disease and AIDS respectively. Ninety-four percent had seen items of Surockkha and items seen by them include comb (88%), calendar (45%), key ring (38%), poster (36%), etc. Eighty-seven percent confirm receipt of comb from Surockkha while 41% and 36% received calendar and key ring respectively.

6.5.2 MSM & Hizra

All the MSM and Hizra from Khulna and Rangpur know about Surockkha. Activities of Surockkha known to them include advice on venereal disease, use of condom and HIV/AIDS. All MSM and one Hizra had talked to Surockkha workers and received advice on venereal disease, AIDS and use of condom. The Hizras did not either see or receive any items of Surockkha while all the MSMs had seen items of Surockkha. Items seen and received by MSM include booklet, pen, comb, hand-made fan, key ring, ludu, poster, etc.