

Executive Summary

STD and HIV/AIDS Behavioral Surveillance Survey (BSS)

In Bali (Denpasar, Sanur and Kuta), Kupang

and Ujung Pandang, 1998¹

Abstract

Objective: To present selected baseline measures of STD and HIV/AIDS risk behavior survey among selected groups of population in three seaport cities in Eastern Indonesia: Kupang (East Nusa Tenggara), Bali (Denpasar, Kuta and Sanur), and Ujung Pandang (South Sulawesi).

Methodology: The survey was conducted between March-August 1998. Respondents included 693 CSWs, 600 sailors, 602 interstate truckers, 600 urban public transport drivers, 250 direct clients of commercial sex workers (CSWs), 170 men having sex with men (MSM), and 180 transvestites. A cross-sectional study design with a structured questionnaire was used to collect data on sexual behavior related to STD/HIV risk at the sampling sites.

Results: Among all the surveyed population, knowledge of at least two means of HIV/AIDS prevention was relatively high, but there were still misconceptions regarding the means of transmission and prevention. On average, the reported number of clients served by CSW and transvestites ranged between 2-3 per day. The reported condom use in the last sex was 53% among CSWs, 26% among males, 28% among MSM and 44% among transvestites. The percentage of 'always' using condoms among male respondents who had sexual contact with CSW in the past year was 10%. Knowledge among respondents about STDs and their symptoms was low. From the respondents who reported ever having STD symptoms in the past year, a high proportion of CSWs (75%) sought medical treatment, compared to males (51-60%), MSM (50%) and the transvestites (28%). The percentage of respondents seeking self-treatment was quite substantial but varied among groups: CSWs (30%), males (62-69%), MSM (45%) and transvestites (93%).

Conclusions: Mass education, better and wider access to condoms and health care services, are still necessary. Perceptions of risk among various groups must be raised. There should be specific interventions directed to clients of CSWs. Intervention efforts should be sensitive to the needs of the target groups and should attempt to remove negative social-idioms related to STDs and HIV/AIDS, stigmatization, and discrimination against those infected people. More in-depth qualitative studies and regular sentinel surveillance among different groups of population should be conducted. Future programs need to take into account the impact of the economic crisis on the sex industry. Encourage reproductive health education programs at an early age. Strengthen existing channels of information dissemination such as social services/NGOs.

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1. Background and methodology

The behavioral surveillance survey (BSS) was designed with the objective to provide baseline indicators for repeated measures of STD-risk behavior among selected groups considered to be at high risk of STD/HIV infections. These behavioral measurements serve various purposes, including: to target and evaluate prevention programs, to identify high risk behaviors in need of change, to provide indicators of success and identifying persistent problem areas, to serve as an advocacy and policy tool, and to assist in directing limited resources.

The survey employed a cross-sectional survey design with a structured questionnaire which addressed three major issues: (a) knowledge of HIV/AIDS and means of its prevention, (b) sexual behavior and condom use, and (c) health seeking behavior for STDs. Some indicators were selected for monitoring the program's purposes that were later used as indicators of achievement (see Appendix). The BSS was conducted in the areas of Denpasar, Kuta, and Sanur in Bali, Ujung Pandang in South Sulawesi, and Kupang in East Nusa Tenggara (NTT). These three areas have been considered as the major entry ports or tourist spots in the eastern regions of the country. In addition, these areas also have cosmopolitan and urban characteristics with very active sex industries, although in much smaller scale compared to Jakarta or Surabaya. In addition, all the three areas have reported incidences of HIV cases.

The sample size for each target group was determined by the estimated proportion of those who used condom in their last sexual contact (for female CSWs), the estimated proportion of those who ever had sex with CSWs in the past year (for male population). Using such parameters, a sample size of 100 to 200 respondents was determined for each target group for each city. Due to the difficulties in interviewing the direct male clients of female CSWs and men having sex with men (MSM), a sample size of 50 individuals were predetermined in these groups. Thus, the total number of respondents interviewed was 693 CSWs, 600 sailors, 602 interstate truckers, 600 urban public transport drivers, 250 direct clients of commercial sex workers (CSWs), 170 MSM and 180 transvestites.

2. Demographic characteristics

The study collected selected socio demographic characteristics of respondents, such as age, education, occupation and marital status, which were essential variables for disaggregating the study population, as well as providing a basis to compare between the different sampling groups in the three sites surveyed.

2.1 Female Commercial Sex Workers

Most of the female commercial sex workers surveyed were aged between 20-29 years old. Half of the CSW respondents were in this age group, except for respondents in Kupang. More than a quarter of the CSWs completed primary school and about 11 percent completed senior high school. In the case of the CSWs, the mean length of working time, as a CSW was about 22 months, with shorter time in Bali (16 months) compared to Kupang (28 months). Among CSWs in all three sites, most were divorced (62 percent) and some never married (26 percent). Most CSWs reported to have either one child or none; but this varied by

location. There were more CSWs who reported taking care of their own child in Kupang and Ujung Pandang compared to CSWs in Bali. As a single parent, the CSWs will have increased economic burden as a result of child-care and demand more quality-time from her.

2.2 Male respondents

Most male respondents (sailors, public transport drivers and direct clients) were in the 20-29 years age group. Truckers tended to be older compared to the other male groups. In terms of educational background, most sailors, public transport drivers and direct clients, had finished senior high school, with the exception for the truckers. Among the male respondents, the majority of direct clients of CSWs (71 percent) and sailors (61 percent) were unmarried. In contrast, most truckers and drivers reported to be married (67 and 61 percent respectively). In general, marital status was relatively homogenous among the male respondents in all three sites surveyed.

2.3 MSM respondents

Three-quarters of the MSM surveyed in Denpasar and Ujung Pandang were in the 20-29 age group. The majority of the MSM in both sites finished senior high school. When asked about their occupation, almost half of all MSM reported to be either employed or self-employed, 17 percent were unemployed and about 14 percent were students. MSM who reported to be sex workers were from Ujung Pandang (6 per cent).

2.4 Transvestites

About 60 percent of the transvestites surveyed in Denpasar and Ujung Pandang were in the 20-29 age group. Their educational background varied by site, more transvestites in Ujung Pandang had finished senior high school compared to their counterparts in Denpasar. Results show that most of the transvestites were either self-employed or worked in beauty salons. However, more than 70 per cent of the transvestites reported to offer commercial sex services, although there was a higher proportion in Denpasar (96 percent) compared to Ujung Pandang (60 percent). Among transvestites who reported to have offered commercial sex services, the mean length of time they provided these services was 54 months. About a third of all transvestites reported to have ever provided commercial sex in other sites during the past year (23 percent), twice as many respondents did in Denpasar (33 percent) compared to Ujung Pandang (14 percent). The results show that transvestites in Ujung Pandang preferred to move to Jakarta, while respondents in Denpasar preferred to move to Surabaya. Otherwise they preferred to move to other sites within the same city.

3. Knowledge of HIV/AIDS

People's sexual behavior is affected by several external factors, such as their knowledge, beliefs, traditions, culture and social environment. The aim of the BSS was to assess respondents' knowledge regarding the nature of sexually transmitted diseases and proper means of HIV prevention (such as avoid sharing needles, faithful with one partner and always using condom when having sex). As well as obtain information about the respondent's sex-related knowledge, attitudes and

perceptions, in each particular group, and gain better understanding about the respondents' sexual behavior.

3.1 Female Commercial Sex Workers

The results indicated that most respondents reported having heard about HIV/AIDS. Despite this, only 33 percent of CSWs were aware that a person with HIV infection could look healthy. The results revealed that there was a high proportion of CSWs who had incorrect perceptions about the proper means of HIV prevention (ranging from 44 to 83 percent). Some believed that one could get HIV/AIDS just by exchanging clothes, eating together with or touching a person with HIV/AIDS. More than 80 percent of CSWs knew at least 2 out of 3 appropriate means of prevention, and the proportion was higher among those who worked on site for more than 1 year. There was variation between sites, with Kupang having a higher proportion of CSWs with incorrect perceptions compared to their counterparts in Bali or Ujung Pandang.

3.2 Male respondents

Upon observing the adult male group, for example, almost all truckers and direct clients (93 percent in both groups) reported having heard of HIV/AIDS, while among sailors and drivers it ranged from 86 to 89 percent. However, hearing about HIV/AIDS does not guarantee knowing about it, as was revealed by the data. Less than a third of all male respondents knew that an HIV infected person could look healthy and the percentage of males who still had incorrect perceptions regarding HIV prevention ranged from 66 to 81 percent. Few truckers and drivers knew that an HIV infected person could look healthy (19 and 24 percent respectively, and similar in all the three cities) and still among these two groups, they had the highest percentage of incorrect perceptions regarding the means of prevention.

3.3 MSM respondents

Among MSM, more than 80 per cent were able to reply correctly on two out of three appropriate ways of prevention mentioned above, and similar to the CSWs, those who worked on site more than a year tended to score better. Fewer MSM had incorrect perceptions on the means of HIV prevention (ranged from 16 to 49 percent) compared to the CSWs or male respondents in general. However, this figure greatly differed by site. Data revealed that MSM respondents in Denpasar tended to know more about the proper means of HIV prevention than their counterparts in Ujung Pandang.

3.4 Transvestites respondents

Most of the transvestites surveyed had heard of HIV/AIDS; however, only about 41 percent of respondents in Bali and 70 percent of respondents in Denpasar knew that a person infected with HIV/AIDS could look healthy. A significant proportion of respondents had incorrect perceptions on the means of HIV prevention (ranged from 14 to 58 percent). However, fewer respondents in Denpasar (ranged from 14 to 33 percent) had incorrect perceptions compared to their counterparts in Ujung Pandang (ranged from 37 to 78 percent). Thus, despite the high proportion of those who had ever heard about HIV/AIDS, there remains a significant number of respondents, especially among the CSWs and some male groups, who remain

ignorant of the disease and maintain incorrect perceptions regarding the means of HIV transmission and prevention.

4. Sources of information

The respondents were further probed for their sources of information, their exposure to information in the past month, and their social contacts in discussing HIV/AIDS-related issues, in order to examine the extent of and access to public information regarding HIV/AIDS.

Among CSWs, it was found that most respondents who reported ever hearing of HIV/AIDS did so from 'other sources' (49 percent) followed closely by the TV (48 percent) and newspaper (34 percent). In this context, 'other sources' include clinics, social services /NGOs and hospitals.

From the results, male respondents reported various sources of information, including TV, radio, newspaper, magazine, poster, brochure, and leaflet as sources of HIV/ AIDS information. Among all male respondents from all groups who reported ever heard about HIV/AIDS and who also reported their sources of information in the past month, 'TV' was their most common source of information (43-63 percent), followed by newspapers (27-49 percent) and magazines (16-39 percent), and radio (29-42 percent). More than a third of all male respondents also reported 'other sources' as their source of information on HIV/AIDS.

Similar reports were revealed from all MSM respondents and transvestites on their main source of HIV/AIDS information, but also included hospitals and mobile units /public transportation. The most common type of media used were posters, brochures and stickers. Thus, the still low level of basic knowledge regarding HIV/AIDS may still be improved with the involvement of the mass media, especially TV and newspapers, towards such efforts.

5. Knowledge of condom and their sources

Use of condom during sexual intercourse has been regarded as one of the more effective means for preventing STD/HIV transmission. Ideally, every adult in the population should recognize what a condom looks like, how to use it, and where to obtain it. In order to generate measures on the degree of respondent's knowledge of condom. All male respondents were shown a condom and asked whether or not they recognized it, and if they did they were further probed on where they could obtain condoms.

5.1 Female Commercial Sex Workers

Among the CSWs, the majority stated that the purpose of the condom was to avoid STDs (90 percent) followed by to avoid pregnancy (45 percent). They also mentioned places where they knew they could obtained the condoms such as the pharmacy or hospitals/ clinics. The CSWs in Bali mentioned more diverse places from where to obtain condoms compared to the CSWs Ujung Pandang.

5.2 Male respondents

Within the male population surveyed, the proportion of those who had ever heard of condoms was high among truckers (97 percent) but low among direct clients of

CSWs and drivers (93 and 90 percent respectively). Nevertheless, there was still a portion of adult males who had never heard of a condom (3-10 percent). From the majority of male respondents who had heard about condoms, between 65 to 79 percent mentioned that condoms were used to avoid STDs, followed by 57 to 75 percent who said that it was to avoid pregnancy. Among the male respondents, most of them reported that condoms could be obtained from government sources /NGOs, pharmacies (*apotik*) or drug stores (*toko obat*).

5.3 MSM and transvestites

Among the MSM and transvestites, almost all of them had ever heard of a condom and the majority agreed that the condom was used to avoid STDs. Most of the transvestites and MSM mentioned that the government/ NGOs and pharmacies were the places where they could obtain the condoms. Thus, knowledge of condoms and places from where to obtain was found to be similar among all the groups surveyed, however, there seemed to be more diversity of places from where to obtain the condoms among respondents in Bali compared to the other sites.

6. Early sex

Those who reported ever had sexual intercourse were asked about certain aspects of their first sexual intercourse experience, notably, the age at first sexual intercourse, their first sexual partner, and the place where their first sexual intercourse occurred. This information could indicate the degree of risk exposure towards contracting STDs i.e. the status of their partner and estimate the duration of their sexual activity. Perhaps with early sexual activity, there will be a greater likelihood of a longer duration to sexual activity including high-risk sexual behavior.

6.1 Female Commercial Sex Workers

Among CSWs, 68 percent initiated sexual activity when they were aged 15-19 years, and this was similar in all the sites. About 21% had sex prior to 15 years. The mean age at first sex was slightly higher among CSWs in Bali than in Ujung Pandang, and their first sexual partner was either their husband or boyfriend.

6.2 Male respondents

The data revealed that among all male respondents who were unmarried, more than 80 percent reported ever having sexual intercourse. Similar to the CSWs, most male respondents reported having had first sexual intercourse when they were 15-19 years old. Less than 10 percent had sex before age 15. Age at first sexual intercourse had no bearing on their marital status, but varied by group. In general, the direct clients had sex at an earlier age compared to the sailors or drivers, and their first partner was their girlfriend or CSW.

6.3 MSM respondents

Among MSM, data show that most respondents had their first sexual contact between 15 to 19 years (54 percent), and some had their first experience at 15 years or possibly below (31 percent). Most MSM reported having had oral sex at their first sexual contact, although other types of sexual contacts were also mentioned, such as vaginal and anal sex. About 40% mentioned their partners' or respondents'

home as place where they had their first sexual contact. Their first sexual partner was with their MSM friend.

6.4 Transvestites

The average age at first sexual contact among transvestites was 14-15 years, and for most, their first sexual partner was their boyfriend. Compared to all the groups surveyed, the transvestites had the highest proportion that had sex before aged 15 (43 percent). Among transvestites more respondents in Denpasar compared to Ujung Pandang had their first sexual experience between ages 15-19 years. Their first sexual partner was a non-gay partner, and at their first sexual experience, most of them had oral and anal sex. Thus, age of first sex varies among groups, although most had fist sex between 15-19 years. This indicates the need for reproductive health education at an early age.

7. High risk sex and condom use behavior

To determine the extent of their sexual activity and preventive measures, respondents were asked about the number of working days in the last week, the mean number of guests and condom use during the last week. The instruments were respondent specific. Thus the questionnaire for males focused more on the last sexual activity and rate of condom use during the past year. However, MSM and transvestites were asked about their sexual activities in the last three months.

7.1 Female Commercial Sex Workers

The results show that CSWs work every day. The mean number of clients served in the last week was 14 for all locations, and was more frequent in Bali (18) compared to Kupang (13) and Ujung Pandang (11). However, the percentage of clients using condoms in the past week was high among CSW respondents in Bali compared to Kupang and Ujung Pandang (66 percent, 50 percent and 34 percent respectively). According to most CSWs, the one who usually initiates condom use in sexual contacts during the past week was the CSW herself. The proportion is higher in Bali compared to the other two locations.

7.2 Male respondents

Among those adult males who reported ever having sex, their last sexual activity varied somewhat. Among sailors, the mean number of days having last sex was less than one month ago. While among truckers and drivers, particularly in Kupang and Denpasar, their last reported mean number of days having last sex was less than a fortnight ago. Yet, reported condom use in their last sexual activity varied between groups. Truckers and drivers were the least and ranged from 7 percent, followed by sailors (12 percent), and direct clients (20 percent). Reported condom use in their last sex with CSWs ranged from 14 percent among sailors to 26 percent among direct clients. In the past year, reported condom use in sexual contacts with CSW among direct clients ranged from a low of 4 per cent in Ujung Pandang, 10 per cent in Bali and 12 per cent in Kupang.

7.3 MSM respondents

Sexual behavior of MSM in the past 3 months was assessed to obtain a general picture of their patterns of sexual behavior, especially in regards to their primary

and secondary partner in the past 3 months (the primary partner does not necessarily mean their only partner). The results show that the mean number of sexual contacts in the past 3 months was 13 (median was 7-8 times). From these, the mean number of male sex partners was 4 and few of the respondents had female sex partners. A large proportion had MSM partners, although about a quarter had non-MSM boyfriends as sex partners in the last 3 months.

7.4 Transvestites

The results show that the mean number of sexual partners of transvestites reported in the last 3 months was very high in Denpasar. Although respondents in Denpasar were fewer compared to Ujung Pandang, the mean number of sexual partners in the last 3 months was much higher in Denpasar (mean of 261 partners), compared to Ujung Pandang (mean of 43 partners). However, despite the high number of sexual partners in Bali, there was a high percentage of reported condom use (mean of 45 percent) compared to the low percentage in Ujung Pandang (mean of 24 percent). Overall, the mean percentage of sexual partners using condoms in both locations was low (30 percent).

8. Reasons for not using condom in last sex

8.1 Female Commercial Sex Workers

Among CSWs, the most commonly reported reason for using condoms was to avoid STDs (88 percent) and avoid pregnancy (27 percent). CSWs in Kupang and Ujung Pandang mentioned that the main source of obtaining condoms was their workplace. However, most respondents in Bali mentioned government sources as places to obtain condoms. The most commonly reported reason for not using condoms was that the partner does not want to (64 percent) followed by reduced pleasure/ comfort (14 percent).

8.2 Male respondents

The most common reasons mentioned by the male respondents for not using condoms was reduced pleasure or comfort (particularly by 48 percent of direct clients). Other reasons included not used to using condom (particularly by 42 percent among sailors), or that their spouse was already using some sort of contraceptives (particularly among 3 percent truckers and 18 percent drivers). Another cited reason was that their partner was regarded as 'clean', while 'unprepared' or 'uneasy' in using condom were also mentioned by some (particularly by 15 percent sailors and 11 percent direct clients).

8.3 MSM respondents

Among MSM, the majority of respondents who used condoms did so to avoid STDs and most obtained the condoms from government sources (Depkes/ Dinsos) and NGOs/ health workers. Reasons stated by respondents for not using condoms was reduced pleasure /comfort (36 percent), respondents felt uneasy (34 percent) and partner did not want to (19 percent).

The mean number of days since having their last sexual contact was 5 days. For the majority of MSM respondents in Denpasar, their last sex partners were mostly male clients, but for respondents in Ujung Pandang, most were their boyfriends. The

most common type of contact was oral sex and anal sex. Condom use in last sexual contact reported by respondents in Denpasar was higher compared to Ujung Pandang. Almost 68 percent in Denpasar used condoms compared to 24 percent in Ujung Pandang. Also, the proportion of respondents using condoms in various types of sexual contacts was higher in Denpasar compared to Ujung Pandang.

8.4 Transvestites

Among transvestites who reported using condoms in their last sexual contact, their main reason was to avoid STDs. Most respondents said that their main source of condom was the Government services (Depkes/ Dinsos/ NGOs/ health worker). In addition, respondents in Denpasar also mentioned their client as source of condoms, where it was reported that almost 46 percent of clients requested the respondent to put on a condom but no client did in Ujung Pandang. Therefore, despite reported high level of high-risk sexual activities the levels of condom use remain low. Among those who provide sexual services, the negotiating power with clients as well as their own lack of perception of risk mitigate their risky behavior.

9. Sex with multiple partners and condom use

9.1 Female Commercial Sex Workers and their boyfriends

Among CSWs, data shows that about half (52 percent) of all respondents reported to have ever had a boyfriend, with a higher percentage reported in Bali compared to the other two locations. On average, the CSWs had 1 boyfriend (mean was 1, although the mean in Bali was 2). The respondents who reported using condoms in their last sexual contact with their boyfriend were around 24 percent.² From those who reported using a condom in their last sexual contact with their boyfriends, almost 89 percent reported having done so to avoid STDs, and about 41 percent did to avoid pregnancy. From those who reported not using a condom in their last sexual contact with their boyfriend, the majority (46 percent) said it reduces pleasure/ comfort and 41 percent said the partner does not want to. Half of all respondents said they accepted payment from their boyfriend, the highest percentage reported in Bali (60 percent) and the lowest in Ujung Pandang (37 percent).

9.2 Male respondents with CSWs and other women (non-CSWs)

The data show that among all adult male groups who reported ever having had sex, most respondents (61 to 79 per cent) reported ever had sex with prostitutes (CSWs). More sailors and truckers than drivers reported ever having had sex with CSWs. Those in Denpasar and Kupang seem more active compared to respondents in Ujung Pandang in this regard. Time-wise, however, except for direct clients, fewer numbers reported ever having had sex with CSWs in the past year (44 -63 per cent).

Among those male respondents who reported ever having had sex with CSWs in the past year, their reported mean number of contacts vary from 5 times (among sailors) to 10 times (among drivers), and up to 12 times in the past year among direct clients. The data show that high risk sexual behavior among adult males was also

² These figures are much higher compared to the results of a BSS survey conducted by USAID HIV/AIDS prevention program in 1996 and 1997, which found that condom use with CSW boyfriends ranged between 14-16 percent.

apparent by the mean number of CSWs these men have ever had sexual contact with. These may vary between mean of 7 prostitutes (among sailors) to about 9 prostitutes (among drivers), and up to 14 prostitutes among the more jaded direct clients. Their reported low levels of condom use further mitigated high-risk behavior. Yet, less than five percent of all male among the groups reported 'always use condom' with their CSW partners, while only 10 percent among direct clients reported 'always use condom' when having sex with CSWs.

The data show that among the direct clients of CSWs, more than half reported 'never use condom' when having sex with CSWs in the past year, while among other male groups who ever had sex with CSWs only about a third reported as such. The remainder either reported 'occasionally' use condom, and very few reported 'often' use condom when having sex with CSWs in the past year.

Among those adult males who reported ever had sex with women other than CSWs in the past year, their mean reported number of women was about two women. Most male respondents reported that the status of their first women other than CSWs were either their 'girl-friend' or 'acquaintance'. With these first women, the mean reported number of sexual contacts in the past year vary between 9 times (among sailors) to 15 times (among drivers). Yet reported condom use was very low, less than 1 percent.

9.3 MSM respondents

Among MSM, the mean number of sexual contacts with the primary MSM partner was 8 times. Yet, within these sexual contacts, condom use with the primary partner in the last 3 months was about 28 percent. The mean number of sexual contacts was lower with the second partner (with both the MSM and non-MSM), but the percentage of sexual contacts using condoms with the second non MSM boyfriend was higher compared to the first non MSM boyfriend. In general, the results reveal that the percentage of sexual contacts reportedly using condoms was always much higher among respondents in Denpasar compared to their counterparts in Ujung Pandang.

"My family knows that I am MSM...they also know that I have a boyfriend. I also have a girlfriend, we have been dating for almost 8 years. My family gives pressure to me not to have many boyfriends. When I have a new boyfriend and I took him to my house, my parents always say...you have changed your boyfriend again. I have anal intercourse with my boyfriend. He is still very young and has just started university. He is different, his family does not know yet that he is MSM...Among my MSM friends if they have STDs, then they would use traditional remedies first before going to a doctor, they would feel embarrassed if they have to go to a doctor" (Anton, male, MSM, single, Moslem, 27 years old, university student, NGO activist, Ujung Pandang, 1998).

9.4 Transvestites

While among transvestites, the mean number of days since having their last sexual contact for both locations was 5 days. For the majority of transvestites in Denpasar, their last sex partners were mostly male clients, but for respondents in Ujung Pandang, most were their boyfriends. The most common type of sexual contact was oral and anal sex. Condom use in their last sexual contact reported by

respondents in Denpasar was higher compared to Ujung Pandang; almost 68 percent in Denpasar used condoms compared to 24 percent in Ujung Pandang. Of those respondents who reported using condoms in their last sexual contact, their main reason was to avoid STDs. Most respondents said that their main source of condom was the Government services (Depkes/ Dinsos/ NGOs/ health worker). In addition, respondents in Denpasar also mentioned their client as source of condoms, where it was reported that almost 46 percent of clients requested the respondent to put on a condom but no client did in Ujung Pandang.

10. Places and costs for sexual services

10.1 The impact of the monetary crisis on the female CSW respondents

Most CSWs received payments for their last sexual contact. The mean amount received varied by location from Rp.44.800 in Kupang, to Rp.46.800 in Bali and Rp.52.300 in Ujung Pandang. Almost 60 per cent of respondents stated that the payment received since the monetary crisis was lower, and of those who stated they received less payment since the crisis were respondents from Kupang (78 percent) followed by Ujung Pandang (59 percent). However, 31 percent said that there was no change and 9 percent said they received higher payment. Those who responded that they received higher payment were mostly from Bali and Ujung Pandang.

The CSW were asked about the mean amount received before the monetary crisis. From the results, it showed that there was a decrease in the mean amount received for all locations. Prior to the economic crisis, the CSW received on average a mean Rp.989.900 per month for all locations. Payments received per location varied from Rp.918.300 in Ujung Pandang, Rp.999.800 in Kupang and Rp.1.072.000 in Bali. (Median varied from Rp.600.000 in Ujung Pandang, Rp.800.000 in Kupang and Rp.700.000 in Bali). However, when asked about the payments received last month (during the economic crisis), the CSW reported having received a lower amount; a mean amount of Rp.830.000 (median Rp.500.000) for all three locations. Kupang respondents reported receiving Rp.765.100, Rp.811.600 in Ujung Pandang and Rp.946.300 in Bali. (Median ranged from Rp.500.000 in both Kupang and Ujung Pandang to Rp.600.000 in Bali). Although we obtained a very rough estimate of the percentage of change in payments received during the economic crisis, we should be careful in interpreting these results, as the amounts reported are the perceived amount received by the CSW. It was found that there was a decrease in the mean percentage of payment received by the CSW of 18 percent for all 3 locations, following the monetary crisis. Data indicated that the CSW in Kupang were most affected by the economic crisis. The payments received by CSW in Ujung Pandang decreased by 19 percent, but in Kupang it decreased by 32 percent and in Bali, decreased by 9 percent.

The respondents were also asked if they perceived a change in the number of CSWs on site during the monetary crisis, about 48 percent said they experienced no change. Around 28 percent said there was a decrease in the number of CSWs on site, and 24 percent said they increased. A higher proportion of CSW (in all locations) who had worked on site longer than 12 months reported that there was an increase in the number of CSW on site during the monetary crisis. Thus it seems that one effect of the economic crisis was to increase the number of CSW on site.

10.2 Male respondents

In terms of places to obtain CSW services, the data shows that about half of all male respondents who reported ever had sex with CSWs, reported 'localization' sites as their primary source of obtaining CSW services. There were more sailors and drivers (61 and 54 percent respectively), particularly in Denpasar and Kupang, who obtained sex from localization sites. About a quarter of all males reported bars or pubs as places to get CSWs. This seems particularly true for those sailors and truckers in Ujung Pandang. Hotel and *Losmen* were cited by some, while street-girls were also cited by truckers and drivers, but less so by sailors. Among the direct clients themselves, about 77 per cent reportedly went directly to localizations while the remainder obtained their sexual services either from bars or pubs which abound near, or within, localization areas.

The data shows that it seems that is some correlation between the type of girls and their places of service with the amount of rupiah that have to be paid for sexual services. Among males who ever had sex with CSWs, sailors reportedly paid a mean of Rp. 72,000, with those in Denpasar and Kupang having to pay more than in Ujung Pandang (paid rates varying from mean of Rp 64,000 to Rp. 72,000). This figure was much higher than the mean paid by truckers (mean Rp. 31,000). Those truckers in Ujung Pandang and Denpasar have to pay more than truckers in Kupang (paid rates varying from mean of Rp 18,000 to Rp. 48,000). While among drivers their mean paid CSW services was about Rp. 47,000. Drivers in Denpasar and Ujung Pandang had to pay the most expensive service (mean Rp. 66,000 and Rp. 113,000 respectively) compared to their counterparts in Kupang (only Rp. 13,000). While direct clients seem to pay the lowest rates (mean Rp. 12,000) in localization sites.

10.3 MSM and Transvestites

Among MSM, data show that more than 75 per cent of all respondents replied that they did not receive payment for their last sexual contact. Although 20 percent of respondents in Ujung Pandang did accept payment compared to 7 percent in Denpasar. According to the respondents, the mean amount received for payment for both locations varied immensely. The mean amount ranged from Rp. 48,000 in Ujung Pandang To Rp. 175,000 in Denpasar. While among transvestites, most respondents in Denpasar (88 percent) accepted payment for their last sexual contact, compared to Ujung Pandang (33 percent). The mean average of payments received varied depending on the location. In Denpasar, the mean average payment received was approximately Rp. 70,000, compared to Ujung Pandang, which was approximately Rp. 10,000

11. Knowledge and experience with STDs

In order to collect information about knowledge of STDs, all respondents were asked whether or not they know some types of STDs including gonorrhea, chlamydia, syphilis, herpes, lymphogranuloma venereum, scabies, *jamur* (fungus)/itching around the genital, *jengger* /plant-like growth around the genital/condyloma, AIDS, or hepatitis.

Among CSWs, the data reveals that about 58 percent of all respondents knew that AIDS was a STD. They also knew about gonorrhea (44 percent) and syphilis (30

percent). From all CSW respondents, the percentage who reported ever having STD was 20 percent. This percentage varied by location from 6 percent in Ujung Pandang, 20 percent in Kupang and 32 percent in Bali.

The data show that among all male respondents, those who know various types of STDs vary by group. The most commonly cited type of STDs was '*Sifilis*', AIDS, and GO (gonorrhoea). *Sifilis* was commonly cited among truckers, direct clients of CSWs, and sailors (all above 86 percent). AIDS was surprisingly cited as the second most common type of STDs particularly among direct clients of CSWs (63 percent) followed by sailors and drivers (about 52 percent respectively). GO was cited as the third most common type of STDs particularly among direct clients of CSWs (51 percent) followed by drivers (42 percent) and truckers (40 percent). '*Sifilis*' and GO are generic terms used for STDs among many Indonesians.

Among the MSM in both Denpasar and Ujung Pandang, their knowledge of STDs was relatively good, although those in Bali seemed to know more types of STDs. Among the transvestites, their overall knowledge was adequate, but lower compared to the MSM group. Similar to the pattern found among MSM, the transvestites in Bali seemed to have better knowledge of different types of STDs compared to their counterparts in Ujung Pandang.

12. Experience with STDs

Among CSWs, from those who reported ever-experienced STDs, the most common type of STD mentioned was purulent discharge, followed by gonorrhoea and syphilis. When asked from where they obtained their STD information, most said from the doctor or health worker (54 percent) or from their peers (34 percent). While among MSM, although more than 90 per cent of respondents knew about syphilis and gonorrhoea (65 percent), less than 50 percent were able to identify AIDS as a type of STD. In general, respondents in Ujung Pandang knew fewer types of STDs compared to Denpasar. About 18 percent of respondents in Ujung Pandang reported ever having STDs, versus 20 percent in Denpasar.

The data show that among all male respondents, there was a significant number (more than 25 percent) who reported ever had STDs. The higher pattern of incidences were mostly reported by direct clients (about 39 percent) and truckers (31 percent).

Of those MSM who reported to know STDs and reported ever had one, most of them reported having gonorrhoea and syphilis. When asked from where they obtained this information, more than half responded from each other, although it was found that in Denpasar most respondents (50 percent) stated that they obtained STD knowledge from doctors, while 83 percent of respondents in Ujung Pandang obtained STD information from each other. From all transvestites, a high proportion knew about STDs. Most of the respondents in Ujung Pandang reported to know about syphilis, followed by gonorrhoea and AIDS as types of STDs. However, a higher percentage of respondents in Denpasar knew more different types of STDs, compared to respondents in Ujung Pandang.

Among transvestites, the data shows that on average about 30 per cent of all respondents reported to ever had STDs. The proportion of reported STDs among transvestites is almost 4 times higher in Ujung Pandang (44 percent) compared to Denpasar (12 percent). From the respondents in Denpasar who reported ever having STDs, a third mentioned experiencing anal irritation, and about 20 percent reported gonorrhoea and syphilis. In Ujung Pandang, the most commonly reported STD was anal irritation. From the number of transvestites who reported ever having STD symptoms in the past year, the most common STD symptom was irritation around the anus, as well as pain and burning sensation when urinating (in Denpasar) or painless and non-itching ulcer (in Ujung Pandang). Thus, although these people are able to state a type of STD, or feel they have had STDs, it does not follow that they can distinguish one from the other, or even know anything about STDs other than their names. Furthermore, their reported experience of STD often does not match the appropriate symptom.

"I had my first sex with a call girl. When I have 'penyakit' (STDs) usually I cure it myself, but if it get worse then I go to a doctor. I do not use condom because it is not satisfying for the girl or me. But I always drink supertetra before going to the brothel and I always wash up after having sex with prostitutes. I usually use toothpaste or 'Bayclin' (whitener liquid), it hurt but it can kill the germs" (Ata, sailor, single, 23 years old, and high school graduate, Denpasar, 1998).

13 Health seeking behavior

From the percentage of CSWs who reported ever experiencing STD symptom in the past year, it was found that a high proportion, about 75 percent, sought medical treatment. Results show that more respondents from Kupang (78 percent) went for medical treatment compared to Bali (75 percent) and Ujung Pandang (72 percent). From those who did report having experienced STD symptoms in the past year and did seek medical treatment, most preferred to go to the doctor or private clinic (49 percent) followed by family planning clinics (19 percent) and health centers (14 percent). About 30 percent of all respondents in Kupang, Bali and Ujung Pandang did self-treatment.

Among those male respondents who reported ever having had STD symptom in the past year, more than half of them sought medical treatment. But this pattern varied among groups and location. It was apparent, though, that those males in Ujung Pandang tend to medically treat their STD symptom less than those males in Kupang or Denpasar. Among those who reported ever had STD symptom in the past year and sought medical treatment, the most commonly reported places of medical treatment were private practices/ doctors (varying between 28 to 31 percent between male groups), followed by hospitals (9-17 per cent), or health centers (4-12 per cent). The majority, however, tend to self-treat themselves (62-69 per cent). Those males reporting with STD symptoms in past year living in Ujung Pandang (74-87.5 per cent) tend to self-treat themselves compared to those Kupang or Denpasar.

From the MSM who reported ever having STD symptoms in the past year, the majority of respondents in Denpasar (92 percent) compared to Ujung Pandang (33

percent) did seek medical treatment. In both Denpasar and Ujung Pandang, the respondents preferred to seek treatment from the doctor or private practices. The results also reveal that more respondents in Ujung Pandang did self-treatment compared to respondents in Denpasar, with 53 percent and 25 percent respectively.

From the transvestites who reported ever having STD symptoms in the past year, a higher percentage of respondents in Ujung Pandang did seek medical treatment compared to Denpasar, 34 percent and 20 percent, respectively. The majority of the respondents who reported ever having STD symptoms in the past year preferred to go to the doctor/ private practitioner, followed by either the hospital or health center. The results reveal that a large proportion of the respondents (more than 90 percent) preferred to self-treat.

14. Conclusions

Some major conclusions in regards to high-risk sexual behavior among respondents, especially the male groups were generated from the survey and are presented as follows:

- The implementation of this survey has expanded into a much wider surveillance area than was previously possible. The survey also covered a new hard-to-reach male group category, namely the direct clients of CSWs, which provided better insights into their high risk sexual behavior;
- This survey has indicated that although there were high percentages of those who had ever heard of HIV/AIDS across all target groups; nevertheless, among the respondents there were still several misperceptions regarding the means of transmission and prevention of HIV/AIDS and STDs;
- This survey has indicated that adult male respondents, especially sailors and seaport laborers, as well as truckers and direct clients of CSWs, all continue to maintain high levels of pre- and extra marital sexual activities;
- This survey has indicated that use of condoms among all groups was relatively low in both pre- and extra marital sexual activities;
- This survey has indicated that knowledge of respondents about STDs and their symptoms were low;
- This survey has indicated that the majority of those respondents who reported to have experienced an STD symptom, or perceived to have been infected by an STD, have sought to self-treat themselves rather than seek modern medical service outlets;
- Among male groups, there was a seeming lack of variation in their responses, which may be due to several factors: i) the high mobility among these groups surveyed; ii) community education efforts through mass IEC have not been effective as expected³. Also, implementation of these IEC activities has been inconsistent in frequency and intensity. Some mass IEC campaigns which have

³ In fact such efforts may be declining in the light of protracted economic crisis being faced by the government since mid-1997.

been carried out have focussed more on public awareness; iii) apparently, there were many among the high risk behavior groups, who have not been reached or affected by intervention activities and continue to maintain misperceptions and risk behaviors they had. This is particularly true for clients of CSWs.

Previous BSS studies have shown that among those respondents who were sexually active and those who practice high risk sexual behavior, their own perceptions of risk, and of others' risk, to STDs or HIV/AIDS were very much influenced by their level of sexual behavior.⁴ Among clients of CSWs for example, there continued to be a perception that they were virtuous and moral, while foreigners and prostitutes were regarded as the source of 'filthy diseases' and the 'carriers of the virus. Among direct clients of CSWs, their partners or 'regulars' continue to be regarded as risk-free, while those CSWs who have come into contact with 'foreigners' were potential transmitters. Many sexually active respondents do not see that their sexual behavior put their partners at risk. Therefore, changing the perception of risk will be a challenge in affecting behavioral aspects of the HIV epidemic in Indonesia.

15. Recommendations

- Intervention efforts that include mass education, better and wider access to condoms and health care services, though a cliché recommendation are still necessary because affecting perception and behavior changes do take a long time.
- Perceptions of risk among various groups must be changed. This may be implemented through mass education efforts that are segmented, consistent, repeated, and intensive.
- There should be specific interventions directed to clients of CSWs. Interventions should emphasize behavior change rather than merely raising awareness through basic information.
- Intervention efforts should be sensitive to the needs of the target groups and should attempt to remove negative social-idioms related to STDs and HIV/AIDS, stigmatization, and discrimination against those infected people. Such needs must be gathered through more in-depth qualitative studies among different groups of population.
- At more technical service levels, monitoring of the epidemic, through regular sentinel surveillance of sexually high risk behaviors and sexually transmitted diseases, would also demand:
 - Better and sustainable systems of accurate and timely recording and reporting of data to ensure accurate assessment of the magnitude of the epidemic;

⁴ This may be confirmed also by the previous BSS 1996 and 1997 surveys conducted by USAID HIV/AIDS Prevention Program, and the AusAID BSS 1998 in-depth studies.

- Employing better and sustainable systems for informing and counseling HIV positive persons;
 - Ensuring privacy and confidentiality of infected persons;
 - Continuously providing follow-up monitoring, referral, and care.
- Future programs need to address the impact of the economic crisis on the sex industry. Especially its effects on the livelihood of the CSWs and their children, because as they sink deeper into poverty, their pursuit for economic survival will exceed their concern for safe sexual behavior.
 - Implement reproductive health education programs to affect delay sex at early age. Various groups (and more so those who are sexually high risk) are initiated into sexual activity at an early age or through early marriage, which places them at higher risk of being exposed to STDs/HIV/AIDS. Future programs should delay early marriage or early pre-marital sex by encouraging adolescent girls to stay in school, and educate them on means of preventing STD/HIV/AIDS infection.
 - Increase the intensity of condom use campaigns. Data reveal that condom use is low among high-risk groups. Although CSWs reported condom use in last sexual contact was high (about 50-70 percent), the results are dubious (especially since male respondents reported about 10 percent). In addition, there is a need for more campaigns focusing on clients, since male clients determine condom use.
 - Implement more extensive interventions, which concentrate on behavior change rather than merely on increased awareness and knowledge. More innovative approaches should be devised to address this problem, perhaps involving the private sector in the process.
 - Strengthen existing channels of information dissemination such as social services/NGOs. Health centers/ hospitals could be further involved to spread the channels of information.
 - Improve understanding of power relations and improve communication skills of very high-risk groups (CSWs, transvestites, and MSM), especially in negotiating/ bargaining condom use. Also, create support groups that put pressure on the client to use condoms, coupled with intensive campaigns to increase condom use, especially targeted to clients.

Despite the protracted economic crisis, members of society, by way of NGOs, community leaders, as well as government officials, should continue to ensure the protection and care of people with HIV or AIDS as part of their social obligations. This will ensure the improved quality of life and maximization of human resources, as idealized in the State Policy Guidelines (GBHN). Therefore, in order to have maximum policy impact for both the short and long term development, it is necessary that the issues of sexual-risk behaviors and the potential of the HIV/AIDS epidemic pertaining to the population (at society, community, groups, and individual levels) be better understood.

Main Indicators resulted from STD/HIV Risk Behavioral Surveillance Survey of 1998, in Bali, Kupang, and Ujung Pandang

A.C.I Female commercial sex workers

	Bali	Kupang	Ujung Pandang	Total
Indicators				
% know at least 2 ways of HIV/AIDS prevention	79.3	86.8	75.6	81.0
% know all 3 ways of HIV/AIDS prevention	61.6	74.4	59.7	65.7
Mean number of guests served last week	17.7	12.5	11.1	13.8
337% using condom at last sex	69.8	52.0	33.3	52.8
% sought medical treatment for last STD symptom ^a	74.6	77.7	72.0	74.7
% had self treatment for last STD symptom ^a	30.6	28.8	34.3	31.0

Note: ^a from respondents who ever had STD symptom in the past year

**A.M.I.a Males ((sailors and fishermen), truckers, public transportation drivers, and direct clients female CSWs)
For Bali and Kupang**

Indicators	Bali				Kupang			
	S	T	PTD	DC	S	T	PTD	DC
% know at least 2 ways of HIV/AIDS prevention	77.5	79.5	79.5	96.0	81.0	87.0	87.5	84.7
% know all 3 ways of HIV/AIDS prevention	53.5	54.5	49.0	74.0	66.5	69.0	74.5	70.7
% ever had CSW contact in the past year	67.5	61.5	32.5	100.0	72.0	91.5	88.0	99.3*
% using condom at last sex with CSW ^a	13.8	13.5	20.2	48.0	22.5	17.7	20.9	23.3
% always using condom in CSW contact in the past year ^b	3.0	2.5	6.5	10.0	7.0	6.0	7.5	12.0
% sought medical treatment for last STD symptom ^c	41.3	49.4	78.7	70.8	63.8	53.7	47.4	60.7
% had self treatment for last STD symptom ^a	72.5	59.6	34.4	41.7	62.8	59.5	71.1	62.9

**A.M.I.b Males ((sailors and fishermen), truckers, public transportation drivers, and direct clients female CSWs)
For Ujung Pandang And Three cities**

Indicators	Ujung Pandang				Total			
	S	T	PTD	DC	S	T	PTD	DC
% know at least 2 ways of HIV/AIDS prevention	76.6	71.3	52.5	78.0	78.4	79.2	73.2	85.6
% know all 3 ways of HIV/AIDS prevention	51.2	46.5	30.5	50.0	57.1	56.6	51.3	67.2
% ever had CSW contact in the past year	43.8	34.7	13.0	100.0	61.1	62.5	44.5	99.6*
% using condom at last sex with CSW ^a	10.8	8.1	7.8	10.0	16.1	13.8	18.4	25.6
% always using condom in CSW contact in the past year ^b	2.0	0.5	0.5	4.0	4.0	3.0	4.8	10.0
% sought medical treatment for last STD symptom ^c	40.0	47.9	42.6	44.0	51.2	51.2	54.6	59.4
% had self treatment for last STD symptom ^c	77.1	87.5	74.1	76.0	68.9	64.7	62.0	61.6

Notes: S= seaman; T= trucker; PTD= public transportation driver; DC= direct client of CSWs.

* incomplete respondent response.

^a from respondents who ever had CSW contact in the past year

^b from respondents who ever had sex with non CSW ^c from respondents who reported ever had STD symptom in the past year

A.T.I Transvestites

	Bali	Ujung Pandang	Total
Indicators			
% know at least 2 ways of HIV/AIDS prevention	90.1	94.9	92.8
% know all 3 ways of HIV/AIDS prevention	61.7	72.7	67.8
% having guest as sex partner in last sex	88.9	38.4	61.1
% using condom at last sex	67.9	24.2	43.9
% sought medical treatment for last STD symptom ^a	19.8	34.3	27.8
% had self treatment for last STD symptom ^a	80.0	96.7	92.5

Notes: ^a from respondents who ever had STD symptom in the past year

A.G.I Men having sex with man (homo sexual)

	Bali	Ujung Pandang	Total
Indicators			
% know at least 2 ways of HIV/AIDS prevention	94.3	84.0	88.2
% know all 3 ways of HIV/AIDS prevention	91.4	74.0	81.2
% using condom at last sex	52.9	11.0	28.2
% sought medical treatment for last STD symptom ^a	91.7	33.3	50.0
% had self treatment for last STD symptom ^a	25.0	53.3	45.2

Notes: ^a from respondents who ever had STD symptom in the past year