

INTEGRATED HIV AND SEXUALLY TRANSMITTED INFECTIONS (STIs) BIO-BEHAVIORAL SURVEY (IBBS) AMONGST KEY POPULATIONS IN SOMALIA

Final Report

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This report was written by Calistus Masika (Lead Research Consultant) with technical support from Kelsi Kritmaa (Senior Health Technical Advisor, IOM), RDS statisticians (Paul Macharia, Zoran Dominkovic, and Sandra Sevic), Somalia national consultants (Ahmed Adam and Deq Sudi Tarabi), and Technical Working Groups (TWGs) in Mogadishu and Garowe. TWG in Mogadishu comprised of the South Central AIDS Commission (SCAC), Ministry of Health, IOM health coordinator in Mogadishu, UNICEF, People Living with HIV (PLHIV) Network, and Swis Kalmo). TWG in Garowe comprised of the Puntland AIDS Commission (PAC), Ministry of Health, , UNICEF, WHO, IOM health coordinator in Puntland, UNDP, local non-governmental organizations Badbado, Somali Red Crescent Society [SRCS], HEOPE, World Vission International, Puntland Center for Human Rights and Democracy [PUNCHAD]).

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Abbreviations and Acronyms

ELISA	Enzyme-Linked Immunosorbent Assay
FSWs	Female Sex Workers
FSW	Female Sex Worker
GF	Global Fund
GARPR	Global AIDS Response Progress Reporting
HIV	Human Immunodeficiency Virus
IBBS	Integrated Biological and Behavioral Survey
ID	Identification
IOM	International Organization for Migration
MOH	Ministry of Health
NSP	National strategic plan
RDS	Respondent Driven Sampling
RDSAT	Respondent Driven Sampling Analysis Tool
SD	Standard Diagnostics
SOP	Standard Operating Procedure
STI	Sexually Transmitted Infections
TLS	Time Location Sampling
TPHA	Treponema Pallidum Haemagglutination Assay
TWG	Technical Working Group
UNAIDS	United Nations Programme on HIV/AIDS
USD	United States Dollars
VCT	Voluntary Counselling and Testing
WHO	World Health Organization

EXECUTIVE SUMMARY

Background

At the time of implementing the 2017 integrated biological and behavioural surveillance (IBBS) survey, two previous rounds of IBBS studies involving female sex workers had been conducted in Somaliland, in 2008 and 2014. In 2008, an IBBS study was implemented in Hargeisa involving 237 FSW using respondent driven sampling (RDS). An HIV prevalence of 5.1% (2008) and 4.8% (2014) was established. Both studies were conducted in Hargeisa, Somaliland involving FSW. Other key population groups at higher risk of HIV transmission or infection, such as uniformed personnel, port workers and truckers, were not included in the surveys. However, understanding the disease burden amongst these populations is key to the success of the Somalia HIV response. This integrated HIV and Sexually Transmitted Infections (STIs) bio-behavioural surveillance (IBBS) survey amongst key populations in Somalia, included female sex workers, uniformed , port workers and truckers, establishing a baseline for the four survey groups.

Methodology

The 2017 IBBS survey involved four study groups: FSW, uniformed personnel, port workers and truckers. A total sample size of 2288 respondents (n=286 per group) were recruited in Mogadishu and Bossaso. Data was collected between April 2017 and May 2017. RDS was used to recruit FSW (RDS) and Time Location Sampling (TLS) was used for uniformed personnel, port workers and truckers. Consenting participants aged 18 years and above meeting other eligibility criteria (established by a screener) were recruited, interviewed and their HIV and Syphilis tests undertaken. Somalia HIV and syphilis testing algorithms were adopted. Serial HIV testing involved use of three tests (SD Bioline for HIV, Abon and Stat-Pack) while testing for syphilis involved use of SD Bioline for syphilis and rapid plasma reagin (RPR) tests. Respondents testing positive for HIV and/or syphilis were counselled and linked to care and treatment at Banadir hospital and Bossaso general hospital. Biological data was captured on paper based data collection tools whereas behavioural data was captured using a mobile phone data collection application, *mFieldwork*. Behavioural data was cleaned and merged with biological data. Analysis of RDS was conducted in RDS-Analyst (RDS-A) for univariate and bivariate analysis using Gile's SS (sequential sampler) estimator. This estimator takes into account network characteristics and generates adjusted proportions called "Estimated population proportions" with corresponding 95% confidence intervals. Both univariate and bivariate analysis of TLS data were conducted using Stata version 12.

Results

Most participants were aged between 25 – 34 years. A high proportion had either no education or primary education. Although the majority of participants from truckers, port workers and uniformed services were married, most FSWs were either separated or divorced. The majority of participants had stayed in Mogadishu or Bossaso for than two years at the time of this data collection. Truckers significantly travel to neighbouring countries with varied duration of stay outside the country before visiting their families.

Mogadishu

Female sex workers

The mean age of FSWs in Mogadishu is 29.8 years with the majority aged between 25 – 34 years, with no education (86.8%). The prevalence of HIV is 2.9% whereas syphilis prevalence is 6.3% (ever infected) and 1.8% (active infection). HIV composite knowledge is 8.2%. In addition, 23.1% report condom use during last transactional sex, and only 11.6% know their HIV status. Lastly, coverage of HIV prevention programmes is low (6.7%).

Uniformed personnel

The mean age of uniformed personnel respondents is 32.3% with a larger proportion being aged 25 – 34 years having secondary education (39.2%). HIV prevalence is 0.2% among uniformed personnel while syphilis prevalence is 1.6% (non-active) and zero (active). HIV composite knowledge level is 35.8%. Twenty seven point seven per cent of uniformed personnel reported condom use during last transactional sex. Coverage of HIV prevention programmes is 0.4% and only 9.2% know their HIV status.

Port workers

The mean age of port workers who participated in this survey in Mogadishu is 33.1 years, mostly aged between 25 – 34 years and having no education (79.5%). Prevalence of HIV is 0.2% while syphilis prevalence is 1.5% (non-active) and 0.9% (active). Low HIV composite knowledge score (2.2%) recorded in addition to few port workers (3.5%) who know their HIV status. 24.4% reported condom use during last transactional sex. In addition, only 0.45 had accessed HIV prevention programmes.

Truckers

The mean age of truckers in Mogadishu is 31.0 years while nearly two thirds (65.0%) have no education. The proportion of those who frequently visit neighbouring countries is 91.3% more than half (55.2%) travelling on a monthly basis. HIV prevalence among truckers is 0.5% while syphilis prevalence is 1.2% (non-active) and zero active. Like other study groups, both HIV composite knowledge (21.3%) and condom use during last transactional sex (24.4%) is low. Only 14.2% of truckers in Mogadishu know their HIV status. Lastly, coverage of HIV prevention programme among truckers is 5.1%.

Bossaso

Female sex workers

The mean age of FSWs in Bossaso is 28.4 years while slightly more than half of them aged between 25 – 34 years. 67.3% have no education. Furthermore, most of them are either divorced (82.4%) or widowed (9.4%). The HIV prevalence is highest (4.5%) amongst this study population compared with other study groups. However, syphilis prevalence is lower at 1.1% (both ever infected and active infection). The HIV composite knowledge score is 22.5%. A significantly higher proportion of respondents (64.2%) compared to other study groups used condom during last transactional sex. However, coverage of HIV prevention programmes for FSW is at 0.2%, probably linked to the finding showing that 69.8% of FSW in Bossaso avoid HIV services because of stigma and discrimination.

Uniformed personnel

Uniformed personnel have a mean age of 32.8 years. While 61.8% are married, half of them have no education. HIV prevalence is 1.1% whereas syphilis prevalence is 0.7% (both active and previous infection). The uniformed team is characterized by low HIV composite knowledge (24.4%), high condom usage at last transactional sex (75.8%), and fewer respondents who know their HIV status (38.2%). In addition, 45.0%

reported avoidance of HIV programmes because of stigma and discrimination with resulting low coverage of HIV prevention programme (5.9%).

Port workers

The mean age of port workers in Bossaso is 31.5 years. Like other study groups, many of them (77.6%) have no education. This group also has a low HIV prevalence (1.2%) and syphilis prevalence (1.8%). Aside from low HIV composite knowledge (7.7%), only 20.8% used condom during their last transactional sex. Only 8.9% know their HIV status. This is consistent with the finding from this same study showing high proportion (73.8%) of truckers citing avoidance of HIV programmes due to stigma and discrimination.

Truckers

The mean age of truckers in this survey is 32.5 years. Half (50.8%) are aged between 25 – 34 years and have primary education (46.7%). HIV prevalence among truckers in Bossaso is 0.4% whereas syphilis prevalence is 0.2% (both active and previous infection). Truckers also have low HIV composite knowledge level (8.6%). In addition, condom usage during last transactional sex is 38.8%. Only 10.9% know their HIV status while 75.3% avoiding HIV prevention programmes due to stigma and discrimination.

Conclusion and recommendations

There is variation in HIV and Syphilis prevalence across the four study groups in each of the two sites. Generally, HIV prevalence is below five per cent but highest among FSWs in Bossaso (4.5%) and Mogadishu (2.9%). Port workers in Bossaso comprise a client's group with highest HIV prevalence (1.2%). Non-active syphilis, an indication of previous syphilis infection, is higher than active syphilis at 6.3% in Mogadishu. While this IBBS is the first ever to be conducted in South Central Somalia and Puntland, it provides baseline data on a wide array of indicators to guide re-design of HIV programme in Somalia. The variation across key indicators (including Global AIDS Response Progress Reporting (GARPR) indicators) across study groups and sites indicate the need to target and tailor HIV response intervention to address specific HIV programming gaps identified from this survey. These gaps include low condom usage during transactional and non-transactional sex with clients; low proportion of key populations who know their HIV status; less than 25% coverage of HIV prevention programmes for key populations, and high proportion of key populations avoiding access to HIV programmes due to stigma and discrimination associated with either HIV services or sex work. Key interventions such as design and optimization of a peer education programme could significantly improve key indicators such as HIV programme coverage and increase access to HIV services due minimal stigma and discrimination. While this survey acts as a baseline, future IBBS surveys should be conducted to track progress of key indicators. Such future IBBS surveys will help to measure the success of the HIV response in Somalia. In future IBBS surveys, it will be good to follow up studies with the four groups included in this IBBS survey. It is recommended that future IBBS surveys explore inclusion of additional key population groups at higher risk of HIV.

1. INTRODUCTION

1.0 Background

In 2014 estimates showed more than 30,000 people were living with HIV (PLHIV) across Somalia, including 9,531 in Somaliland, 16,363 in South Central, and 3,832 in Puntland (UNAIDS, 2015). In addition, the same report indicated a total of 2,338 new HIV infections among adults aged 15 years and above recorded the same year. Previous studies in Somalia have shown HIV to be a concentrated epidemic, particularly among Female Sex Workers (FSW); therefore, reducing prevalence among FSW and their clients is a critical measure of a national-level response to HIV. The 2016 mapping and size estimation of key population in Somalia established existence of an estimated 963, 1,126 and 911 FSW in Mogadishu, Hargeisa and Bossaso, respectively. Clients of FSW (truckers, port workers, seafarers, fishermen, khat clients, tea clients, and uniformed personnel) were estimated between 2,202 – 2,599 in Mogadishu and 3,469 – 3,530 in Bossaso, while clients in Hargeisa were estimated at 1,559 – 1,828 (IOM, 2016). The majority of FSW meet their clients and transact sex either at their homes or the homes of the clients, especially on Thursdays and Fridays during evening hours. Across the literature, the aforementioned clients of FSW have been reported to engage in sexual relations with FSW (IOM, 2016; UNAIDS, 2014; Kriitmaa *et al.*, 2010). Several factors have been cited to exacerbate their vulnerability to HIV infection or transmission, these factors include alcohol and khat consumption, low literacy levels, mobility (particularly among truckers), religious and cultural practices against use of condoms and limited access to HIV prevention activities.

1.1 Previous IBBS studies in Somaliland

Two rounds of Integrated Biological and Behavioural Surveillance (IBBS) surveys involving FSW have previously been conducted in Somaliland, in 2008 and 2014. In 2008, an IBBS study was implemented in Hargeisa involving 237 FSW using respondent driven sampling (RDS) (WHO, UNAIDS & IOM, 2010). With an average age of 29 years, most of FSW had never attended school. In the 2008 IBBS, 6.9% of FSW participants were refugees whereas 29.8% were economic migrants (Kriitmaa *et al.*, 2008). The majority (57.2%) of participants in the 2008 IBBS were born in Ethiopia compared to 82.1% in the 2014 IBBS whose place of birth was Somaliland (IOM, 2014; Kriitmaa *et al.*, 2008). An HIV prevalence of 5.2% and a syphilis prevalence of 3.1% was established in this first round of IBBS survey, which was slightly higher than the 4.8% recorded in 2014 (IOM, 2014). The proportion of FSW who reported use of condoms in their last transactional sex prior to the study was 24.0% in 2008 compared to 31.5% in 2014. Most of FSW across the two IBBS studies had their vaginal sexual debut at less than 18 years, though most of them had their first paid sex at the age of 18 years and above. Although the 2008 IBBS indicated 36.7% of FSW met their clients by the roadside, the majority of FSW in the 2014 IBBS met their clients either at their homes or clients' home. This concurs with recent studies including the 2016 mapping and size estimation study which showed that homes are the major venue for both meeting clients and where FSW engage in sex (IOM, 2016). Though khat sellers, truck drivers and businessmen were cited by FSW participants in 2008 IBBS survey as frequent clients, the majority of FSW participants did not know the occupation of their clients (Kriitmaa *et al.*, 2010). Truckers, khat sellers and businessmen in Hargeisa were cited by FSW in the 2014 IBBS survey as their most frequent clients.

Few FSW respondents in the two previous round of IBBS surveys in Hargeisa knew where to obtain an HIV test. Prior to the IBBS surveys, only 2.4% of FSW in 2008 and 21.3% in 2014 reported having had an HIV test 12 months and received the results. Self-reported access to condoms from HIV programmes among

FSW was very low across the two IBBS studies with 0.7% in 2008 and 3.8% in 2014. More than half of FSW reported preferring to access condoms through pharmacies (IOM, 2014). Only 4.3% of FSW in 2008 and 15.7% in 2014 reported consistent use of condoms with clients one month prior to the study with the majority of FSW having poor composite knowledge about HIV prevention (10.4% in 2014 and 6.3% in 2008).. These two IBBS studies, however, were limited to FSW only and did not include other categories of key populations such as truckers, uniformed personnel and port workers who constitute key FSW clients.

2.3 ACC A fb A

The previous two rounds of IBBS surveys in Somalia were conducted in Hargeisa in 2008 and 2014 focusing on FSW only. These surveys did not focus with other key populations who engage with FSW, including truckers, uniformed personnel, and port workers. This IBBS survey provides baseline data that will enable tracking HIV prevalence among key populations in the three study sites (Mogadishu, Bossaso and Hargeisa), consequently providing useful indication of HIV prevention programme performance. The findings of this IBBS survey provides the national HIV programme with strategic information on current HIV and Syphilis prevalence as well as information on HIV and STI-related behaviours and risks. This information is essential for targeted planning of key population programmes towards realization of the 90-90-90 goal among key populations by 2020.

2.4 A Acj w A

The overall objective of the survey was to undertake integrated HIV and Sexually Transmitted Infections (STI) bio-behavioural surveillance (IBBS) among key populations in Somalia.

The specific objectives of this study included:

1. To establish both baseline (client groups) and trend data (FSW) for HIV and STI (Syphilis) prevalence among key populations in Mogadishu and Bossaso.
2. To determine risk behaviours and knowledge of HIV and STI among key populations in Mogadishu and Bossaso.
3. To establish an association between socio-demographic characteristics and HIV/STI risk behaviours among key populations in Mogadishu and Bossaso.

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- a. Review of previous studies conducted in Somalia especially on key population risks, size estimates, locations, accessibility and potential barriers to the survey.
- b. Formation of zonal Technical Working Groups (TWGs) comprising experts from the Ministries of Health (MOH), AIDS Commissions, UN agencies, and local NGOs working with key populations. During these TWG meetings, the study methodology including sampling techniques, survey logistics and level of compensation for participant's time and travel will be discussed and agreed upon.
- c. Pre-study meetings with gatekeepers at prospective data collection sites/venues, and identification of potential RDS seeds was conducted.

The study was undertaken in two locations – Mogadishu and Bossaso. According to the Global AIDS Response Progress Reporting (GARPR) report (2017), major towns and cities play a critical role in the HIV response because of their large and increasing number of PLHIV and the increased vulnerability to HIV transmission associated with city dynamics, such as population density, migration, inequalities and high concentrations of Key affected Populations. Furthermore, such major towns and cities have a critical opportunity to provide leadership in the HIV response as drivers of economic and educational opportunity, innovation, accessible service delivery and inclusive, participatory approaches to governance. This IBBS survey targeted four study groups of key populations, namely FSW, truckers (truck drivers and their assistants), uniformed personnel (police/military), and port workers. These groups were prioritized based on available data, funding and feasibility of implementing an IBBS in Somalia across different groups concurrently.

A cross-sectional study involved recruiting respondents using two sampling techniques: RDS and TLS.

3

allowed for smooth administration of the behavioural questionnaire and HIV and syphilis testing. To avoid long waiting times among participants, two interviewers and two nurse counsellors conducted HIV and syphilis tests, working concurrently. Due to the sensitivity of the study in Somalia, posters or signage advertising the study were not be used.

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TLS was used to recruit respondents among truckers, uniformed personnel, and port workers. TLS is a probability-based method for enrolling members of a key population at times and places where they congregate. TLS is a procedure in which venues (e.g. truck stops, ports, hotels) and their associated attendance periods are the primary sampling units. A sampling frame comprising of a comprehensive list of venues where the key populations can be found and the days of the week and the hours of the day when they can be found in number was created and agreed upon during a TWG meetings. Additional information on possible sampling units was derived from the mapping and size estimation study conducted from December 2015 to March 2016. Prior to this IBBS survey, fieldwork preparation for TLS was conducted at the locations where the IBBS would be conducted (truck stops, uniformed service bases, central lab, police stations and port).

Appropriate buildings near or within the truck stops, central lab (Mogadishu) ports and police/military bases were rented out to create sufficient space for interviewing and administering the biological testing component. The venues were randomly selected from the sampling units created during the formative stage. Each venue, constituting a sampling unit, was assigned a consecutive number. A computer software, *Research Randomizer*, was then be used to generate random numbers.

Appropriate days and time were identified as Sundays through Thursdays from 7am to 12pm. During data collection, all seemingly eligible people who were at the venues within operating hours were consecutively approached and asked to complete a brief eligibility interview. During training, screeners were trained to approach potential participants by identifying themselves, their purpose and to confidentially conduct brief eligibility interviews. However, due to security risks in Somalia, identification badges were not used. Individuals who agreed to participate in the IBBS survey were accompanied to the rented venue located within/next to the truck stops, port or police/military base for interview and subsequent syphilis and HIV testing. In cases where recruitment was extremely slow, members of the target group (in company of a screener) were used to mobilize peers who were at the venue or data collection site for eligibility screening. All eligible individuals were asked to participate. Participants were asked for verbal informed consent for conducting the survey interview and testing for HIV and Syphilis. On successful completion of the behavioural and biological components of the interview, each participant was given four USD (apart from truckers in Mogadishu who were given USD 7 as four USD was not feasible among this study group) to compensate for their time to participate in the survey. At each data collection point, the survey team had representation from a Global Fund sub-recipient who worked with that particular key population group.

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The sample size generated was based on the surveillance purpose of tracking important changes in the HIV epidemic over time; that is from earlier estimates of HIV prevalence (i.e. IBBS surveys conducted in Hargeisa). Each of the three study sites, and each population group, constituted a separate survey with a sample size needed to track changes at each study site and population group over time. The

Sample size calculation, using the formula below, took into consideration eight key indicators used in the previous IBBS surveys as shown in Table 1.

$$N = \text{Deff} [(Z)^2 P(1-P) / W^2]$$

Where:

Deff - Design effect of 2.0

N – Desired Sample size

Zα – Standard normal deviate at the significance level (α = 0.05, two-sided) corresponding to 1.96

P - Expected proportion with outcome of interest

W – Degree of accuracy, at 0.05

No.	Indicator	Population Estimation	Resulting Sample Size (N)	With Design Effect (x2)
1	% FSW infected with HIV	4.8%	70	140
2	Condom Use at Last Sex	20.6%	332	663
3	Condom used consistently with clients in past month	13.3%	177	354
4	Ever heard of male condom	72.3%	366	732
5	Less than 5 clients in past 30 days	35.6%	367	734
6	% FSW who had HIV test in past 12 months and knew result	21.3%	258	516
7	Ever had HIV test	4.0%	320	640
8	% FSW who correctly identified ways of preventing transmissions and rejected major misconceptions	10.4%	143	286

Using a design effect of 2.0, as recommended in both RDS and TLS studies, the resulting sample size ranges between 140 and 734. The indicator on percentage of FSW who correctly identify ways of preventing transmission and reject major misconceptions (GARPR 5.1) was used, as it struck a balance of feasibility and acceptable precision in the Somaliland context. Thus, a sample size of 286 was used per key population group. Consequently, a total of 1,144 respondents were recruited in Mogadishu and Bossaso.

3.7A Key Population

- Key population – Groups at increased risk of HIV infection or transmission, in the Somali context comprising of FSW, truckers, police, military officers, and port workers
- Truckers - Long distance and intra-city truck drivers and their assistants in Mogadishu or Bossaso
- Uniformed Personnel - Individuals who belong to any uniformed services including military and police in Mogadishu and Bossaso
- Female Sex Workers - Women who had engaged in sexual activity with men in exchange for money, favour or goods in the last 12 months in Mogadishu and Bossaso.
- Port Workers - Individuals working as manual labourers at the ports of Mogadishu and Bossaso.

3.7A.c Inclusion

- Aged 18 years and above
- Had to be a FSW, trucker, uniformed personnel, or port worker (meet the operational definition outlined previously)

- In possession of a valid referral coupon (RDS/FSW only)
- Approached by study staff in designated venue/time (TLS/client groups only)
- Capable and willing to provide informed consent to participate (see further information on informed consent below)
- Working and or living in any of the two respective study sites: Mogadishu, and Bossaso (defined as primary residence/where person lives the majority of time)

Exclusion

- Previous participation in this round of IBBS survey
- Inability to provide informed consent (including persons incapable of providing consent or under the influence of alcohol or drugs)

3.9A. Eligibility criteria

Whenever a potential participant presented to the study site, the screener examined and verified the authenticity of the coupon (FSW team only) presented to exclude possibility of double participation, in addition to other eligibility criteria. Eligibility was assessed using a short questionnaire (*Appendix 3 & 4*) covering the aforementioned criteria. In case the screener still remained unconvinced about potential participant's eligibility, he/she was under instruction to pose additional non-standardized questions to confirm eligibility.

3.9A. Variables

This IBBS survey examined the following biological and behavioural variables:

- HIV prevalence and STI (Syphilis) prevalence
- Demographic characteristics: Age, nationality, marital status, etc.
- Knowledge on HIV and STI transmission
- Sexual history
- Sexual history: Paying clients
- Sexual history: Non-paying clients
- Condoms: Male and female
- Population size estimation
- HIV testing history
- Stigma and discrimination
- Physical and sexual violence
- Programme coverage
- Alcohol and drug use

3.1A. Population size estimation

Estimation of key population sizes when implementing IBBS surveys is currently recommended (GARPR, 2017). This survey included in the questionnaires, questions on size estimation of key populations in Mogadishu and Bossaso. Both the multiplier method and the wisdom of crowd methods were used.

3.1.2A. Wisdom of crowd

Procedures for a service multiplier entail obtaining programme data from a clinic or other programme servicing the key population on the total number of key population members who accessed that service during a specific period [e.g. number of FSW accessing Voluntary Counselling and Testing (VCT) center for HIV testing] (UNAIDS & WHO, 2010). Existence of this critical information was sought for during the zonal

stakeholder TWG meeting. Unfortunately, existing programmes in Somalia have not captured data specific to target population such as HIV testing data among FSWs or any other key population category. During administration of the survey questionnaire, all respondents were asked whether they accessed this service during the specified time period. The number of key population members from the service data count and the proportion reporting having accessed this service in the survey questionnaire provide the parameters for computation of population estimates. To strengthen accuracy, the initial plan was to ensure that service data counts included all the key population members accessing the service, unduplicated (no one counted twice), and that service data were for the appropriate period (for the last 12 months prior to the current IBBS survey). Using these two data sources, the multiplier method provides a population size estimate with the following formula:

$$N = n / p$$

Where N is the estimated key population size, n is the total number of key population who accessed the health service (e.g. HIV testing), and p is the proportion of the key population reporting in the current IBBS survey to have accessed health service (HIV testing).

2.9.2 Successive sampling – population size estimation ss-PSE

Successive sampling-population size estimation (SS-PSE) along with network size imputation allows population size estimates to be made based on theoretical decline in network size over sampling wave in RDS. This new experimental method requires only an RDS survey (though better with additional estimates to compare, inform prior) to be computed within RDS Analyst software. This method provides a promising alternative to other methods commonly used to estimate the size of hard-to-reach populations. SS-PSE relies only on data already collected in a respondent-driven sampling study. FSW population size estimates are presented in form of mean, median and mode. The results of this estimation should be interpreted with caution.

2.9.3 Wisdom of crowds

The survey also produced an estimate of the number of each key population in the survey location through the synthesis of survey participant opinions, also called the wisdom of crowds method (Surowiecki 2004). Participants in the IBBS were asked their best estimate of the number of key population members like them in their location. Such an approach produces a measure of the perception of community members of the population size of the key population. The wisdom of crowds method theorizes that members of the population have specialized information on the population and that personal opinion formulated in private was not influenced by others' responses. The estimate was examined as the median, mode, and mean responses and compared to the other size estimation methods.

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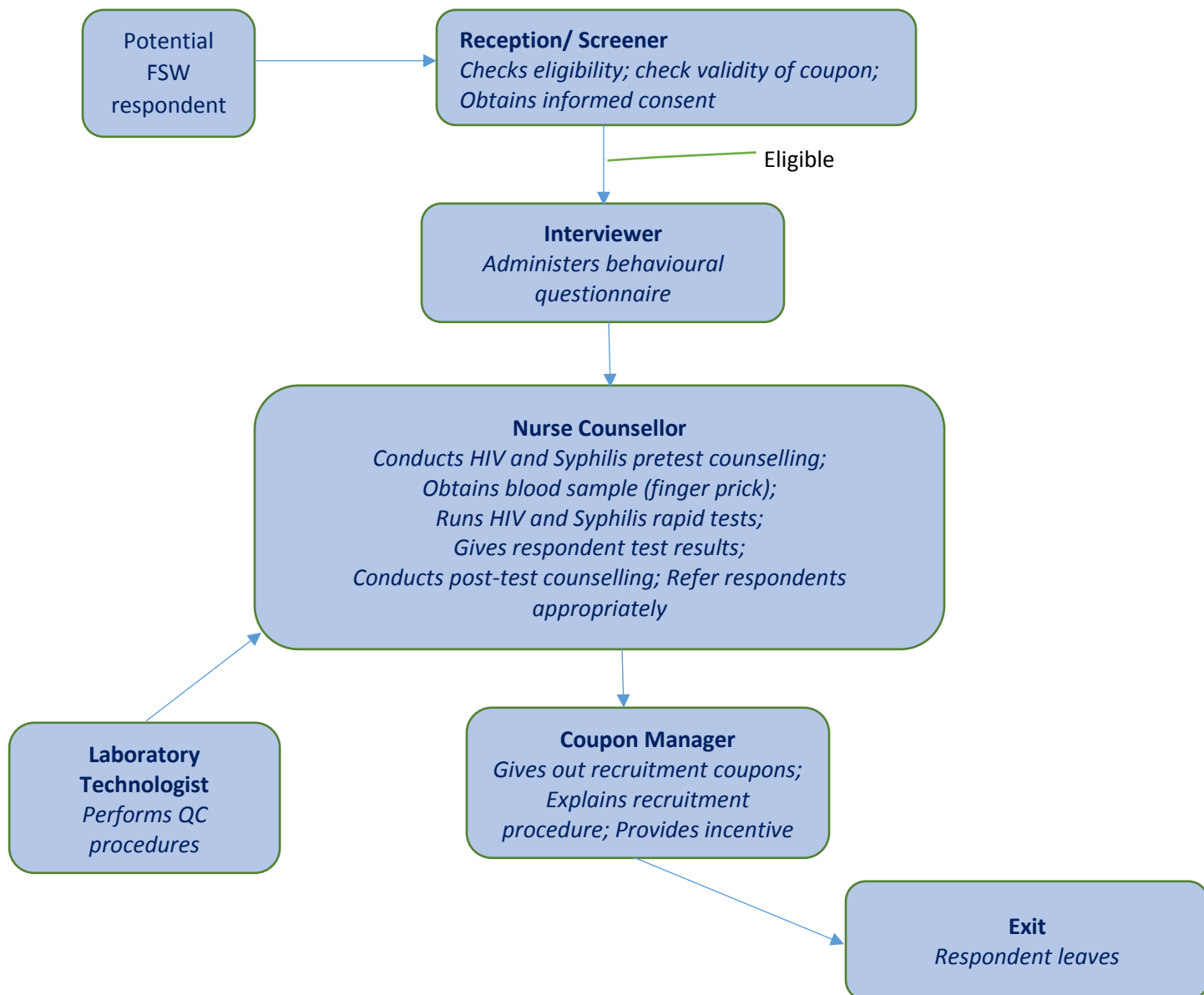
This IBBS survey collected both behavioural and biological data from participants. Data items included indicators needed to track the HIV epidemic and the national response for key populations, conforming to international standards (e.g. GARPR indicators as shown in Table 2 and Somalia Key Performance Indicators), national programme needs, and comparability with similar surveys in the region. The questionnaire collected data on socio-demographic indicators, sexual behaviours potentially correlated with HIV, self-report STI symptoms, stigma and discrimination, risk perceptions, and knowledge, attitude, and practices around HIV and AIDS. The majority of questions in the previous IBBS surveys in Somalia were included, in order to compare trends. The behavioural questionnaire was programmed into a mobile application, *mFieldwork*, and administered by a trained interviewer, in the local language. The behavioural questionnaire was translated into Somali. Biological data was collected on paper and

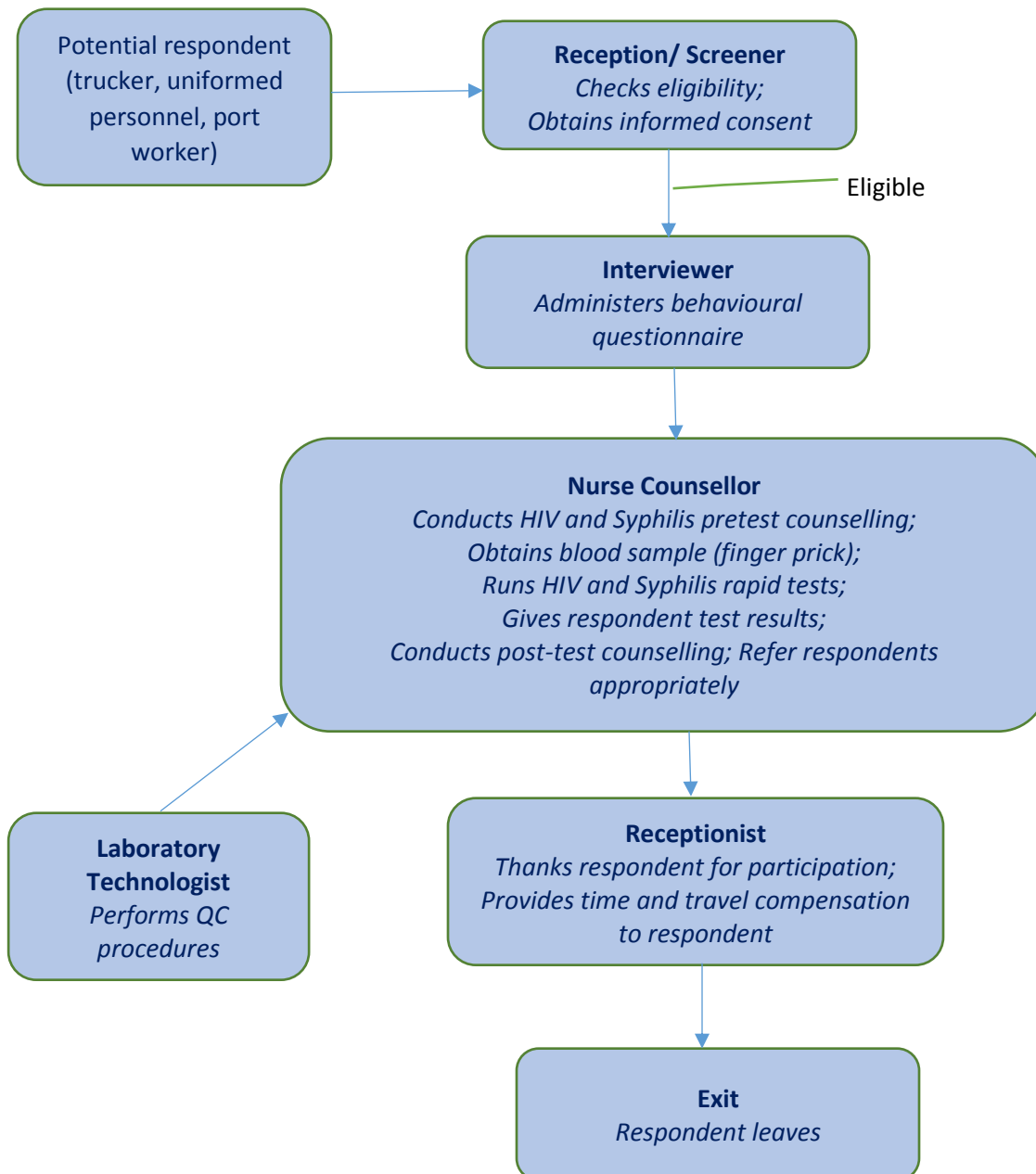
data entry was done by the site supervisor on password protected laptops at the end of each day. The site supervisor also stored a back-up copy of the files on a flash drive that was kept in a locked cabinet. The biological participant records were devoid of any participant identifiable information, only unidentifiable unique sequential coupon code, and a unique laboratory code. Pretesting of the questionnaire was conducted at the survey sites prior to the full-scale study to establish effectiveness of the behavioural questions.

Based on lessons learned from previous similar studies in Hargeisa, this study conducted FSW interviews at GF sub-recipient office (Badbado in Bossaso) and the Central laboratory in Mogadishu as opposed to private rented premises. Since the GF sub-recipients have been working with FSW were likely to be more comfortable to access these premises and this also minimizes suspicion from members of the public on the nature of activities. The study also rented private venues/premises next to truck stops and ports. The uniformed services team operated inside military bases/police stations. The research team sought permission and support from the Ministries of Interior and Ministries of Fisheries and Maritime. During the zonal TWG meetings, the research team created a sampling frame of all truck stops, ports and military and police bases. Administrative authorization from the respective ministries was sought prior to commencement of data collection. Each of the three study sites had four independent data collection sites for the respective study groups (FSW, truckers, uniformed personnel, and port workers). The data collection sites operated daily (except Fridays) during data collection with different operation time depending on the population group. The sites were temporarily closed daily during prayer times.

Table 2: GARPR indicators among key populations included in the Somalia IBBS

3.3	HIV prevalence among key populations
3.4	Knowledge of HIV status among key populations
3.6A	Condom use among sex workers
3.7	Coverage of HIV prevention programmes among key populations
3.8	Safe injecting practices among people who inject drugs
3.11	Active syphilis among sex workers
4.2	Avoidance of HIV services because of stigma and discrimination among key populations
5.1	Young people: Knowledge about HIV prevention





Successful completion of both behavioural and biological components of the survey consumed a significant amount of time – potentially up to 2.5 hours. All participants were compensated for their time and travel to the safe data collection site. Four dollars was paid upon successful completion of behavioural and biological interview process. However, it was not feasible to offer truckers in Mogadishu four dollars. Therefore the study team agreed to raise the amount to seven dollars per participating trucker in Mogadishu. Since success of RDS is dependent on referral of peers to data collection site by initial FSW seeds, three dollars was compensated for every successful referral among FSW team. The research team confirmed the local appropriateness of these incentives during the TWG consultative meetings in Mogadishu and Bossaso. In addition, participants received HIV/STI prevention messages from nurse counsellors and linkage to treatment (at Banadir hospital and Bossaso general hospital) in case one was HIV or syphilis positive.

Venue:

Coupon for participation in the Somalia IBBS survey

Please come with this coupon, and if you fulfil eligibility criteria for participation in research, our **female** staff will give you:

- Free information about HIV and STIs
- Money compensation of USD 4 for taking time and traveling to the venue to be interviewed and get an anonymous testing on HIV and Syphilis from blood.
- Results from all tests and counseling about possible treatments

This coupon won't be accepted if:

- it has expired
- participant has already participated in this survey

For more information, please call xxxxxx

Secondary participation compensation coupon

You will get incentive of USD 3 for each person you direct to the sur if she:

- is eligible to participate in the survey
- hasn't already participated in the survey
- has come before the expiry date of coupon
- has filled out the questionnaire
- has given blood sample for HIV and syphilis tests

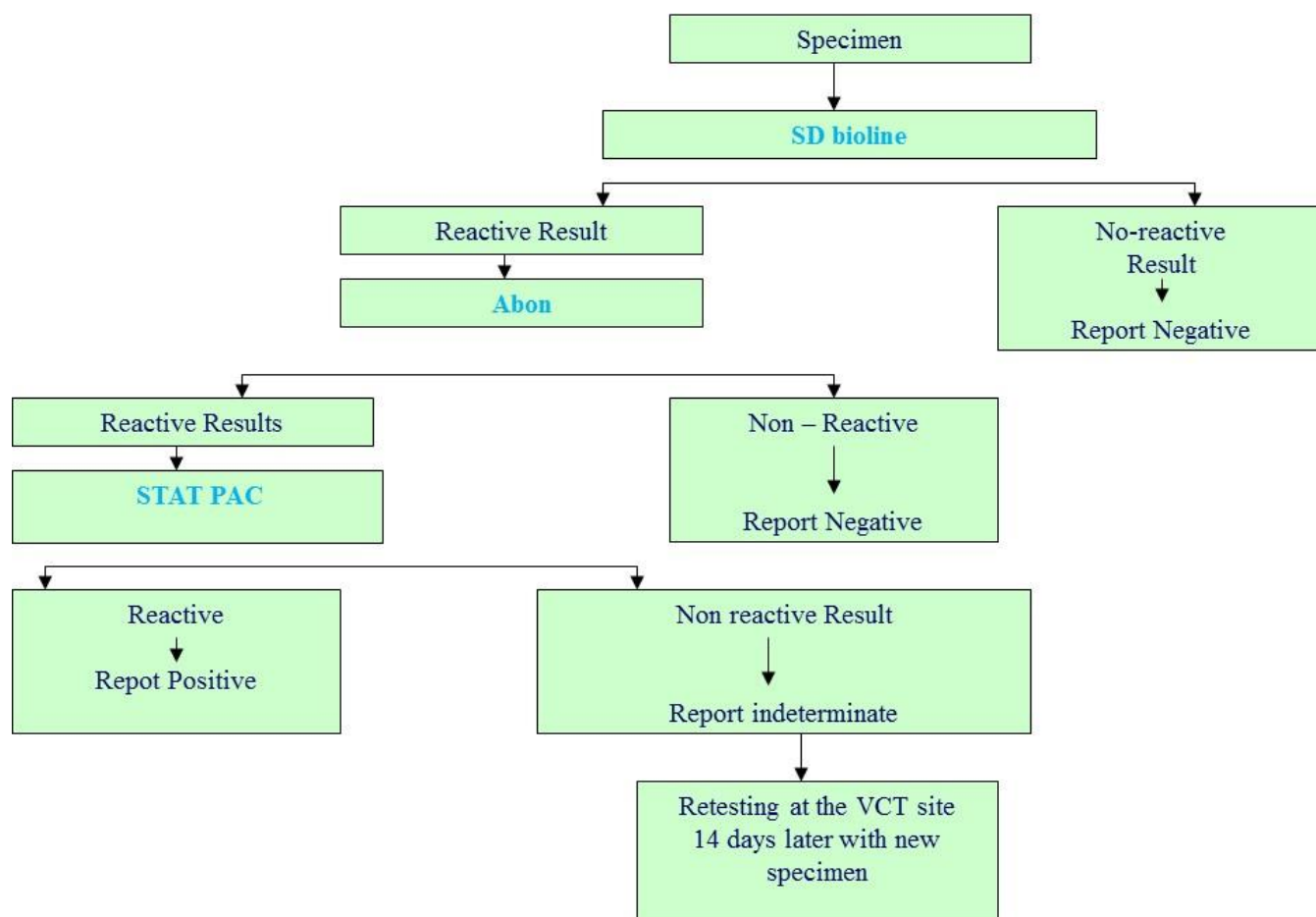
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Serological testing for HIV and syphilis followed the WHO approved testing strategy for Somalia. HIV rapid/point-of-care tests was conducted on site using capillary blood from a finger prick. Due to low prevalence of chlamydia (0.7%) and gonorrhoea (0.4%) (IOM, 2014) IBBS coupled with resource constraints, the stakeholders agreed to test for HIV and syphilis only.

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HIV rapid testing was conducted at the survey sites after completion of the behavioural questionnaire and pre-test counselling by nurse counsellors. Rapid testing was conducted using a serial testing scheme as outlined in the Somalia national algorithm and WHO approved rapid test kits. All participants who consented were tested using SD Bioline HIV rapid test kits. Non-reactive results were considered negative, and reactive results were confirmed with Abon HIV rapid test. A positive HIV test by Abon HIV test warranted a further test using Stat-Pack HIV test. Non-reactive results from Stat-Pack was considered indeterminate and the participant was told to re-test after 14 days. However, reactive results on Stat-Pack HIV test was considered positive. All participants received post-test counselling, with specific messages tailored to their test result including HIV prevention messages. Persons with any reactive result, or indeterminate result, were given referral to HIV care and treatment services and further counselling and testing at the VCT centres within Banadir hospital and Bossaso general hospitals. IBBS survey site supervisors followed up with collaborating general hospitals to ensure complete referrals.

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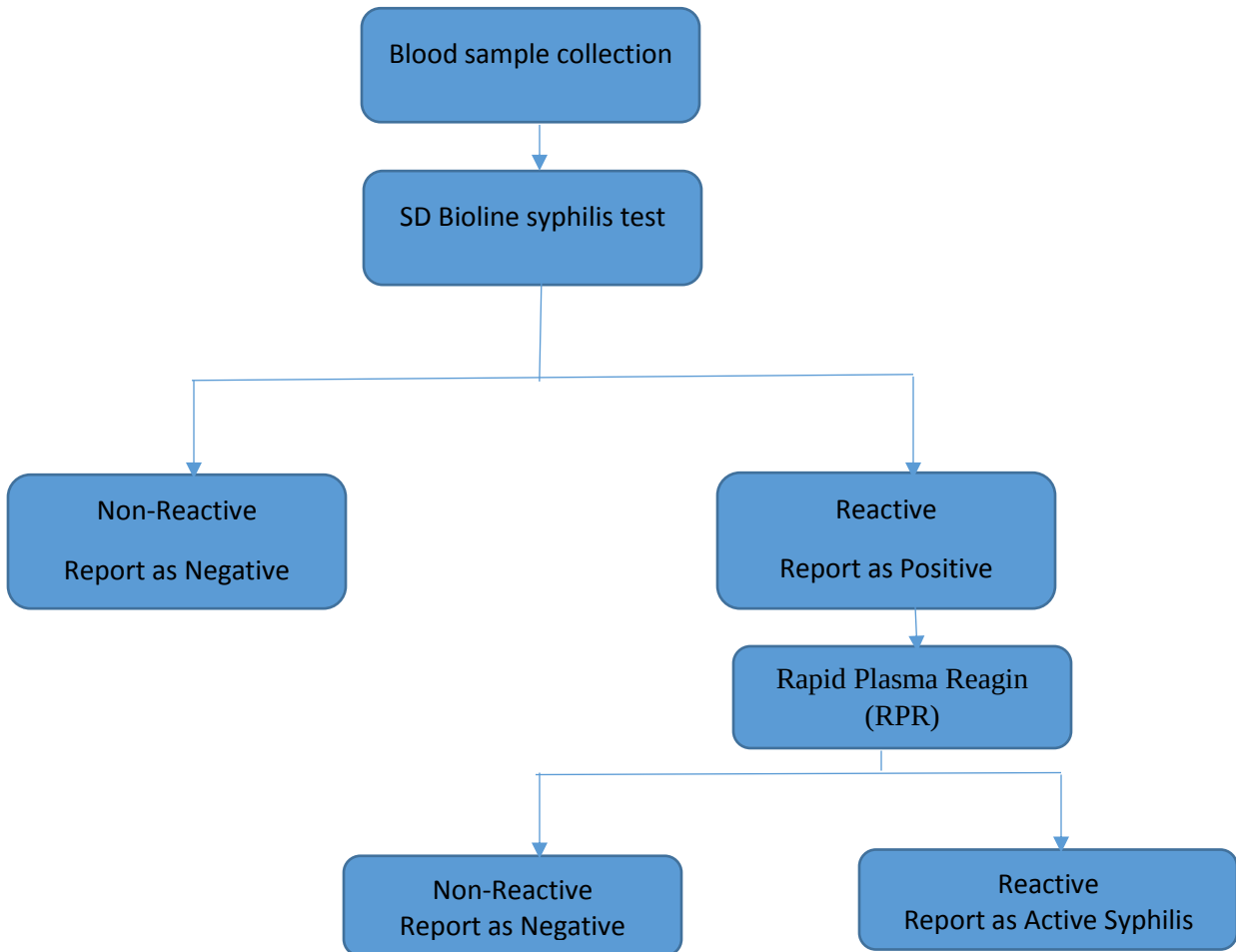


Source: WHO Somalia, 2017

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Testing for Syphilis adopted the WHO approved testing strategy for Somalia. On site testing of Syphilis was done using rapid SD Bioline Syphilis test kits. Non-reactive tests were reported as negative whereas respondents with reactive resulted were tested using a second test. For every reactive SD Bioline Syphilis test, a further test with non-treponemal Rapid Plasma Reagin (RPR) was conducted. The specimen for every 10th participant and also every positive rapid SD Bioline syphilis test was transported to the central laboratory for quality control purposes.

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For every 10th respondent, a venous blood draw of 3 ml of blood, distributed in two tubes: 1-2 ml EDTA tube for performing the on-site rapid HIV/Syphilis tests, and 2 ml serum separator tube (SST). The samples were centrifuged and the serum aliquoted for testing at central laboratory and Bossaso general hospital laboratory for quality control purposes. All samples sent to the aforementioned laboratories had a laboratory code that was linked to the participants' survey code. The samples sent for quality assessment were sent without test results. After the samples were tested, results were returned to the study site in order to establish the discrepancy rate. On-job supportive supervision and training was provided to the national laboratory and VCT nurses to prevent occurrence of testing errors. However, there was no discordance between the results.

2.14 Training of research field team

The field survey staff including the screeners, interviewers, nurse counsellors, coupon managers, outreach workers, site team leader, MOH and AIDS Commission focal persons and national consultants, participated in a one-week mandatory training on survey protocol and operational/implementation approach. The training covered the Somalia IBBS research protocol, data management, ethics, safety, human subjects, and confidentiality. Nurse counsellors were also required to participate in a two day WHO led refresher training on the national guidelines for HIV and Syphilis counselling, testing, and referral services.

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Analysis of RDS data was conducted to produce population prevalence estimates and confidence intervals of variables adjusting for unequal probabilities of inclusion due to varying social network sizes and the similarities in characteristics of persons within their social networks. This was done using RDS Analyst (RDSA). During data collection, analysis was done at mid-point to test for equilibrium. Specialized analyses within RDSA was used to adjust for social network size and homophily within networks, and was used to produce population point prevalence estimates and 95% confidence intervals of key variables, adjusting for unequal probabilities of inclusion. Data with weights was exported to STATA for analysis.

TLS data was analysed using STATA with commands for survey data that incorporate sampling weights and adjustments to standard errors for clustering on day-time sampling events. In both RDS and TLS data, the primary analysis was the adjusted population point estimates of prevalence of HIV infection, use of health care services, and of key risk behaviors (e.g., multiple/concurrent partners, drug/alcohol use), prevalence of condom use and access to health care and prevention programmes. Analysis focused on GARPR indicators. In both RDS and TLS, explanatory variables entered into the models included age, education, typology of key population, study site, sexual behaviours, marital status, knowledge of HIV, number of sexual partners, alcohol and drug use, STI symptoms, and exposure to an HIV/AIDS interventions and messaging. Multivariate analyses (logistic regression) using STATA version 12.0 version 20.0 was performed to identify correlates of HIV and STI risk behaviours also using sampling weights and adjustment for clustering. Variables in each model with a *P* value of 0.05 or less was considered statistically significant.

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This protocol was submitted for ethical review from the Federal Government of Somalia and Puntland MoH Ethical Review Committee/Board. Names or other identifying information of participants was not be used on the survey, survey forms, or on any lab specimens. All paper-based survey materials was stored in locked file cabinets, in locked offices. Participants were not asked for identification (such as national ID). Prior to interview, the interviewer read out loud the consent form to the participant and obtain informed verbal consent. The interviewers ensured the respondent has understood every part of the informed consent. Persons incapable of providing consent or under the influence of alcohol or drugs were excluded from the study. All electronic data files were password protected and only accessible to authorized IBBS personnel. RDS participants were compensated for their time and travel to a safe data collection site. All staff participating in this Somalia IBBS were required to sign an employee confidentiality agreement after training (*Appendix 5*). Participants in this IBBS benefited from counselling and testing for HIV and syphilis, referral for HIV/syphilis care and treatment services (those testing positive for syphilis or HIV), and free health promotion and prevention messages delivered by nurse counsellors.

3. RESULTS

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A total of 287 FSWs were recruited. Eight initial seeds were purposely recruited through contacts with staff working at Banadir hospital MCH and Global Fund sub-recipients working in Mogadishu. The seeds were recruited to represent diverse characteristics including varied age and originating from different parts of Mogadishu.

3.1.0 Response rate and eligibility

Out of 491 coupons distributed, 63.5% were returned by FSW at data collection site. Few (4.5%) FSW refused to accept coupons from the coupon manager citing fear of being identified as a FSW in case she went out to recruit other FSW. Among the 8% of FSW who were ineligible to participate in the survey, 88% were not FSW as shown in Table 3.

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Characteristic	Sample proportions	
	n/N	%
Coupons distributed	491	-
Coupons returned	312/491	63.5
FSW who rejected coupons	13/287	4.5
Reasons for coupon rejection / refusal to accept coupon (at data collection site)		
Fear of being identified as a FSW	13/13	100
Participants ineligible	25/312	8.0
Reasons for ineligibility		
Not FSW	22/25	88.0
Under 18 years	3/25	12.0

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The recruitment tree for FSW in Mogadishu is illustrated in Figure 7 below. This tree indicates eight FSW seeds and the accompanying recruitment chains. The maximum number of waves reached from one seed is seven as shown in figure 8. While seed seven and eight had the least recruits, seed three had the highest number of recruits as shown in figure 7.

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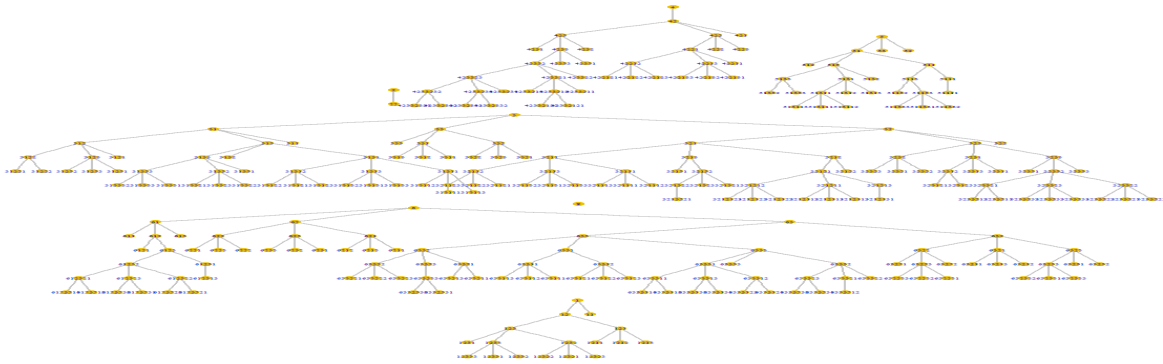


Figure 8: Mogadishu FSW recruits per seed

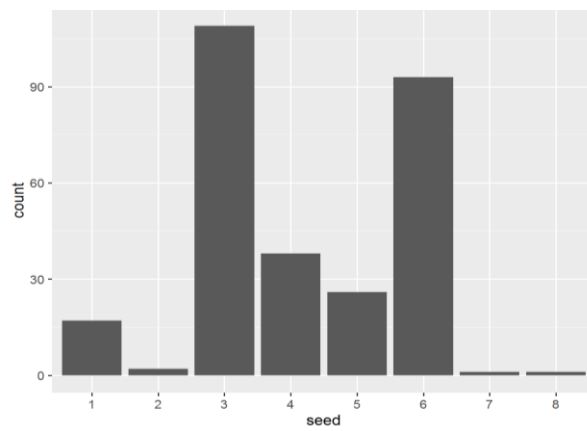
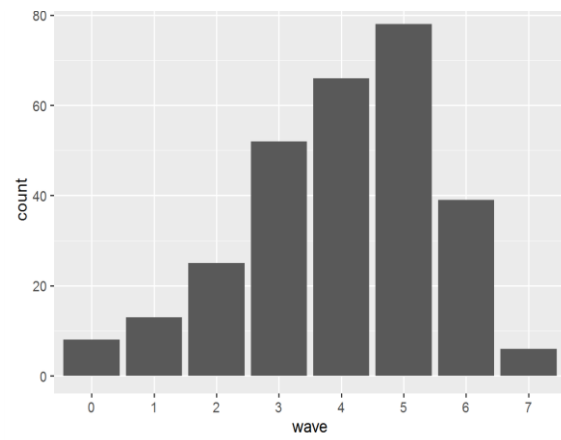


Figure 9: Mogadishu FSW recruits per wave



Convergence was reached on all five key indicators as shown in figure 10. The five key GARPR indicators tested to establish convergence comprised HIV prevalence, syphilis prevalence, knowledge on HIV, condom use at last transactional sexual intercourse, and coverage of HIV prevention programmes.



The average age of FSW in Mogadishu is 29.8 years with the majority of FSW aged 25 to 34 years. Whereas all FSW were of Somali nationality, four respondents were born in Ethiopia and Puntland. The majority of FSW (86.8%) have no education. Nearly all FSW (95.5%) have been living in Mogadishu for more than 2 years. Most of FSW are divorced and more than two thirds living with children. Besides sex work, 17.1% of FSW earn money doing other work such as domestic work, cleaning, hotel work, and tea selling. However, more than half of FSW (65.1%) earn USD 100 or less per month as shown below in Table 4. Finally, all FSW are circumcised.

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Age	Range = 18-52 Mean±SD = 29.8±6.9 Median = 28		29.8±6.8 29	
	<25 Yrs 59/287	20.6	20.5	15.5 – 25.4
	25+ Yrs 228/287	79.4	79.5	74.6 – 83.4
	18 – 24 59/287	20.6	20.5	15.5 – 25.4
	25 – 34 143/287	49.8	50.6	44.4 – 56.7
	35 – 44 73/287	25.4	24.7	19.8 – 29.6
	>=45 12/287	4.2	4.3	1.8 – 6.8
Level of education	None 247/287	86.1	86.8	83.2 – 90.5
	Primary 31/287	10.8	10.1	6.7 – 13.4
	Secondary 8/287	2.8	2.9	0.8 – 4.9
	University 1/287	0.3	0.2	0 – 0.5
Nationality	Somalia 287/287	100	100	-
Place of birth	Ethiopia 1/287	0.3	0.6	0 – 1.5
	Puntland 3/287	1.0	0.6	0 – 1.2
	Somaliland 5/287	1.7	1.4	0.1 – 2.8
	South Central Somalia 277/287	96.5	96.9	95.2 – 98.6
	Other 1/287	0.3	0.3	0 – 0.8
Length of stay in Mogadishu	2 – 3 Months 1/287	0.3	0.2	0 – 0.5
	4 – 6 Months 3/287	1.0	1.2	0 – 2.6
	7 – 11 Months 4/287	1.4	1.3	0.1 – 2.5
	1 – 2 Years 5/287	1.7	1.6	0.3 – 2.9
	More than 2 Years 274/287	95.5	95.5	93.4 – 97.7
Marital status	Divorced 230/287	80.1	82.0	78.2 – 85.7
	Married 4/287	1.4	1.6	0.1 – 3.1
	Separated 6/287	2.1	2.3	0.6 – 3.9
	Single 11/287	3.8	3.3	1.5 – 5.1
	Widowed 36/287	12.5	10.9	7.7 – 14.1
Proportion of married FSW whose spouse/partner has another wife or wives	2/4	50.0	58.5	17.1 – 62.9
Person the FSW is currently living with	Children 190/287	66.2	68.0	62.3 – 73.7
	Roommate 4/287	1.4	1.2	0.4 – 2.1
	Alone 67/287	23.3	21.2	16.7 – 25.5
	Other Family 11/287	3.8	3.6	1.4 – 5.9
	Siblings 4/287	1.4	1.7	0.1 – 3.4
	Parents 9/287	3.1	2.5	1.1 – 3.9
	Other 2/287	0.7	0.9	0 – 2.1
Proportion of FSW who currently earn money doing work other than sex work	47/287	16.4	17.1	12.9 – 21.2

Type of other work currently done (multiple answers possible)	Tea Seller	2/47	4.3	4.3	3.3 – 5.2
	Hotel Worker	10/47	21.3	22.7	8.9 – 37.1
	Cleaning Shops	4/47	8.5	8.6	2.1 – 15.2
	Domestic Worker	33/47	70.2	71.4	44.4 – 99.2
	Trader	1/47	2.1	0.7	0 – 0.7
	Manual labourer	1/47	2.1	1.6	0 – 5.6
Overall monthly household income (in USD)	Range = 10 – 450 Mean = 91.6±70.8 Median = 60			96.2±71.0 80	
	100 or less	197/287	68.6	65.1	59.0 – 71.1
	More than 100	90/287	31.4	34.9	28.9 – 41.0
Number of people she is currently supporting	Mean = 3.2±2.7 Median = 3				
	0	2/287	0.7	0.8	0 – 1.9
	1 – 5	181/287	63.1	61.0	55.3 – 66.7
	6 – 10	102/287	35.5	37.0	31.5 – 42.5
	More than 10	2/287	0.7	1.2	0 – 2.8
Undergone circumcision		286/286	100	100	-

STI in the 12 months prior to this study. In addition, although one third (33.0%) of FSW have had an abnormal discharge from their vagina in the past 12 months, only two thirds (65.9%) sought STI treatment. Similarly, of the 7.6% of FSW who have had a sore or ulcer in the genital area in the past 12 months, only about half of them (55.6%) have sought treatment for it, as shown in Table 6.

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Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Proportion who have ever heard of HIV/AIDS	282/287	98.3	98.6	97.4 – 99.9
Proportion who have heard about other infections that can be transmitted through sex	206/287	71.8	71.8	66.4 – 77.2
Proportion of FSW who know at least one symptom of a sexually transmitted infection (among those who know of sexually transmitted infections)	184/206	89.3	86.2	80.7 – 91.1
Proportion of FSW tested for sexually transmitted infections in the past three months	98/286	34.3	36.4	32.8 – 40.0
Proportion of FSW diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	53/287	18.5	19.1	15.0 – 23.2
Proportion of FSW who have had an abnormal discharge from their vagina in the past 12 months	92/284	32.4	33.0	28.2 – 37.8
Proportion of FSW who had an abnormal discharge from their vagina in the past 12 months and sought treatment	61/92	66.3	65.9	53.2 – 78.6
Type of treatment received for abnormal discharge in the past 12 months among FSW who sought treatment (<i>multiple answers possible</i>)	Injection 21/61	34.4	34.3	22.5 – 46.2
	Tablets 50/61	82.0	82.0	72.2 – 91.7
	Cream 5/61	8.2	8.0	2.6 – 13.4
Reasons for not seeking treatment for abnormal discharge in the past 12 months among FSW who did not seek treatment (<i>multiple answers possible</i>)	Didn't know where to go 11/32	35.5	38.4	14.0 – 64.6
	Didn't think I needed it 3/32	9.7	8.9	5.4 – 12.3
	Unable to get transport 3/32	9.7	9.3	5.1 – 13.0
	Could not afford 16/32	51.6	47.2	20.5 – 72.2
	Other 1/32	3.2	3.2	1.5 – 5.2
Proportion of FSW who have had a sore or ulcer in the genital area in the past 12 months	23/278	8.3	7.6	0.5 – 10.6
Proportion of FSW who had a sore or ulcer in the genital area in the past 12 months and sought treatment	13/23	56.5	55.6	21.6 – 89.4
Type of treatment received for sore or ulcer in the genital area the past 12 months among FSW who sought treatment (<i>multiple answers possible</i>)	Tablets 9/13	69.2	68.0	52.9 – 83.3
	Injection 3/13	23.1	22.7	9.9 – 35.4
	Cream 2/13	15.4	16.9	16.0 – 16.9
Reasons for not seeking treatment for sore or ulcer in the genital area in the past 12 months among FSW who did not seek treatment (<i>multiple answers possible</i>)	Didn't think I needed it 1/10	10.0	10.3	10.0 – 10.3
	Didn't know where to go 5/10	50.0	45.7	44.6 – 45.7
	Couldn't afford treatment 2/10	20.0	9.5	6.8 – 9.5
	Other 1/10	10.0	10.3	10.0 – 10.3
	Don't know 2/10	20.0	29.0	29.0 – 31.0

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4.2.7A A A n A f A WA A A

There is varied knowledge among FSW regarding specific indicators of knowledge on HIV prevention and transmission. For instance, the majority of FSW (80.8%) know that a healthy looking person can have HIV and AIDS whereas only 24.1% know that one cannot get HIV from mosquito bites. Importantly, only 8.2% can correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission. Although most FSW (89.2%) know HIV can be transmitted from mother to her baby by breastfeeding, only 29.3% know that antiretroviral treatment during pregnancy can reduce the risk of HIV transmission from HIV-positive mother to the child, as shown in Table 7.

Table 7: Knowledge on transmission of HIV and STI

Characteristic	Response	Sample proportions		Population Estimates	
		n/N	%	%	95% Confidence Interval
Risk of HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners	Yes	217/287	75.6	76.0	71.0 – 80.8
People can reduce their chance of getting HIV and STI by using a condom every time they have sex	Yes	147/287	51.2	51.5	46.3 – 56.7
It is possible for a healthy-looking person to have HIV/AIDS	Yes	227/287	79.1	80.8	76.9 – 84.8
People can get HIV from mosquito bites	No	66/287	23.0	24.1	19.0 – 29.3
People can get HIV by sharing food with a person who has HIV/AIDS	No	135/287	47.0	46.3	40.7 – 51.7
Have heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer	Yes	128/287	43.2	40.8	35.1 – 46.6
HIV can be transmitted from mother to her baby during pregnancy	Yes	201/287	70.0	71.1	66.1 – 76.1
HIV can be transmitted from mother to her baby during delivery	Yes	199/287	69.3	69.9	64.7 – 75.2
HIV can be transmitted from mother to her baby by breastfeeding	Yes	255/287	88.9	89.2	85.9 – 92.5
There are special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby	Yes	87/287	30.3	29.3	24.2 – 34.4
GARPR 3.4: Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	Yes	18/287	6.3	8.2	4.5 – 12.1

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4.2.9A A y A A

The first time FSW in Mogadishu had vaginal sex, they were on average 16.3 years old. In fact, a significant majority (77.3%) were younger than 18 years of age at first vaginal sex. Few (11.0%) FSW have also had anal sex. The average age at which most FSW first received money, a gift (like Khat) or favour in exchange of sexual intercourse is 23.4 years. Most of the FSW meet their new transactional clients and engage in sex in their own homes. One fifth (20.2%) of FSW work through pimps, who in most cases take one third (61.2%) of the money FSW earn by selling sex, as shown in Table 8 below.

c 9.A A y A A

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Age at first vaginal sex.	Range = 10 – 43 Mean = 16.4 Median = 15 SD = 4.4		Mean = 16.3 Median = 15 SD = 4.1	
	< 18yrs 224/287	78.0	77.3	72.7 – 82.0
	18 – 24 yrs 49/287	17.1	16.6	12.3 – 20.8
	25 or more 14/287	4.9	6.0	3.1 – 9.1
Had anal sex	27/287	9.4	11.0	6.8 – 15.3
Age at first anal sex.	Range = 13 – 31 Mean±SD = 20.0±5.0 Median = 19			
	<25yrs 22/27	81.5	87.0	61.1 – 92.1
	25+ yrs 5/27	18.5	13.0	0 – 29.9
Age at which she first received money, a gift (like Khat) or favour in exchange of sexual intercourse.	Range = 12 – 46 Mean±SD = 23.4±6.6 Median = 22.0		23.4±6.5 22.0	
	< 18yrs 50/287	17.4	17.7	13.3 – 22.1
	18 – 24 yrs 120/287	41.8	42.3	37.0 – 47.6
	25 or more 117/287	40.8	40.1	35.1 – 45.0
Reasons that led to exchange sex for money the first time (multiple answers possible)	Orphan 11/287	3.8	4.0	1.7 – 6.2
	Didn't have other job 155/287	54.0	52.8	47.0 – 58.5
	Grew up around people doing sex work 10/287	3.5	2.6	1.1 – 4.1
	I like it or for pleasure 3/287	1.0	1.0	0 – 2.4
	Abandoned by Husband 3/287	1.0	0.6	0 – 1.2
	Abandoned by parents or siblings 4/287	1.4	1.0	0.2 – 1.8
	Encouraged by Friends 7/287	2.4	2.2	1.0 – 3.5
	Pays well 1/287	0.3	0.3	0 – 0.7
	I needed money 115/287	40.5	41.8	36.7 – 46.8
	Other 1/287	0.3	0.3	0 – 0.8
Total number of different sexual partners who she had sexual intercourse with in the past one month	Range = 1 – 60 Mean = 11.6±9.6 Median = 8.0			
	<5 57/287	19.9	18.2	14.1 – 22.4

	5 – 10	131/287	45.6	47.5	41.7 – 53.2
	11 – 20	60/287	20.9	21.2	16.5 – 26.0
	More than 20	39/287	13.6	13.1	9.3 – 16.8
Where most new transactional sex clients are met	At client's home	34/287	11.8	12.9	8.6 – 17.3
	At FSW's home	161/287	56.1	54.9	49.0 – 60.8
	Beach	4/287	1.4	1.0	0 – 2.2
	Hotel or restaurant	12/287	4.2	4.8	2.0 – 7.5
	They call me	71/287	24.7	24.9	19.8 – 30.1
	Through pimps or dalals	5/287	1.7	1.4	0.2 – 2.5
Place where FSW and client engage in transactional sex	At FSW home she shares with her family	171/287	59.6	58.8	53.6 – 64.1
	At FSW home she shares with other women				
	exchanging sex	37/281	12.9	12.3	8.7 – 15.9
	Hotel or restaurant	11/287	3.8	4.7	2.2 – 7.2
	Khat shop	1/287	0.3	0.3	0 – 0.8
	Car or Vehicle	1/287	0.3	0.3	0 – 0.8
	The clients house	66/287	23.0	23.5	18.9 – 28.2
Working through a pimp		61/287	21.3	20.2	15.8 – 24.7
Sharing the money earned from sexual transaction with the pimp		51/60	85.0	84.3	70.4 – 98.0
Amount shared/given out to the other person	One third	32/50	64.0	61.2	46.4 – 75.0
	Half	14/50	28.0	30.5	18.1 – 44.3
	Two thirds	2/50	4.0	5.6	0 – 16.1
	More than two thirds	2/50	4.0	2.6	1.3 – 3.0

4.2.9A y A A A A

A quarter (23.1%) of FSW used a male condom at their last sexual intercourse with a client, and in most cases (57.3%) it was the clients suggesting condom use. Importantly, only 12.3% of FSW have used condoms consistently in the past 30 days, with as much as 67.3% having never used condoms with clients in the past 30 days. Most FSW who did not use a condom at last sex with a client did so because they do not like condoms. On the last day they worked, FSW on average sold sex to 2 to 3 clients, earning an average of USD 6.4 for last sexual intercourse with a client, as shown in Table 9.

c A.A y A A A A

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
GARPR 3.6A: Proportion who used a condom at last sexual intercourse with a client	64/287	22.3	23.1	18.3 – 27.8	
Type of condom used	Male Condom	64/64	100	100	
Person who suggested condom use at last sexual intercourse	Client	39/64	60.9	39.9 – 73.8	
	FSW	25/64	39.1	26.2 – 60.1	
Reason for not using a condom at last sexual intercourse	Used other contraceptive	1/223	0.4	0 – 0.7	
	We didn't have	28/223	12.6	8.8 – 17.2	
	I don't like them	113/223	49.8	42.0 – 55.2	
	Client objected	2/223	0.9	0 – 1.5	

	Didn't think I was necessary 17/223 Didn't think of it 24/223 Didn't know where to buy 6/223 Condoms transmit HIV 24/223 Too expensive 1/223 Don't know 9/223	7.3 10.3 2.6 10.3 0.4 4.0	9.2 9.7 3.4 10.9 0.8 3.9	4.7 – 13.8 6.1 – 13.1 1.0 – 5.8 7.0 – 14.8 0 – 2.1 1.7 – 6.1
Consistent condom use with clients during the last 30 days (1 month)	Every time 36/287 Almost every time 19/287 Sometimes 38/287 Never 181/287	13.1 6.6 13.9 66.1	12.3 6.4 13.9 67.3	8.5 – 16.1 3.8 – 9.1 9.5 – 18.4 62.2 – 72.4
Number of clients on the last day worked	Range = 1 – 12 Mean = 2.5±1.3 Median = 2.0 1 52/287 2 119/287 3 71/287 4 or more 45/287	 18.1 41.5 24.7 15.7	2.5±1.5 2.0 17.4 43.4 24.7 14.5	 13.3 – 21.5 37.5 – 49.4 19.6 – 29.7 11.1 – 17.9
Amount of money received for last sexual intercourse with a client (in USD)	Range = 0 – 50 Mean = 6.5±5.4 Median = 5.0 0 1/287 1 – 5 162/287 6 – 10 94/287 11 – 20 27/287 More than 20 4/287	 0.3 56.1 32.8 9.4 1.4	6.4±5.8 5.0 0.3 57.3 30.7 10.2 1.4	 0 – 0.8 51.9 – 62.8 26.0 – 35.4 6.4 – 14.1 0.5 – 2.4
Typical occupations of clients (multiple answers possible)	Businessman 33/287 Truck Driver 68/287 Government worker 6/287 Fishermen 4/287 Police 10/287 Port worker 10/287 Tea client 3/287 Khat client 10/287 Unemployed 2/287 Khat Seller 78/287 Humanitarian worker 1/287 Military 7/287 Manual labourer 7/287 Don't know 34/287	11.5 23.7 2.1 1.4 3.5 3.5 1.0 3.5 0.7 27.2 0.3 2.4 30.3 11.8	11.5 22.4 2.1 1.2 2.9 3.2 1.2 3.5 0.8 28.3 0.1 2.0 30.8 13.0	7.8 – 15.1 17.9 – 26.9 0.4 – 3.8 0 – 2.5 1.2 – 4.7 1.4 – 4.9 0 – 2.5 1.5 – 5.6 0 – 1.8 23.6 – 33.1 0 – 0.2 0.8 – 3.3 25.3 – 36.4 9.2 – 16.9
Most common occupation among clients	Businessman 31/287 Fishermen or seafarer 1/287 Government worker 3/287 Khat client 9/287 Khat seller 56/287 Military 2/287 NGO Worker 1/287 Police 4/287 Port worker 5/287 Tea client 3/287	12.8 0.3 1.0 3.1 19.5 0.6 0.3 1.4 1.7 1.0	9.4 0.6 1.1 3.1 20.4 0.6 0.1 1.6 1.5 1.3	6.4 – 12.4 0 – 1.4 0 – 2.3 1.3 – 4.9 16.1 – 24.7 0 – 1.2 0 – 0.2 0 – 3.2 0.4 – 2.6 0.1 – 2.4

	Truck driver	49/287	17.1	17.6	20.1 – 30.2
	Manual labourer	78/287	27.2	25.1	13.3 – 21.9
	Unemployed	1/287	0.3	0.3	0 – 0.9
	Don't know	44/287	15.3	15.2	11.1 – 19.3

4.2.1.4 Sexual intercourse with a non-paying partner

About half of FSW (55.3%) in Mogadishu had a sexual intercourse in the last 30 days with a non-paying partner. As with condom use with transactional clients (23.1%), condom use with non-paying partners is as well low, with only 24.7% having used a condom at last sexual intercourse with a non-paying partner in the last 30 days. Furthermore, among those who have used a condom at last sex with a non-paying partner in most cases it was not the FSW, but the partner who suggested condom use, as shown in Table 10.

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Had sexual intercourse with a non-paying partner over the last 30 days (1 month)	152/287	53.0	55.3	49.0 – 61.4
Number of sexual intercourses with non-paying partners over the last 30 days (1 month) (among those who had a non-paying partner in the last 30 days)	Range = 1 – 20 Mean = 4.4±3.6 Median = 3.0 1 20/152 2 – 5 102/152 More than 5 30/152	 13.2 67.1 19.7	 12.2 67.2 20.7	 0 – 17.1 59.2 – 75.1 13.9 – 27.7
Condom use during last non-paying/non-transactional sexual intercourse with partner (among those who had a non-paying partner in the last 30 days)	36/151	23.8	24.7	17.8 – 31.6
Person who suggested condom use during last non-paying/non-transactional sexual intercourse with partner (among those who had a non-paying partner in the last 30 days)	Partner 26/36 FSW 10/36	72.2 27.8	76.7 23.3	66.6 – 89.1 11.0 – 33.5
Reason for not using condom during last non-transactional sexual intercourse (among those who had a non-paying partner in the last 30 days)	Didn't think it was necessary 11/126 Didn't think of it 18/126 Didn't know where to buy one 3/126 Don't like them 57/126 Condoms transmit HIV 5/126 Too expensive 1/126 Used other contraceptives 3/126 We did not have one with us 21/126 Other 5/126	 8.7 14.3 2.4 45.2 4.0 0.8 2.4 16.7 4.0	 8.8 15.5 1.8 46.5 3.4 0.7 3.3 15.6 3.5	 3.6 – 13.8 9.6 – 21.5 0 – 3.9 34.3 – 59.0 0.2 – 6.5 0 – 2.3 2.9 – 3.9 9.7 – 21.1 0.3 – 6.6

	Don't know	2/126	1.6	1.0	0 – 2.3
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4.2.2.1 Awareness of male condoms

Although the majority of FSW (91.6%) in Mogadishu had heard of or seen a male condom, among them, only nearly one third (32.4%) had ever used it. A pharmacy is the most preferred (58.4%) ideal place to obtain male condoms. Even though 14.9% of FSW had received counselling on condom use three months prior to this survey, only 4.6% had received condoms (e.g. through an outreach service, hospital, VCT centre, TB centers, NGO, Pharmacy, FP clinic, MCH) in the past 3 months. Most FSW (86.3%) perceive male condoms to be affordable as shown in Table 11

4.2.2.2 Awareness of where to obtain male condoms

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
Ever heard of a male condom before today	261/287	90.9	91.6	88.6 – 94.6	
Ever used a male condom	86/261	33.0	32.4	27.3 – 37.5	
Knows place or person where to obtain male condoms	131/261	50.2	51.7	46.6 – 56.9	
Places or persons do you know where she can obtain male condoms (multiple answers possible)	Pharmacy	115/131	87.8	85.0	76.7 – 92.4
	Private hospital or clinic	1/131	0.8	1.3	0.8 – 1.8
	Public hospital	8/131	6.1	8.3	4.0 – 13.2
	MCH Centre	5/131	3.8	4.5	1.1 – 8.0
	Friend	4/131	3.1	3.8	0.5 – 7.2
	Clients	6/131	4.6	5.0	1.5 – 8.5
	Local NGO	1/131	0.8	0.7	0.5 – 0.9
	Shop	1/131	0.8	0.7	0 – 1.7
Ideal place to obtain male condoms	Client	16/168	9.5	8.0	0.3 – 12.3
	Friend	11/168	6.5	7.5	3.5 – 11.7
	MCH centre	7/168	4.2	7.0	2.7 – 12.3
	Other sex worker	1/168	0.6	0.5	0.4 – 0.7
	Pharmacy	101/168	60.1	58.4	51.4 – 65.2
	Private hospital/clinic	5/168	3.0	3.8	0 – 7.8
	Public hospital	20/168	11.9	12.7	8.5 – 17.1
	Shop	6/168	3.6	3.0	0 – 6.4
Usually carry condoms with her	60/258	23.3	23.3	18.7 – 28.0	
Received condoms (e.g. through an outreach service, hospital, VCT centre, TB centers, NGO, Pharmacy, FP clinic, MCH) in the past 3 months	9/255	3.5	4.6	1.7 – 7.5	
Received counselling on condom use and safe sex in the past 3 months	32/251	12.7	14.9	10.1 – 19.7	
Person who usually supplies the condoms	Client	57/260	21.9	22.2	17.1 – 27.3
	I never use a condom	177/260	68.1	68.4	62.9 – 73.9
	FSW	26/260	10.0	9.4	6.1 – 12.7
Affordability of male condoms	Affordable	126/261	48.3	48.9	42.9 – 54.9
	Somewhat affordable	16/261	6.1	6.0	3.5 – 8.5
	Not affordable	5/261	1.9	1.7	0 – 3.7

	Don't know	114/261	43.7	43.4	37.8 – 48.9
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4.2.22 Awareness of female condoms

Generally, much fewer FSW in Mogadishu have ever seen, heard or used a female condom compared to the male condom. Among those who have (28.3%), only about a quarter (25.8%) know where to obtain them and only 15.1% had ever used it, as shown in Table 12.

Table 12. Awareness of female condoms

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Ever heard of a female condom before today	80/287	27.9	28.3	22.9 – 33.7
Ever used a female condom	11/80	13.8	15.1	4.9 – 25.5
Knows place or person where to obtain female condoms	21/80	26.2	25.8	15.6 – 36.0
Places or persons do you know where she can obtain female condoms (multiple answers possible)	Friend	1/21	4.8	0 – 29.5
	Shop	2/21	9.5	5.3 – 13.1
	MCH center	1/21	4.8	1.6 – 4.3
	Pharmacy	16/21	76.2	51.2 – 88.6
	Local NGO	1/21	4.8	1.4 – 4.5
	Public Hospital	3/21	14.3	5.1 – 36.6

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4.2.23 Average FSW network size

Using successive sampling-population size estimation (SS-PSE) method, the network size information of individual FSW participants was entered into RDS Analyst to generate measures of central tendency to represent population size estimates. Therefore, the mean, median and mode FSW population estimate in Mogadishu is 706, 610, and 512 respectively. Although the findings of size estimation using SS-PSE are higher, this closely approximates population size estimates generated in 2016 indicating 963 as the average FSW estimate in Mogadishu (IOM, 2016). However, when using wisdom of crowds method, much lower estimates were generated. The mean FSW estimate in Mogadishu using wisdom of crowds method is 8.7 with a standard deviation of 15.9 while ranging from 1 to 200 FSW. When asked by the coupon manager regarding their FSW network size, the average number of FSW they knew by name and knew them to have had sex in the last 12 months in exchange for money, gifts or favour was 5.1 FSW, while the minimum was 1 and maximum was 50 FSW.

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4.2.24A WA A A Aw A fA WA w A

Very few (21.9%) FSW in Mogadishu know where to go for an HIV test, and even fewer (11.6%) know their HIV status from an HIV test. Overall, 36.9% of FSW in Mogadishu avoid HIV services most often because of stigma and discrimination, as shown in Table 13.

Table 13: HIV testing history and avoidance of HIV services

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Knows where to go for a confidential HIV test	63/287	22.0	21.9	16.5 – 27.2
Known places where one can get tested for HIV (multiple answers possible)	Government hospital	34/63	54.0	37.0 – 65.2
	MCH Centre	9/63	14.3	0 – 40.3
	Pharmacy	1/63	1.6	0 – 3.7
	Government TB Centre	2/63	3.2	3.1 – 9.0
	Government VCT	7/63	11.1	0 – 31.8
	Mobile counselling	6/63	9.5	6.0 – 27.3
	Private facility	18/63	28.6	19.1 – 42.3
	NGO	2/63	3.2	0 – 10.4
Knows her HIV status from an HIV test	35/287	12.2	11.6	8.2 – 15.1
When last tested for HIV	Less than 6 months	25/35	71.4	56.7 – 85.2
	6 – 12 Months	4/35	11.4	4.2 – 17.2
	More than 12 months	6/35	17.1	7.7 – 28.9
HIV test result at last HIV test	Positive	3/35	8.6	0 – 10.0
	Negative	32/35	91.4	90.0 – 94.9
Voluntarily had the HIV test, or was required to have the test	Required	12/35	34.3	22.2 – 55.3
	Voluntary	23/35	65.7	44.7 – 77.8
Proportion who revealed to the health provider that they sell sex during their most recent HIV counselling/testing	12/35	34.3	37.2	22.3 – 53.3
Reasons for having never sought for an HIV test	Fear/concern about violence	33/252	13.1	9.3 – 17.1
	Fear/concern about stigma	61/252	24.3	18.9 – 29.4
	I don't know where to go for HIV test	66/252	26.3	20.2 – 31.6
	Fear/concern about police harassment	9/252	3.6	1.2 – 5.9
	Other	43/252	17.1	12.4 – 24.0
	Don't know	39/252	15.5	10.4 – 19.7
GARPR 4.2: Avoidance of HIV services because of stigma and discrimination among key populations	103/287	35.9	36.9	31.2 – 42.6

3.1.14 Stigma and discrimination related to HIV and AIDS

FSW in Mogadishu experience varied forms of stigma and discrimination. Many FSW (41.6%) experience verbal insults directed at them because someone believed they sell sex to men. In addition, 13.1% and 13.5% of FSW in Mogadishu have been refused employment and police assistance respectively due to their sexwork as shown in Table 14.

Table 14: Stigma and discrimination related to HIV and AIDS

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
Have been refused health care in the past 12 months because someone believed they sell sex to men	18/287	6.3	7.3	6.1 – 8.4	
Have been refused employment in the past 12 months because someone believed they sell sex to men	34/287	11.8	13.1	9.6 – 16.6	
Have been refused attend prayers at the mosque in the past 12 months because someone believed they sell sex to men	14/287	4.9	7.0	5.7 – 8.3	
Have been refused housing in the past 12 months because someone believed they sell sex to men	36/287	12.5	12.9	8.7 – 17.2	
Have been refused police assistance in the past 12 months because someone believed they sell sex to men	38/287	13.2	13.5	9.0 – 17.9	
Have had verbal insults directed at her in the past 12 months because someone believed she sell sex to men	111/287	38.7	41.6	36.9 – 46.4	
Person who last directed a verbal insult at her	Client	9/111	3.1	8.2	3.6 – 12.9
	Don't know the person	26/111	9.1	22.5	14.1 – 30.8
	Family or relative	12/111	4.2	9.1	4.1 – 13.5
	Other sex worker	3/111	1.0	1.2	0 – 1.9
	Police	3/111	1.0	3.7	0.5 – 7.1
	Social acquaintance	19/111	6.6	16.0	10.3 – 21.4
	Neighbour	39/111	13.6	39.3	30.3 – 49.5

3.1.15 Physical and Sexual violence in the previous year

Many FSW (25.3%) in Mogadishu have been hit, kicked, or beaten because someone believed they sell sex to men. This has mainly been perpetrated by male clients (53.2%). In addition, 26.8% of FSW have been physically forced to have sexual intercourse against their will, again mostly by their clients (90.1%). However, among those who have been raped, only slightly over one third (40.1%) have sought medical treatment and only 27.6% reported the cases to police. In addition, many FSW have also experienced other forms of violence from their partners and clients, in particular, they have been threatened into having a sexual intercourse (36.7%), threatened with a weapon (32.6%), slapped (32.9%), and pushed or shoved (26.7%), as shown in Table 15.

Table 15: Physical and Sexual violence

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Have been hit, kicked, or beaten in the past 12 months because someone believed they sell sex to men	73/285	25.6	25.3	21.1 – 29.4
Person who last hit, kicked, or beat her	Client 36/72 Family or relative 3/72 Other sex worker 2/72 Don't know the person 13/72 Police 2/72 Other 8/72	50.0 4.2 2.8 18.1 2.8 11.1	53.2 3.8 2.8 14.4 5.1 10.3	40.4 – 67.2 2.7 – 4.7 0 – 7.0 5.9 – 21.4 0.6 – 10.3 0 – 21.8
A client or partner physically forced her to have sexual intercourse against her will in the past 12 months	81/284	28.5	26.8	21.1 – 32.6
Person who physically forced her to have sexual intercourse against her will	Client 70/81 Don't know the person 4/81 Family or relative 1/81 Other sex worker 2/81 Police 1/81 Social acquaintance 3/81	86.4 4.9 1.2 2.5 1.2 3.7	90.1 2.7 1.2 1.2 0.3 3.4	87.5 – 96.4 0.6 – 4.0 0 – 2.8 0.4 – 1.5 0 – 0.5 0 – 7.1
Proportion who sought medical treatment after being physically forced to have sexual intercourse against her will	29/80	36.2	40.1	28.6 – 52.8
Proportion who reported this incident to the police	19/74	25.7	27.6	17.4 – 38.4
Reasons for not reporting this incident to the police	Embarrassing to report 1/55 Feared the police 28/55 I didn't know I should inform police 4/55 I forgave perpetrator 14/55 Perpetrator ran away 4/55 Police want money I don't have it 1/55 Police won't do anything after reporting 3/55	1.8 50.9 7.3 25.5 7.3 1.8 5.5	0.8 46.3 5.8 32.6 9.2 1.9 3.1	0.3 – 1.1 31.8 – 58.5 1.1 – 10.0 20.5 – 48.1 0 – 23.3 0 – 4.6 0 – 5.2
In the past 12 months, a client or partner slapped her or threw something that could hurt her	100/286	35.0	32.9	27.8 – 38.1
Proportion pushed or shoved by a client or partner in the past 12 months	83/285	29.1	26.7	21.0 – 32.4
In the past 12 months, a client or partner hit her with a fist or something else that could hurt her	86/283	30.4	29.5	23.9 – 35.2
Proportion kicked, dragged or beat up by a client or partner in the past 12 months,	67/282	23.8	24.6	19.2 – 29.9
Proportion choked or burned by a client or partner in the past 12 months	48/285	16.8	16.9	9.7 – 24.2

Proportion whose client or partner threatened or used a gun, knife or other weapon against them in the past 12 months	92/282	32.6	32.6	27.7 – 37.5
Proportion forced by client or partner in the past 12 months to do something sexual she found degrading or humiliating	73/282	25.9	25.7	19.8 – 31.5
Proportion whose client or partner in the past 12 months made them afraid of what would happen if they did not have sexual intercourse	105/284	37.0	36.7	31.7 – 41.7

3.1.16 Programme coverage

Overall, the coverage of HIV prevention programmes (measured as receiving at least two interventions in the past three months) among FSW in Mogadishu is very low (6.7%). Very few FSW (15.0%) in Mogadishu are aware of Local NGOs that deliver non-medical assistance or advice to FSW and only 6.1% of FSW having attended meeting(s) to discuss STI or HIV and AIDS, as shown in Table 16.

Table 16: Programme coverage

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
Proportion aware of local NGOs that deliver non-medical assistance or advice to FSW	43/286	15.0	15.0	10.3 – 19.8	
Attended meeting(s) to discuss STI or HIV/AIDS during the last 12 months	13/274	4.7	6.1	5.0 – 7.3	
Services/ items received from an outreach worker in the past 12 months (<i>multiple answers possible</i>)	Condom	7/287	2.4	3.1	0.8 – 5.4
	Pamphlets	12/287	4.2	5.4	2.3 – 8.4
	Referral to STI screening and treatment	4/287	1.4	2.1	0 – 4.0
	Referral to HIV counselling and testing	8/287	2.8	4.0	1.3 – 6.7
	Lubricants	5/287	1.7	1.8	0.6 – 3.1
	Other	1/287	0.3	0.3	0 – 0.9
	None	256 /287	89.2	86.9	82.8 – 91.1
Proportion of referred FSW who went to referred site to receive medical care	5/7	71.4	79.0	55.1 – 84.4	
Given condom in the past three months	9/255	3.5	4.8	3.4 – 6.3	
Received counselling on condom use and safe sex in the past three months	32/251	12.7	15.0	10.2 – 19.9	
Tested for STIs in the past three months	98/286	34.3	36.4	32.8 – 40.0	
GARPR 3.7 Coverage of HIV prevention programmes among key populations	14/287	4.9	6.7	3.6 – 9.8	

3.1.17 Alcohol and drug use in the past three months

One quarter of the FSW in Mogadishu consume alcohol, and they drink mostly on a monthly basis (12.6%). Contrary, 95.0% of FSW have consumed khat in the three months prior to this survey with half of them consuming it four or more times a week. Other drugs and substances consumed include marijuana or hashish (48.5%), cigarette smoking (95.9%), shisha smoking (73.8%). Few have also in the previous three months injected drugs (6.0%) and among them, about half (49.1%) of them have used a sterile needle and syringe last time they injected drugs.

Table 17: Alcohol and drug use in the past three months

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
Frequency of having a drink containing alcohol during the past three months	4 or more times a week	4/287	1.4	1.8	0 – 3.6
	2 - 3 times a week	5/287	1.7	1.6	0.2 – 3.0
	2 - 4 times a month	27/287	9.4	9.6	5.9 – 13.2
	Monthly or less	38/287	13.2	12.6	8.9 – 16.2
	Never	213/287	74.2	74.6	69.0 – 80.2
Frequency of chewing khat during the past three months	4 - or more times a week	149/286	52.1	50.0	44.0 – 55.8
	2 - 3 times a week	45/286	15.7	17.4	12.8 – 22.1
	2 - 4 times a month	61/286	21.3	22.0	17.6 – 26.3
	Monthly or less	16/286	5.6	5.6	3.0 – 8.2
	Never	15/286	5.2	5.0	0.3 – 7.1
Frequency of smoking marijuana or hashish during the past three months	4 or more times a week	33/287	11.5	13.2	8.4 – 18.0
	2 - 3 times a week	29/287	10.1	10.1	6.8 – 13.4
	2 - 4 times a month	42/287	14.6	14.8	10.6 – 19.1
	Monthly or less	28/287	9.8	10.4	6.9 – 14.0
	Never	155/287	54.0	51.5	45.6 – 57.3
Frequency of smoking cigarette during the past three months	4 or more times a week	153/287	53.3	51.6	45.9 – 57.4
	2 - 3 times a week	71/287	24.7	24.4	19.3 – 29.5
	2 - 4 times a month	44/287	15.3	17.6	13.5 – 21.8
	Monthly or less	7/287	2.4	2.3	0.6 – 4.0
	Never	12/287	4.2	4.1	1.8 – 6.3
Frequency of smoking shisha during the past three months	4 or more times a week	70/287	24.4	20.3	21.2 – 30.6
	2 - 3 times a week	58/287	20.2	21.9	15.6 – 24.9
	2 - 4 times a month	68/287	23.7	25.9	17.3 – 26.6
	Monthly or less	16/287	5.6	5.7	3.0 – 8.4
	Never	75/287	26.1	26.2	21.2 – 31.2
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette	151/284	53.2	55.0		50.8 – 59.2
Frequency of injecting drugs during the past three months	4 or more times a week	2/287	0.7	1.2	0 – 2.8
	2 - 3 times a week	2/287	0.7	0.9	0 – 2.2
	2 - 4 times a month	6/287	2.1	2.6	0.7 – 4.5
	Monthly or less	3/287	1.0	1.3	0.1 – 2.4
	Never	274/287	95.5	94.0	91.2 – 96.8

Type of drug injected	Cocaine	5/13	38.5	35.0	9.5 – 59.8
	Heroin	7/13	53.8	55.0	27.5 – 82.7
	Methamphetamine	1/13	7.7	10.0	0 – 30.3
Proportion use of a sterile needle and syringe during last injectable drug use		5/10	50.0	49.1	26.1 – 72.1
Shared a syringe or needle with anyone else when injecting drugs in the last three months		3/10	30.0	31.7	31.7 – 31.8
Received new, clean needles or syringes in the past three months		3/10	30.0	24.2	23.5 – 24.2

3.1.18 Socio-demographic correlates of safer HIV-related behaviour among FSW in Mogadishu

Finally, multivariable analyses were used to identify socio-demographic correlates of safer HIV-related behaviour, specifically, condom use at last transactional sex, knowledge of HIV status from an HIV test in the past 12 months, and HIV composite knowledge. FSWs who currently earn money doing other work other than sex work were three times more likely (aOR = 2.9, 95% CI = 1.5 – 5.5) to have used a condom during last transactional sex than those FSW who earn money only through sex work, as shown in Table 18. In addition, FSW who have no education were 60% less likely (aOR = 0.4, 95% CI = 0.2 – 1.0) to know their HIV status from an HIV test than FSW with some education. Furthermore, FSW who have been living in Mogadishu for two years or more were 80% less likely (aOR = 0.2, 95% CI = 0.08 – 0.6) to know their HIV status from an HIV test than FSW who have lived in Mogadishu for a shorter time, as shown in Table 19. Finally, FSW who earn money doing work other than sex work and those with no education had higher odds of having answered correctly to all five questions regarding HIV-related knowledge (aOR = 1.4, 95% CI = 0.6 – 1.5 and aOR = 3.4, 95% CI = 1.3 – 3.9, respectively), as presented in Table 20.

Table 18: Factors associated with condom use at last sex with a client (transactional sex)

		Condom use at last transactional sex		Adjusted OR (95%CI)	P-value
		n/N	%		
Age (Years)	25+	50/228	21.9	0.5 (0.3 – 1.0)	0.07
	<25	14/59	23.7	1.0	
Level of Education	None	52/247	21.1	0.5 (0.3 – 1.0)	0.07
	Some education	12/40	30.0	1.0	
Overall monthly household income	< 100	31/167	18.6	1.0	0.07
	>=100	33/120	27.5	1.7 (1.0 – 2.9)	
Marital status	Single	2/11	18.2	1.1 (0.2 – 4.8)	0.95
	Ever Married	62/276	22.5	1.0	
Number of people she is currently supporting	0-5	35/183	19.1	0.7 (0.4 – 1.2)	0.19
	>5	29/104	27.9	1.0	
Length of stay in Mogadishu	Less than 2 Years	5/13	38.5	1.0	0.04
	More than 2 Years	59/274	21.5	0.4 (0.1 – 1.0)	
Currently earn money doing other work other than sex work	Yes	17/47	36.2	2.9 (1.5 – 5.5)	0.001*
	No	47/240	19.6	1.0	

Bold P-value: Statistically significant

Table 19: Factors associated with having an HIV test in the past 12 months and knowing the result

	HIV test in the past 12 months and knowing the result		Adjusted OR (95%CI)	P-value
	n/N	%		
Total	29/287	10.1		
Age	25+ <25	24/228 5/59	21.9 8.5	1.5 (0.5 – 4.7) 1.0
Level of Education	None Some education	21/247 8/40	8.5 20.0	0.4 (0.2 – 1.0) 1.0
Overall monthly household income	< 100 ≥100	14/167 15/120	8.4 12.5	1.0 1.5 (0.7 – 3.3)
Marital status	Single Ever Married	2/11 27/276	18.2 9.8	4.4 (1.0 – 19.9) 1.0
Number of people she is currently supporting	0-5 >5	18/183 11/104	9.8 10.6	1.0 0.6 (0.3 – 1.4)
Length of stay in Mogadishu	Less than 2 Years More than 2 Years	4/13 25/274	30.7 9.1	1.0 0.2 (0.08 – 0.6)
Currently earn money doing other work other than sex work	Yes No	6/47 23/240	12.8 9.6	1.6 (0.7 – 4.1) 1.0

Bold P-value: Statistically significant**Table 20: Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission**

	Preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission		Adjusted OR (95%CI)	P-value
	n/N	%		
Total	18/287	6.3		
Age	25+ <25	14/228 4/59	6.1 6.8	9.0 (2.8 – 2.9) 1.0
Level of Education	None Some education	13/247 5/40	5.3 12.5	3.4 (1.3 – 3.9) 1.0
Overall monthly household income	< 100 ≥100	10/167 8/120	6.0 6.7	1.0 1.6 (1.1 – 4.2)
Marital status	Single Ever Married	0/11 18/276	0 6.5	6.7 (2.3 – 6.7) 1.0
Number of people she is currently supporting	0-5 >5	11/183 7/104	6.0 6.7	1.9 (1.6 – 5.3) 1.0
Length of stay in Mogadishu	Less than 2 Years More than 2 Years	1/13 17/274	7.7 6.2	1.0 7.3 (1.9 – 7.8)
Currently earn money doing other work other than sex work	Yes No	11/47 7/240	23.4 2.9	1.4 (0.6 – 1.5) 1.0

Bold P-value: Statistically significant

3.2 MOGADISHU UNIFORMED PERSONNEL

3.2.0 Socio-demographic characteristics

A total of 287 uniformed personnel participated in the study. The average age of uniformed personnel in Mogadishu is 32.3 years with the majority (42.0%) of respondents aged 25 to 34 years. Most officers (39.2%) had secondary level of education and nearly all of them (97.2%) had stayed in Mogadishu for more than two years. More than half (61.0%) are married with an average of 6.8 dependents. Fewer officers (2.9%) ever travel to neighbouring countries especially after three months as shown below in Table 21.

Table 21: Socio-demographic characteristics

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Age (Years)	Mean±SD	32.3±11.3			31.1	33.7
	Range	18-70				
	< 25 years	75/287	26.1	25.1	20.3	30.6
	25+ years	212/287	73.9	74.9	69.4	79.8
	18 – 24	75/287	26.1	25.1	20.3	30.6
	25 - 34	117/287	40.8	42.0	36.2	48.1
	35 - 44	46/287	16.0	17.3	13.1	22.6
	45 +	49/287	17.1	15.6	11.7	20.3
Category of uniformed personnel	Military officers	142/287	49.5	47.1	41.1	53.1
	Police officers	145/287	50.5	52.9	46.9	58.9
Education level	None	73/287	25.4	24.2	19.4	29.6
	Primary	90/287	31.4	31.7	26.4	37.6
	Secondary	110/287	38.3	39.2	33.4	45.3
	University / College	14/287	4.9	4.9	2.9	8.4
Nationality	Somalia	287/287	100.0	100	-	-
Length of stay in Mogadishu	Less than 7 days	1/287	0.4	0.4	0.0	2.5
	7 – 11 months	2/287	0.7	0.9	0.2	3.6
	1 – 2 years	6/287	2.1	1.6	0.6	4.0
	More than 2 years	287/287	96.9	97.2	94.3	98.6
Frequency of visiting his family	Daily	119/287	41.5	43.8	37.9	49.9
	Once in a week	93/287	32.4	32.7	27.2	38.6
	>once in a week	25/287/287	8.7	9.4	6.4	13.7
	Once in a month	14/287	4.9	4.3	2.5	7.3
	Twice in a month	20/287	7.0	5.6	3.6	8.7
	2 - 3 months	5/287	1.7	1.2	0.5	2.9
	>3 months	11/287	3.8	3.0	1.6	5.5
Marital status	Married	176/287	61.3	61.0	54.9	66.8
	Separated	4/287	1.4	1.6	0.6	4.3
	single	107/287	37.3	37.5	31.8	43.5
Number of dependents	Mean±SD	6.8±3.2			6.4	7.1
	Range	0-19				
Number of wives	1	142/176	80.7	81.9	75.1	87.2
	2	23/176	13.1	13.2	8.7	19.7
	3	9/176	5.1	3.9	1.9	7.9

	4	2/176	1.1	0.9	0.2	3.7
Frequency of visiting neighbouring countries	Never	275/287	95.8	97.1	94.6	98.5
	Monthly	1/287	0.4	0.4	0	2.5
	Every 2 – 3 months	3/287	1.1	0.6	0.2	2.2
	After > 3 months	8/287	2.8	1.9	0.9	4.2
Overall monthly income in USD	< 100	4/287	1.4	1.5	0.5	4.0
	100 - 499	273/287	95.1	95.2	91.9	97.2
	>= 500	10/287	3.5	3.4	1.8	6.3
	Mean±SD	205.8±107.1	-	-	193.3	218.2
	Range	30-1000				

3.2.1 HIV and syphilis prevalence

The overall prevalence of HIV and syphilis infection among uniformed personnel in Mogadishu is 0.2% and 1.6% respectively. None of the five syphilis infections was currently active as shown in Table 22. However, there was no HIV and syphilis comorbidity.

Table 22: HIV and syphilis prevalence

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
HIV	1/287	0.4	0.2	0	1.3
Syphilis – Ever infected	5/287	1.7	1.6	0.6	3.8
Syphilis – Active infection	0/287	0.0	-	-	-

3.2.2 Patterns of STI care and treatment seeking behaviour

Although nearly all uniformed personnel (98.9%) have heard of HIV and AIDS, only 8.1% have heard of other STIs. While 30.5% of uniformed personnel had received an STI test in the past three months, only 8.5% have been diagnosed to have an STI twelve months prior to this survey. Contrastingly, only 0.8% of uniformed personnel have experienced an abnormal discharge from their penis in the past 12 months prior to this study and sought STI treatment. In addition, only 0.3% of uniformed personnel have had a sore or ulcer on or near their penis in the past 12 months prior to this survey and sought treatment as shown in Table 23.

Table 23: Patterns of STI care and treatment seeking behaviour

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of HIV/AIDS	Yes	283/287	98.6	98.9	96.9	99.6
Heard about other infections that can be transmitted through sex	Yes	28/287	9.8	8.1	5.4	11.9
Tested for sexually transmitted infections in the past three months	Yes	7/28	25.0	30.5	14.3	53.7
Diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	Yes	3/28	10.7	8.5	2.4	25.5
Had an abnormal discharge from their penis in the past 12 months	Yes	2/285	0.7	0.8	0.2	3.0
Had an abnormal discharge from their penis in the past 12 months and sought treatment	Yes	2/2	100	-	-	-
Had a sore or ulcer on or near penis or anus in the last 12 months		1/287	0.4	0.3	0	1.8
In the last 12 months, had a sore or ulcer on or near penis or anus and sought treatment	Yes	1/1	100	-	-	-
Type of treatment	Tablets	1/1	100	100	-	-

3.2.3 Knowledge of transmission of HIV and STI

There is varied knowledge among uniformed personnel on HIV prevention and transmission with 16.7% (knowledge of the existence of special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby) as the lowest score to 92.8% (people cannot get HIV by sharing food with a person who has HIV/AIDS) as the highest score. For instance, the majority of uniformed personnel know HIV can be transmitted from mother to baby during pregnancy (71.3%), delivery (87.5%), and breastfeeding (92.4%). In addition, 74.0% know that a healthy looking person can have HIV and AIDS whereas less than half (82.8%) of them know that one cannot get HIV from mosquito bites. Nearly two thirds (64.2%) of uniformed personnel know that one can reduce their chance of getting HIV and STI by using a condom every time they have sex. The overall composite knowledge among uniformed personnel who correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission is however low (34.5%) as shown in Table 24.

Table 24: Knowledge of transmission of HIV and STI

A	A	n A		A n A		
		/ A	A	A	¹ 7 A fb A	w A
A fb VA n A Ac A Ac A w A yA A A A fb A A A A A A A	A	299/399A	77 7A	75 3A	79 2A	7 ¹ 9A
A A A A A fb A VA A Ac A AA nAw A n A A w A yA	A	293/399A	7 ¹ 1 A	7 ¹ 9A	74 7A	77 7A
A A c fb AA A A A w A W A	A	327/399A	97 7A	95 1A	79 4A	9 ¹ 1A
A A A W fb n An r Ac A	A	339/399A	9 ¹ 5A	93 9A	99 1A	1 ⁷ 4A
A A A W Ac A fb A AA A A A W A	A	377/399A	1 ³ 9A	1 ³ 9A	9 ¹ 1A	1 ⁷ 4A
A c A A w A A A A fb A A W A A A fb n A A A A A A A nAwA A	A	211/399A	45 9A	42 7A	37 4A	49 4A
VA Ac A n fb n An A A Ac c A A A	A	319/399A	93 9A	92 4A	77 7A	97 7A
VA Ac A n fb n An A A Ac c A A w A	A	371/399A	99 5A	99 7A	93 ¹ A	1 ⁷ 2A
VA Ac A n fb n An A A Ac c A c Ac fb A	A	377/399A	1 ³ 9A	1 ³ 5A	99 3A	1 ⁷ 2A
A A A A AA A A A A wA AA n A fb A A VA A A A A fb VA n A A Ac c A	A	72/399A	29 9A	27 9A	23 9A	32 7A
A 7 2.AAC A A fbA A fb w A A y A n A fb VA A J A n J A n A c A VA n A	A	1 ¹ /399A	45 7A	47 9A	41 3A	52 9A

3.2.4 General sexual history

Nearly all (85.3%) uniformed personnel have had vaginal sex compared to only 1.2% who have ever had anal sex. The average age at first vaginal sex among uniformed personnel in Mogadishu is 19.9 years compared to 20.0 years of anal sexual debut. Only 4.4% of uniformed personnel have ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse while uniformed officer's houses being used as places to engage in transactional sex. More than one third of uniformed personnel meet their new transactional clients and engage in sex at the uniformed personnel's homes as shown in Table 25 below.

Table 25: General sexual history

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have ever had vaginal sex with a woman	Yes	242/287	84.3	85.3	80.6	89.0
Age at first vaginal sex	Mean±SD Range	19.9±4.2 13-45			19.4	20.5
Ever had anal sex with a woman	Yes	3/287	1.1	1.2	0.4	3.6
Ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse	Yes	12/287	4.2	4.4	2.5	7.7
Number of different sexual partners in total he had sexual intercourse with in the past one month	Mean±SD Range	1.7±0.7 1-3			1.3	2.1
Where uniformed personnel meet most of their new transactional sex clients	At uniformed officer's home	7/12	58.3	63.0	30.0	87.1
	Hotel / Restaurant	3/12	25.0	25.5	6.6	62.1
	other	2/12	16.7	11.6	2.2	43.9
Where uniformed personnel most often engage in transactional sex	At home they share with their family	6/12	50.0	53.1	22.6	81.5
	Hotel / restaurant	3/12	25.0	25.5	6.6	62.1
	Client's house	1/12	8.3	9.8	1.0	54.7
	Other	2/12	16.7	11.6	2.2	43.9

3.2.5 Sexual History with paying clients

The majority of uniformed personnel (27.7%) used a male condom in their last transactional sexual intercourse. In all cases, it is the uniformed officer (100.0%) who suggest condom use. However, most of uniformed personnel (66.9%) never use condoms. The average amount of money paid by a uniformed officer to a FSW during last transactional sex is USD 5.0 while the majority (81.7%) of them paid between USD 0 – 5 as shown in Table 26.

Table 26: Sexual History with paying clients

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Used a condom the last time had transactional sexual intercourse with a client	Yes	3/12	25.0	27.7	7.5	64.2
Type of condom	Male condom	3/12	100	-	-	-
Person who suggested condom use at last transactional sexual intercourse	Myself (uniformed officer)	3/3	100	-	-	-
Frequency of using condoms with transactional clients over the last 30 days (1 month)	Almost every time	1/12	8.3	8.9	0.9	5.2
	Sometimes	3/12	25.0	24.6	6.4	60.9
	Never	8/12	66.9	66.5	32.1	89.3

Number of female sex workers uniformed officer had sex with on the last day	Mean±SD Range	1.3 ±1.2 0-4			0.6	2.1
Amount of money paid during last transactional sex	0 - 5	8/10	80.0	81.7	39.0	96.9
	6 - 10	0/10	0.0	0.0	-	-
	11 - 20	1/10	10.0	6.8	0.6	47.5
	>= 21	1/10	10.0	11.5	1.0	61.8
	Mean±SD Range	5.0±1.9 1-20			0.7	9.3

3.2.6 Sexual history with non-paying partners

Whereas one quarter of uniformed personnel (27.7%), reported using a condom during their last sexual intercourse with transactional clients, only 15.7% of uniformed personnel used a condom with their last non-transactional client. The average number of times a uniformed personnel had sexual intercourse with non-paying clients over the last 30 days is 0.7 times with uniformed personnel being the ones (100%) who suggested condom use during last non-transactional sex as shown in Table 27.

Table 27: Sexual history with non-paying partners

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Number of times uniformed officer had sexual intercourse with a non-transactional sexual partner over the last 30 days (1 month)	Mean±SD Range	0.7±1.4 0-5			0.4	1.0
Used a condom last time he had sexual intercourse with non-paying/transactional sexual partner	Yes	6/41	14.6	15.7	6.9	32.0
Person who suggested condom use at last non-transactional sexual intercourse	Myself (uniformed officer)	6/6	100	-	-	-

3.2.7 Availability and use of male condom

Although almost two thirds (64.6%) of uniformed personnel in Mogadishu have ever heard of or seen a male condom and 49.7% know a place or person where to obtain male condoms, only 9.5% have ever used a male condom. Very few uniformed personnel received male condoms (1.6%) or counselling on condom use (3.1%) twelve months prior to this survey even though 96.0% perceive male condoms to be affordable as shown in Table 28.

Table 28: Availability and use of male condom

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a male condom	Yes	191/287	66.6	64.6	58.6	70.2
Ever used a male condom with a sexual partner	Yes	18/191	9.4	9.5	5.9	14.8
Knows of a place or person where to obtain male condoms	Yes	94/191	49.2	49.7	42.2	57.1
Usually carries condoms	Yes	9/190	4.7	5.5	2.9	10.5
Received condoms in the past 3 months	Yes	3/191	1.6	2.1	0.7	6.4
Received counselling on condom use and safe sex in the past three months	Yes	6/191	3.1	3.2	1.4	7.2
Person who usually supplies the condoms	Client (FSW)	2/180	1.1	1.1	0.3	4.7
	Never use a condom	165/180	91.7	91.3	85.7	94.8
	Myself	13/180	7.2	7.6	4.4	12.9
Affordability of male condom	Affordable	170/179	95.0	96.0	91.8	98.0
	Not affordable	5/179	2.8	2.4	0.9	6.3
	Somewhat affordable	4/179	2.2	1.6	0.6	4.7

3.2.8 Availability and use of female condom

Unlike male condoms, fewer uniformed personnel in Mogadishu have ever heard (5.9%), used (0.0%) or know where to obtain (47.1%) female condoms as shown in Table 29.

Table 29: Availability and use of female condom

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a female condom	Yes	17/287	5.9	4.5	2.7	7.5
Ever used a female condom with a sexual partner	Yes	0/17	0.0	-	-	-
Knows of a place or person where to obtain female condoms	Yes	8/17	47.1	55.4	27.6	80.2
Places where he can obtain female condoms	Pharmacy	6/8	75.0	67.2	20.2	94.3
	Pharmacy and public hospital	2/8	25.0	32.8	5.7	79.8

3.2.9 HIV testing history and avoidance of HIV services

Few (22.4%) uniformed personnel in Mogadishu know where to go for a HIV test and subsequently only 11.9% have ever received an HIV test. However, only 9.2% know their HIV status from an HIV test within the past twelve months prior to this study. Lack of awareness on where to go for an HIV test is cited by the majority (96.2%) of uniformed personnel in Mogadishu as the reason for having never sought for an HIV test. Overall, 3.3% of uniformed personnel in Mogadishu avoid HIV services due to stigma and discrimination among FSWs as shown in Table 30.

Table 30: HIV testing history and avoidance of HIV services

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Knows where to go if he wishes to receive a confidential HIV test	Yes	69/282	24.5	22.4	17.8	27.8
Knows his HIV status from an HIV test	Have ever been tested	37/287	13.0	11.9	8.6	16.2
When last tested	Less than 6 months	10/37	27.0	27.7	14.9	45.5
	6-12 months	18/37	48.7	49.6	32.8	66.5
	More than 12 months	9/37	24.3	22.7	11.5	39.9
Result of last HIV test	Positive	1/37	2.7	1.5	0.2	10.8
	Negative	36/37	97.3	98.5	89.2	99.8
Nature of HIV testing	Voluntary	14/38	36.8	34.1	20.2	51.6
	Required	24/38	63.2	65.9	48.5	79.9
During most recent HIV counselling/ testing, revealed to the health provider that he is engaged in transactional sex	Yes	0.0	0.0	-	-	-
Reasons for having never sought for an HIV test	Fear of or concern about stigma by staff or neighbours	3/249	1.2	1.4	0.4	4.3
	Fear of or concern about or experienced violence	1/249	0.4	0.6	0	4.2
	Fear of or concern about or experienced police harassment or arrest	3/249	1.2	1.8	0.6	5.5
	Didn't know where to go for an HIV test	242/249	97.2	96.2	92.2	98.2
GARPR 3.4: Knows his/her HIV status from an HIV test	Yes	28/287	9.8	9.2	6.3	13.2
GARPR 4.2: Avoidance of HIV services because of stigma and discrimination among key populations	Yes	7/287	2.4	3.3	1.6	6.9

3.2.10 Physical and Sexual violence

Only one per cent of uniformed personnel in Mogadishu have seen or heard of a woman being hit, kicked, or beaten because someone believed they sell sex to men. In addition, 1.2% of uniformed personnel in Mogadishu have seen or heard of a FSW being physically forced to have sexual intercourse against their will mostly by their social acquaintance (77.6%) or police (22.4%) as illustrated in Table 31.

Table 31: Physical and Sexual violence

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have seen/heard of a woman being hit, kicked, or beaten because someone believed she sells sex to men someone believed they sell sex to men in the past 12 months	Yes	3/283	1.1	1.0	0.3	3.3
Person who last hit, kicked, or beat the female sex worker	Client	1/3	33.3	34.0	0	99.7
	Others	2/3	66.7	66.0	0.3	99.9
Have seen/heard of a woman being forced to have sex with a man by sexually assaulting or raping her intercourse against her will in the past 12 months	Yes	4/283	1.4	1.2	0.4	3.1
Person who last forced her to have sex with them against her will	Social acquaintance	3/4	75.0	77.6	4.7	99.6
	Police	1/4	25.0	22.4	0.4	95.3
Sought medical treatment after being physically forced to have sexual intercourse against her will	Yes	3/4	75.0	77.6	4.7	99.6
Reported this incident to the police	Yes	2/2	50.0	46.6	2.1	97.2

3.2.11 Programme coverage

Overall, the coverage of HIV prevention programmes among uniformed personnel in Mogadishu is very low (0.4%). Furthermore, only 5.1% and 5.6% of uniformed personnel are aware of any Local NGO here that deliver non-medical assistance or advice to members of your group and have attended any meetings to discuss STI or HIV/AIDS during the last 12 months respectively as shown in Table 32.

Table 32: Programme coverage

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Aware of any Local NGO here that deliver non-medical assistance or advice to members of your group	Yes	17/285	6.0	5.1	3.2	8.2
Have attended any meetings to discuss STI or HIV/AIDS during the last 12 months	Yes	16/286	5.6	5.9	3.6	9.6
Attended the sites he was referred to	Yes	N/A				
GARPR 3.7 Coverage of HIV prevention programmes among key populations	Yes	1/287	0.4	0.4	0	2.5

3.2.12 Alcohol and drug use in the past three months

Few (2.2%) uniformed personnel in Mogadishu consume alcohol compared to 61.2% who consume khat. In addition, 53.5% of the officers smoke cigarette. Other drugs and substances consumed include marijuana or hashish (1.2%), and shisha smoking (9.7%). Only 1.2% of uniformed personnel reported having had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette.

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Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Frequency of having a drink containing alcohol during the past three months	Never	280/287	97.6	97.7	95.2	99.0
	Monthly or less	4/287	1.4	1.3	0.5	3.6
	2-4 times a month	3/287	1.1	0.9	0.3	3.0
	2-3 times a week	-	-	-	-	-
	4 or more times a week	-	-	-	-	-
Frequency of chewing khat during the past three months	Never	112/287	39.0	38.8	33.1	44.9
	Monthly or less	5/287	1.7	1.6	0.6	3.8
	2-4 times a month	63/287	22.0	22.1	17.5	27.5
	2-3 times a week	26/287	9.1	7.4	4.9	10.9
	4 or more times a week	81/287	28.2	30.2	24.8	36.1
Frequency of smoking marijuana or hashish during the past three months	Never	284/287	99.0	98.8	96.4	99.6
	Monthly or less	-	-	-	-	-
	2-4 times a month	1/287	0.4	0.4	0	2.8
	2-3 times a week	-	-	-	-	-
	4 or more times a week	2/287	0.7	0.8	0.2	3.1
Frequency of smoking cigarette during the past three months	Never	134/287	46.7	46.5	40.6	52.6
	Monthly or less	2/287	0.7	0.6	0.2	2.6
	2-4 times a month	57/287	19.9	18.7	14.5	23.8
	2-3 times a week	22/287	7.7	7.7	5.1	11.7
	4 or more times a week	72/287	25.1	26.4	21.3	32.1
Frequency of smoking shisha during the past three months	Never	259/287	90.2	90.3	86.1	93.3
	Monthly or less	8/287	2.8	2.9	1.5	5.8

	2-4 times a month	12/287	4.2	3.9	2.2	6.8
	2-3 times a week	4/287	1.4	1.6	0.6	4.1
	4 or more times a week	4/287	1.4	1.4	0.5	3.2
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette	Yes	4/287	1.4	1.2	0.4	3.2
Frequency of injecting drugs during the past three months	Never	286/286	100	100	-	-

3.3 MOGADISHU PORT WORKERS

3.3.0 Socio-demographic characteristics

A total of 287 port workers participated in the study. The average age of port workers in Mogadishu is 33.1 years with the majority (48.9%) of respondents aged 25 to 34 years. Most truckers (48.9%) had secondary level of education and nearly all of them (96.7%) had stayed in Mogadishu for more than two years. Nearly three quarter (74.4%) are married with an average of 5.6 dependents. The average monthly income among truckers in Mogadishu is USD 166.8 as presented below in Table 34.

Table 34: Socio-demographic characteristics

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Age (Years)	Mean±SD	33.1±0.5				
	Range	18 - 78				
	< 25 years	241/286	84.3	87.1	82.7	90.5
	25+ years	45/286	15.7	12.9	9.5	17.4
	18 – 24	45/286	15.7	12.9	9.5	17.4
	25 - 34	138/286	48.3	48.9	42.7	55.1
	35 - 44	55/286	19.2	20.2	15.6	25.8
	45 +	48/286	16.8	17.9	13.5	23.4
Education level	None	224/286	78.3	79.5	74.2	84.0
	Primary	41/286	14.3	13.2	9.7	17.9
	Secondary	20/286	7.0	7.1	4.5	11.0
	University / College	1/286	0.4	0.2	0	1.2
Nationality	Somalia	285/286	99.7	99.8	98.3	99.9
	Djibouti	1/286	0.4	0.2	0	1.7
Length of stay in Mogadishu	Less than 7 days	0/286	-			
	7 days – 1 month	0/286	-			
	2 – 3 months	0/286	-			
	4 – 6 months	0/286	-			
	7 – 11 months	5/286	1.8	2.0	0.8	4.8
	1 – 2 years	4/286	1.4	1.3	0.5	3.6
	More than 2 years	277/286	96.9	96.7	93.6	98.4
Frequency of visiting his family	Daily	211/286	73.8	73.2	67.2	78.4
	Once in a week	12/286	4.2	3.4	1.8	6.2
	>once in a week	2/286	0.7	0.6	0.1	2.3
	Once in a month	5/286	1.8	1.8	0.7	4.5
	Twice in a month	3/286	1.1	0.9	0.3	3.0
	2 - 3 months	13/286	4.6	5.4	3.1	9.4
	>3 months	40/286	14.0	14.7	10.7	19.8
Marital status	Single	30/286	10.5	8.3	5.7	12.0
	Married	201/286	70.3	74.4	68.8	79.2
	Separated	37/286	12.9	10.8	7.8	15.0
	Divorced	16/286	5.6	6.0	3.6	9.9
	Widowed	2/286	0.7	0.4	0.1	1.8
Number of dependents	Mean±SD	5.6±3.0			5.2	5.9
	Range	0-19				

Number of wives	1	168/201	83.6	84.9	79.0	89.4
	2	27/201	13.4	12.4	8.4	17.9
	3	5/201	2.5	2.2	0.8	5.7
	4	1/201	0.5	0.5	0	3.3
Frequency of visiting neighbouring countries	Never	247/286	86.4	87.2	82.5	90.7
	Weekly	1/286	0.4	0.5	0	3.3
	Monthly	0/283	-	-	-	-
	Every 2 – 3 months	0/283	-	-	-	-
	After > 3 months	38/286	13.3	12.4	8.9	16.9
Overall monthly income in USD	< 100	46/286	16.1	16.7	12.5	21.9
	100 - 499	234/286	81.6	81.5	76.1	85.8
	>= 500	6/286	2.1	1.9	0.8	4.4
	Mean±SD	166.8±113.9	-	-	153.6	180.1
	Range	20 - 1000	-	-	-	-

3.3.1 HIV and syphilis prevalence

The overall prevalence of HIV and syphilis infection among port workers in Mogadishu is 0.2% and 1.5% respectively. Prevalence for active syphilis infections is 0.9% as shown in Table 35. However, there was no HIV and syphilis comorbidity.

Table 35: HIV and syphilis prevalence

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
HIV	1/286	0.4	0.2	0	1.2
Syphilis – Ever infected	4/286	1.4	1.5	0.6	4.1
Syphilis – Active infection	2/286	0.7	0.9	0.2	3.7

3.3.2 Patterns of STI care and treatment seeking behaviour

Although nearly all port workers (97.4%) have heard of HIV and AIDS, only 14.3% have heard of other STIs. In addition, 35.7% of port workers had received an STI test in the past three months with 29.1% having been diagnosed to have an STI twelve months prior to this survey. Contrastingly, only 9.2% of port workers have experienced an abnormal discharge from their penis in the past 12 months prior to this study and sought STI treatment. In addition, only 2.8% of port workers have had a sore or ulcer on or near their penis in the past 12 months prior to this survey and sought treatment as shown in Table 36.

Table 36: Patterns of STI care and treatment seeking behaviour

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of HIV/AIDS	Yes	278/286	97.2	97.4	94.7	98.8
Heard about other infections that can be transmitted through sex	Yes	41/286	14.3	14.3	10.5	19.3
Tested for sexually transmitted infections in the past three months	Yes	13/41	31.7	35.7	21.0	53.7
Diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	Yes	10/41	24.4	29.1	15.7	47.4
Had an abnormal discharge from their penis in the past 12 months	Yes	25/285	8.8	9.2	6.1	13.5
Had an abnormal discharge from their penis in the past 12 months and sought treatment	Yes	21/25	84.0	87.2	67.6	95.7
Reasons for not seeking treatment for the sore or ulcer on or near penis or anus	Couldn't afford treatment	1/4	25.0	29.6	0.6	96.8
	Didn't think I needed it	3/4	75.0	70.4	3.2	99.4
Had a sore or ulcer on or near penis or anus in the last 12 months	Yes	8/276	2.9	2.8	1.3	5.8
In the last 12 months, had a sore or ulcer on or near penis or anus and sought treatment	Yes	8/8	100	100	-	-

3.3.3 Knowledge on transmission of HIV and STI

There is diverse knowledge score among port workers on HIV prevention and transmission with 35.9% (having knowledge that one cannot get HIV from mosquito bites) as the lowest score to 68.9% (people cannot get HIV by sharing food with a person who has HIV/AIDS) as the highest score. For instance, the majority of port workers know HIV can be transmitted from mother to baby during breastfeeding. In addition, 41.9% know that a healthy looking person can have HIV and AIDS whereas 62.2% of them know that People can reduce their chance of getting HIV and STI by using a condom every time they have sex. The overall composite knowledge among port workers who correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission is however extremely low (2.2%) as shown in Table 37.

Table 37: Knowledge on transmission of HIV and STI

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Risk of HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners	Yes	171/286	59.8	57.4	51.1	63.5
People can reduce their chance of getting HIV and STI by using a condom every time they have sex	Yes	185/286	64.7	62.2	55.9	68.1
It is possible for a healthy-looking person to have HIV/AIDS	Yes	127/286	44.4	41.9	35.9	48.1
People can get HIV from mosquito bites	No	94/286	32.9	35.9	29.4	41.5
People can get HIV by sharing food with a person who has HIV/AIDS	No	160/286	55.9	57.2	51.0	63.2
Heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer	Yes	168/286	58.7	57.5	51.2	63.5
HIV can be transmitted from mother to her baby during pregnancy	Yes	176/286	61.5	60.6	54.3	66.5
HIV can be transmitted from mother to her baby during delivery	Yes	178/286	62.2	61.8	55.5	67.7
HIV can be transmitted from mother to her baby by breastfeeding	Yes	202/286	70.6	68.9	62.8	74.4
There are special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby	Yes	140/286	49.0	47.4	41.3	53.7
GARPR 5.1: Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	Yes	8/286	2.8	2.2	1.0	4.6

3.3.4 General sexual history

Nearly all (96.9%) port workers have had vaginal sex compared to only 3.7% who have ever had anal sex. The average age at first vaginal sex among port workers in Mogadishu is 18.7 years. Thirty point eight per cent of port workers have ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse while uniformed officer's houses being used as places to engage in transactional sex. Most port workers meet their new transactional clients and engage in sex at the port worker's homes as shown in Table 38 below.

Table 38: General sexual history

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have ever had vaginal sex with a woman	Yes	275/286	96.2	96.9	94.4	98.3
Age at first vaginal sex	Mean±SD Range	18.7±4.5 0-51			18.2	19.2
Ever had anal sex with a woman	Yes	11/286	3.9	3.7	2.0	6.7
Ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse	Yes	91/286	31.8	30.8	25.3	36.8
Number of different sexual partners in total he had sexual intercourse with in the past one month	Mean±SD	3.0±3.1			2.3	3.7
	Range	0-17				
Where truckers meet most of their new transactional sex clients	Client's home	36/91	39.6	39.7	29.3	51.1
	At port worker's home	32/91	35.2	34.3	24.5	45.6
	Beach	3/91	3.3	2.7	0.8	9.5
	Hotel / Restaurant	7/91	7.7	7.9	3.6	16.6
	Khat shop	3/91	3.3	4.6	1.4	13.9
	Tea shop	5/91	5.5	5.1	1.8	13.7
	They call	4/91	4.4	-	-	-
	Through pimps/dalas	1/91	1.1	1.2	0.2	8.3

3.3.5 Sexual History with paying clients

Only 17.6% of port workers used a condom (male) in their last transactional sexual intercourse. However, most of port workers (77.0%) never use condoms. The average amount of money paid by a port worker to a FSW during last transactional sex is USD 1.4 while the majority (74.9%) of them paid between USD 0 – 5 as shown in Table 39.

Table 39: Sexual History with paying clients

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Interval	Confidence
Used a condom the last time had transactional sexual intercourse with a client	Yes	16/91	17.6	17.6	10.5	28.0
Type of condom	Male condom	16/16	100			
Person who suggested condom use at last transactional sexual intercourse	FSW	4/16	25.0	24.8	8.0	55.7
	Myself (port worker)	12/16	75.0	75.2	44.3	92.1
Frequency of using condoms with transactional clients over the last 30 days (1 month)	Every time	2/91	2.2	2.3	0.5	9.9
	Almost every time	1/91	1.1	1.5	0.2	10.5
	Sometimes	17/91	18.7	19.2	11.7	29.9
	Never	71/91	78.0	77.0	66.0	85.3
Number of female sex workers port worker had sex with on the last day	Mean±SD	1.4±0.8			1.3	1.6
	Range	1-4				
Amount of money paid during last transactional sex	0 - 5	70/91	76.9	74.9	63.7	83.6
	6 - 10	12/91	13.2	13.8	7.6	23.5
	11 - 20	4/91	4.4	4.6	1.6	12.5
	>= 21	5/91	5.5	6.7	2.6	16.2
	Mean±SD	6.9±1.0			4.9	8.8
	Range	1-50				

3.4.6 Sexual history with non-paying partners

Compared to condom use (17.6%) among port workers with last transactional clients, only 6.0% reported using a condom during their last sexual intercourse with a non-transactional clients. The average number of times a port worker had sexual intercourse with non-paying clients over the last 30 days is 2.0 times with port workers being the ones (76.2%) who mainly suggested condom use during last non-transactional sex as shown in Table 40.

Table 40: Sexual history with non-paying partners

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Number of times uniformed officer had sexual intercourse with a non-transactional sexual partner over the last 30 days (1 month)	Mean±SD	2.0±0.2			1.6	2.4
	Range	0-30				
Used a condom last time he had sexual intercourse with non-paying/ transactional sexual partner	Yes	13/221	5.9	6.0	3.4	10.5
Person who suggested condom use at last non-transactional sexual intercourse	Joint decision	1/13	7.7	9.6	1.0	53.4
	My partner	2/13	15.4	14.2	2.7	49.4
	Myself (port worker)	10/13	76.9	76.2	40.7	93.7

3.4.7 Availability and use of male condom

More than three quarters (75.3%) of port workers in Mogadishu have ever heard of or seen a male condom and 46.0% know a place or person where to obtain male condoms. However, only 9.0% have ever used a male condom. Very few port workers received male condoms (1.6%) or counselling on condom use (1.6%) twelve months prior to this survey even though 86.3% perceive male condoms to be affordable as shown in Table 41.

Table 41: Availability and use of male condom

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a male condom	Yes	220/286	76.9	75.3	69.4	80.3
Ever used a male condom with a sexual partner	Yes	18/220	8.2	9.0	5.5	14.2
Knows of a place or person where to obtain male condoms	Yes	107/220	48.6	46.0	39.0	53.2
Usually carries condoms	Yes	14/218	6.4	6.2	3.5	10.7
Received condoms in the past 3 months	Yes	4/220	1.8	1.6	0.5	4.6

Received counselling on condom use and safe sex in the past three months	Yes	4/220	1.8	1.6	0.5	4.6
Person who usually supplies the condoms	Client (FSW) Never use a condom Myself	2/210 189/210 19/210	1.0 90.0 9.1	1.1 90.2 8.7	0.3 84.9 5.4	4.5 93.7 13.8
Affordability of male condom	Affordable Not affordable Somewhat affordable	169/195 11/195 15/195	86.7 5.6 7.7	86.3 5.8 7.9	80.0 3.1 4.6	90.8 10.7 13.3

3.4.8 Availability and use of female condom

Unlike male condoms, fewer port workers in Mogadishu have ever heard (5.1%), used (8.9%) or know where to obtain (21.7%) female condoms as shown in Table 42.

Table 42: Availability and use of female condom

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a female condom	Yes	14/286	4.9	5.1	3.0	8.6
Ever used a female condom with a sexual partner	Yes	1/14	7.1	8.9	0.9	50.3
Knows of a place or person where to obtain female condoms	Yes	3/14	21.4	21.7	5.9	55.2
Places where he can obtain female condoms	Local NGO	1/3	33.3	29.4	0	99.6
	Pharmacy	2/3	66.7	70.6	0.4	99.9

3.4.9 HIV testing history and avoidance of HIV services

Few (12.4%) port workers in Mogadishu know where to go for a HIV test and subsequently only 5.7% have ever received an HIV test. However, only 3.5% know their HIV status from an HIV test within the past twelve months prior to this study. Lack of awareness on where to go for an HIV test is cited by the majority (93.5%) of port workers in Mogadishu as the reason for having never sought for an HIV test. Overall, 6.2% of port workers in Mogadishu avoid HIV services due to stigma and discrimination among FSWs as shown in Table 43.

Table 43: HIV testing history and avoidance of HIV services

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Knows where to go if he wishes to receive a confidential HIV test	Yes	38/282	13.5	12.4	8.9	16.9
Knows his HIV status from an HIV test	Have ever been tested	19/286	6.6	5.7	3.6	9.0
When last tested	Less than 6 months	5/19	26.3	24.6	8.8	52.6
	6-12 months	7/19	36.8	37.1	16.7	63.6
	More than 12 months	7/19	36.8	38.3	17.4	64.6
Result of last HIV test	Negative	19/19	100	100	-	-
Nature of HIV testing	Voluntary	10/19	52.6	51.9	27.4	75.5
	Required	9/19	47.4	48.1	24.5	72.6
During most recent HIV counselling/ testing, revealed to the health provider that he is engaged in transactional sex	Yes	0/6	0.0	0.0	-	-
Reasons for having never sought for an HIV test	Fear of or concern about stigma by staff or neighbours	13/268	4.9	3.6	1.9	6.5
	Fear of or concern about or experienced violence	5/268	1.9	2.0	0.8	4.9
	Fear of or concern about or experienced police harassment or arrest	2/268	0.8	1.0	0.2	3.9
	Didn't know where to go for an HIV test	248/268	92.5	93.5	89.6	96.0
GARPR 3.4: Knows his/her HIV status from an HIV test	Yes	12/286	4.2	3.5	1.9	6.4
GARPR 4.2: Avoidance of HIV services because of stigma and discrimination among key populations	Yes	20/286	7.0	6.2	3.8	9.8

3.3.10 Physical and Sexual violence

Few (4.1%) of port workers in Mogadishu have seen or heard of a woman being hit, kicked, or beaten because someone believed they sell sex to men. In addition, 18.0% of port workers in Mogadishu have seen or heard of a FSW being physically forced to have sexual intercourse against their will mostly by their family or relative, and people they do not know as illustrated in Table 44.

Table 44: Physical and Sexual violence

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have seen/heard of a woman being hit, kicked, or beaten because someone believed she sells sex to men someone believed they sell sex to men in the past 12 months	Yes	12/286	4.2	4.1	2.2	7.4
Person who last hit, kicked, or beat the female sex worker	Social acquaintance	1/12	8.3	5.8	0.6	40.9
	Family and relatives	5/12	41.7	42.3	14.9	75.5
	Other sex worker	1/12	8.3	6.9	0.7	45.3
	Client	1/12	8.3	6.9	0.7	45.3
	Don't know the person	4/12	33.3	37.0	11.3	73.0
Have seen/heard of a woman being forced to have sex with a man by sexually assaulting or raping her intercourse against her will in the past 12 months	Yes	61/286	21.3	18.0	13.9	23.0
Person who last forced her to have sex with them against her will	Social acquaintance	3/61	4.9	6.0	1.8	18.2
	Police	12/61	19.7	17.8	9.8	30.1
	Police	1/61	1.6	2.5	0.3	16.5
	Other sex worker	1/61	1.6	1.3	0.2	9.3
	Client	7/61	11.5	12.4	5.7	24.6
	Family or relative	19/61	31.2	30.3	19.2	44.4
	Don't know the person	18/61	29.5	29.7	18.8	43.7
	Other					
Sought medical treatment after being physically forced to have sexual intercourse against her will	Yes	40/58	69.0	68.1	53.7	79.7
Reported this incident to the police	Yes	41/60	68.3	69.3	55.5	80.4

3.3.11 Programme coverage

Generally, the coverage of HIV prevention programmes among port workers in Mogadishu is very low (0.4%). Furthermore, only 3.7% and 0.5% of port workers are aware of any Local NGO here that deliver non-medical assistance or advice to members of your group and have attended any meetings to discuss STI or HIV/AIDS during the last 12 months respectively as shown in Table 45.

Table 45: Programme coverage

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Aware of any Local NGO here that deliver non-medical assistance or advice to members of your group	Yes	9/281	3.2	3.7	1.9	7.0
Have attended any meetings to discuss STI or HIV/AIDS during the last 12 months	Yes	2/286	0.7	0.5	0.1	2.2
Attended the sites he was referred to	Yes	N/A				
GARPR 3.7 Coverage of HIV prevention programmes among key populations	Yes	1/287	0.4	0.4	0	2.6

3.3.12 Alcohol and drug use in the past three months

Only 15.0% port workers in Mogadishu consume alcohol compared to 80.8% who consume khat. In addition, 72.7% of truckers smoke cigarette. Other drugs and substances consumed include marijuana or hashish (14.3%), and shisha smoking (18.6%). Only 26.4% of port workers reported having had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette.

Table 46: Alcohol and drug use in the past three months

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Frequency of having a drink containing alcohol during the past three months	Never	237/285	83.2	85.0	80.1	88.8
	Monthly or less	24/285	8.4	7.4	4.8	11.2
	2-4 times a month	8/285	2.8	2.9	1.4	6.1
	2-3 times a week	2/285	0.7	0.5	0.1	2.2
	4 or more times a week	14/285	4.9	4.2	2.4	7.4
Frequency of chewing khat during the past three months	Never	57/285	20.0	19.2	14.8	24.5
	Monthly or less	14/285	4.9	5.6	3.3	9.4
	2-4 times a month	19/285	6.7	7.2	4.5	11.4
	2-3 times a week	24/285	8.4	7.5	4.9	11.4
	4 or more times a week	171/285	60.0	60.5	54.3	66.4
Frequency of smoking marijuana or hashish during the past three months	Never	240/286	83.9	85.7	81.0	89.4
	Monthly or less	13/286	4.6	3.6	2.0	6.5
	2-4 times a month	3/286	1.1	0.9	0.3	2.8
	2-3 times a week	5/286	1.8	1.3	0.5	3.2
	4 or more times a week	25/286	8.7	8.5	5.6	12.5
Frequency of smoking cigarette during the past three months	Never	78/286	27.3	28.5	21.2	34.5
	Monthly or less	7/286	2.5	2.8	1.3	5.9
	2-4 times a month	7/286	2.5	3.2	1.5	6.6
	2-3 times a week	9/286	3.2	2.6	1.3	5.3
	4 or more times a week	185/286	64.7	62.9	56.7	68.8

Frequency of smoking shisha during the past three months	Never	230/286	80.4	81.4	76.1	85.7
	Monthly or less	22/286	7.7	7.8	5.0	11.9
	2-4 times a month	9/286	3.2	2.9	1.5	5.9
	2-3 times a week	6/286	2.1	2.7	1.2	6.0
	4 or more times a week	19/268	6.6	5.2	3.2	8.2
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette	Yes	78/286	27.3	26.4	21.3	32.3
Frequency of injecting drugs during the past three months	Monthly	8/286	2.8	2.1	1.0	4.2
	Never	277/286	96.9	97.6	95.3	98.8
	4 or more times in a week	1/286	0.4	0.4	0	2.4
Type of drug injected	Cocaine	4/9	44.4	46.4	13.9	82.3
	Memphetamaine	4/9	44.4	43.8	12.6	80.8
	Other	1/9	11.1	9.8	0.8	59.5
Used a sterile needle and syringe during last injectable drug use	Yes	9/9	100	-	-	-
Shared a syringe or needle with anyone else when injecting drugs	Yes	2/9	22.2	22.3	3.6	68.6
Received new, clean needles or syringes in the past three months	Yes	9/9	100	100	-	-

3.4.0 Socio-demographic characteristics

A total of 286 truckers participated in the study. The average age of truckers in Mogadishu is 31.0 years with nearly half (49.8%) of the respondents aged 25 to 34 years. Most truckers (70.8%) no education and most of them (85.9%) had stayed in Mogadishu for more than two years. More than half (64.3%) are married with an average of 6.5 dependents with an average monthly income of 183.6 as shown below in Table 47.

Table 47: Socio-demographic characteristics

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Age (Years)	Mean±SD	31.0±8.0	-		30.1	31.9
	Range					
	< 25 years	18 - 57				
	25+ years	226/286	79.0	78.4	72.9	82.9
		60/286	21.0	21.7	17.1	27.1
	18 – 24	60/286	21.0	21.7	17.1	27.1
	25 - 34	145/286	50.7	49.8	43.8	55.8
	35 - 44	61/286	21.3	21.1	16.6	26.4
	45 +	20/286	7.0	7.5	4.8	11.4
Education level	None	202/286	70.6	70.8	65.0	78.0
	Primary	55/286	19.2	18.8	14.5	23.9
	Secondary	28/286	9.8	10.3	7.2	14.7
	University / College	1/286	0.4	0.4	0	0.7
Nationality	Somalia	286/286	100	100	-	-
Length of stay in Mogadishu	Less than 7 days	6/286	2.1	2.1	0.9	4.7
	7 days – 1 month	10/286	33.5	3.3	1.8	6.2
	2 – 3 months	10/286	3.5	3.7	2.0	6.7
	4 – 6 months	3/286	1.1	0.9	0.3	2.9
	7 – 11 months	3/286	1.1	0.8	0.3	2.6
	1 – 2 years	11/286	3.9	3.3	1.8	6.0
	More than 2 years	243/286	85.0	85.9	81.3	89.5
Frequency of visiting his family	Daily	39/286	13.6	13.2	9.6	17.8
	Once in a week	59/286	20.6	20.9	16.4	26.2
	>once in a week	28/286	9.8	9.2	6.3	13.2
	Once in a month	38/286	13.3	13.0	9.5	17.6
	Twice in a month	110/286	38.5	39.3	33.6	45.3
	2 - 3 months	7/286	2.5	2.5	1.2	5.3
	>3 months	5/286	1.8	2.0	0.8	4.7
Marital status	Single	33/286	11.5	11.9	8.5	16.4
	Married	186/286	65.0	64.3	58.3	69.8
	Separated	54/286	18.9	19.6	15.2	24.8
	Divorced	10/286	3.5	3.7	2.0	7.0
	Widowed	3/286	1.1	0.6	0.2	2.0
Number of dependents	Mean±SD	6.5±3.4			6.1	6.9
	Range	0 - 21				
Frequency of visiting	Never	25/286	8.7	8.7	5.8	12.8
	Weekly	76/286	26.6	27.2	22.2	33.0

neighbouring countries	Monthly	157/286	54.9	55.2	49.2	61.1
	Every 2 – 3 months	13/286	4.6	3.9	2.2	7.0
	After > 3 months	15/286	5.2	4.9	2.9	8.2
Overall monthly income in USD	< 100	41/286	14.3	14.0	10.3	18.6
	100 - 499	236/286	82.5	83.0	78.1	87.1
	>= 500	9/286	3.2	3.0	1.5	5.8
	Mean±SD	183.6±114.1	-	-	170.2	196.8
	Range	20-700	-	-	-	-

3.4.1 HIV and syphilis prevalence

The overall prevalence of HIV and syphilis infection among truckers in Mogadishu is 0.5% and 1.2% respectively. None of the four syphilis infections was active as shown in Table 48. However, there was no HIV and syphilis comorbidity.

Table 48: HIV and syphilis prevalence

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
HIV	3/286	1.1	0.5	0.1	2.5
Syphilis – Ever infected	4/286	1.4	1.2	0.4	3.3
Syphilis – Active infection	0/286	0	-	-	-

3.4.2 Patterns of STI care and treatment seeking behaviour

Most truckers (96.4%) have heard of HIV and AIDS compared to those who have heard of other STIs (57.5%). While 15.5% of truckers had received an STI test in the past three months, only 7.5% have been diagnosed to have an STI twelve months prior to this survey. Comparatively, 14.9% of truckers have experienced an abnormal penile discharge in the past 12 months prior to this study and sought STI treatment. In addition, only 3.0% of truckers have had a sore or ulcer on or near their penis in the past 12 months prior to this survey and sought treatment as shown in Table 49.

Table 49: Patterns of STI care and treatment seeking behaviour

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of HIV/AIDS	Yes	281/286	98.3	98.5	96.4	99.4
Heard about other infections that can be transmitted through sex	Yes	26/173	60.5	57.5	51.4	63.3
Tested for sexually transmitted infections in the past three months	Yes	173/286	15.0	15.5	10.6	22.2
Diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	Yes	19/173	11.0	11.8	7.5	18.0
Had an abnormal discharge from their penis in the past 12 months	Yes	46/285	16.1	14.9	11.2	19.5
Had an abnormal discharge from their penis in the past 12 months and sought treatment	Yes	24/46	52.2	54.1	38.7	68.8
Reasons for not seeking treatment for the sore or ulcer on or near penis or anus	Could not afford	1/4	25.0	32.9	0.6	97.4
	Didn't think I needed it	3/4	75.0	32.9	0.6	99.4
Had a sore or ulcer on or near penis or anus in the last 12 months		9/286	3.2	3.0	1.5	5.8
In the last 12 months, had a sore or ulcer on or near penis or anus and sought treatment	Yes	4/9	44.4	44.4	12.7	81.5
Type of treatment	Injections and	2/4	50.0	38.9	1.6	96.2
	Tablets	2/4	50.0	61.1	3.8	98.4

3.4.3 Knowledge on transmission of HIV and STI

There is varied knowledge among truckers on HIV prevention and transmission with 45.8% (knowledge on existence of special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby) as the lowest score to 81.2% (know HIV can be transmitted from mother to baby during breastfeeding) as the highest score. The overall composite knowledge among truckers who correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission is however low (21.3%) as shown in Table 50.

Table 50: Knowledge on transmission of HIV and STI

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Risk of HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners	Yes	226/286	79.0	79.0	73.7	83.5
People can reduce their chance of getting HIV and STI by using a condom every time they have sex	Yes	181/286	63.3	62.7	56.7	68.4
It is possible for a healthy-looking person to have HIV/AIDS.	Yes	160/286	55.9	55.8	49.7	61.7
People can get HIV from mosquito bites	No	150/286	52.5	50.8	44.8	56.7
People can get HIV by sharing food with a person who has HIV/AIDS	No	198/286	69.2	69.0	63.1	74.3
Heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer	Yes	169/286	59.1	58.3	52.3	64.1
HIV can be transmitted from mother to her baby during pregnancy	Yes	206/286	72.0	73.1	67.4	78.1
HIV can be transmitted from mother to her baby during delivery	Yes	215/286	75.2	75.7	70.2	80.5
HIV can be transmitted from mother to her baby by breastfeeding	Yes	230/286		81.2	76.1	85.5
There are special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby	Yes	136/286	47.6	45.8	39.9	51.8
GARPR 5.1: Knowledge on HIV prevention and misconceptions		66/286	23.1	21.3	16.9	26.6

3.4.4 General sexual history

Most (90.8%) truckers have had vaginal sex compared to only 5.4% who have ever had anal sex. The average age at first vaginal sex among truckers in Mogadishu is 18.3 years. Twenty three point three percent of truckers have ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse while uniformed officer's houses being used as places to engage in transactional sex. More than one third (38.0%) of truckers meet their new transactional clients and engage in sex at the uniformed personnel's homes as shown in Table 51 below.

Table 51: General sexual history

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Interval	Confidence
Have ever had vaginal sex with a woman	Yes	273/285	95.8	95.1	90.8	97.5
Age at first vaginal sex	Mean±SD	18.3±3.8			17.8	18.7
	Range	10-34				
Ever had anal sex with a woman	Yes	16/285	5.6	5.4	3.3	8.8
Ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse	Yes	66/286	23.1	23.3	18.6	28.7
Number of different sexual partners in total he had sexual intercourse with in the past one month	Mean±SD	2.0±0.5			1.1	3.0
	Range	0-25				
Where truckers meet most of their new transactional sex clients	Client's home	26/66	39.4	38.0	26.6	50.8
	At trucker's home	17/66	25.8	27.2	17.3	39.9
	Beach	4/66	6.1	5.8	2.1	15.0
	Hotel / Restaurant	2/66	3.0	3.7	0.9	14.1
	Town street or highway	4/66	6.1	6.5	2.4	16.5
	Others	5/66	7.6	6.2	2.4	14.9
	They call	8/66	12.1	12.7	6.3	23.9

3.4.5 Sexual History with paying clients

The proportion of truckers who used a male condom in their last transactional sexual intercourse is 24.4%. In most instances (53.3%), it is the truckers who suggested condom use. However, only 4.2% of use condoms every time. The average amount of money paid by a uniformed officer to a FSW during last transactional sex is USD 16.0 while the majority (52.6%) of them paid between USD 0 – 5 as shown in Table 52.

Table 52: Sexual History with paying clients

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Used a condom the last time had transactional sexual intercourse with a client	Yes	16/66	24.2	24.4	15.2	36.8
Type of condom	Male condom	16/16	100	100	-	-
Person who suggested condom use at last transactional sexual intercourse	FSW	6/16	37.5	40.0	16.7	68.9
	Myself (trucker)	9/16	56.3	53.3	26.4	78.5
	Joint decision	1/16	6.3	6.7	0.7	41.1
Frequency of using condoms with transactional clients over the last 30 days (1 month)	Every time	3/65	4.6	4.2	1.2	13.3
	Almost every time	1/65	1.5	1.6	0.2	10.7
	Sometimes	15/65	23.1	22.9	13.9	35.2
	Never	46/65	70.8	71.4	58.7	81.4
Number of female sex workers uniformed officer had sex with on the last day	Mean±SD	2.0±3.8			1.1	3.0
	Range	0 - 25				
Amount of money paid during last transactional sex in USD	0 - 5	33/64	51.6	52.6	39.8	65.1
	6 - 10	11/64	17.2	14.5	7.7	25.6
	11 - 20	8/64	12.5	12.4	6.2	23.4
	>= 21	12/64	18.8	20.5	11.8	33.1
	Mean±SD	16.0±3.2				
	Range	1-120				

3.4.6 Sexual history with non-paying partners

The proportion of truckers who reported using a condom during their last non-transactional client is 12.7%. The average number of times a truckers had sexual intercourse with non-paying clients over the last 30 days is 2.4 times with truckers being the majority (74.6%) who suggested condom use during last non-transactional sex as shown in Table 53.

Table 53: Sexual history with non-paying partners

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Number of times uniformed officer had sexual intercourse with a non-transactional sexual partner over the last 30 days (1 month)	Mean±SD Range	2.4±0.2 0-22			1.9	2.9
Used a condom last time he had sexual intercourse with non-paying/transactional sexual partner	Yes	16/136	11.8	12.7	7.6	20.4
Person who suggested condom use at last non-transactional sexual intercourse	Joint decision	1/23	4.4	4.2	0.5	28.0
	My partner	5/23	21.7	21.2	7.7	46.3
	Myself	17/23	73.9	74.6	49.8	89.7

3.4.7 Availability and use of male condom

Whereas 83.8% of truckers in Mogadishu have ever heard of or seen a male condom and 61.8% know a place or person where to obtain male condoms, only 13.8% have ever used a male condom. Very few truckers received male condoms (5.1%) or counselling on condom use (10.1%) twelve months prior to this survey even though 40.5% perceive male condoms to be affordable as shown in Table 54.

Table 54: Availability and use of male condom

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a male condom	Yes	237/286	82.9	83.8	79.0	87.7
Ever used a male condom with a sexual partner	Yes	34/237	14.4	13.9	10.0	19.1
Knows of a place or person where to obtain male condoms	Yes	147/237	62.0	61.8	55.2	68.0
Usually carries condoms	Yes	17/235	7.2	6.3	3.9	10.3
Received condoms in the past 3 months	Yes	15/236	6.4	5.1	2.9	8.7
Received counselling on condom use and safe sex in the past three months	Yes	26/236	11.0	10.1	6.8	14.7
Person who usually supplies the condoms	Client (FSW)	10/225	4.4	4.7	2.5	8.6
	Never use a condom	195/225	86.7	87.0	81.7	90.9
	Myself (trucker)	20/225	8.9	8.4	5.4	12.9

Affordability of male condom	Affordable	62/154	40.3	40.5	32.8	48.8
	Not affordable	56/154	36.4	37.0	29.4	45.2
	Somewhat affordable	36/154	23.4	22.5	16.5	30.0

3.4.8 Availability and use of female condom

Unlike male condoms, fewer truckers in Mogadishu have ever heard (11.9%), used (10.4%) or know where to obtain (31.1%) female condoms as shown in Table 55.

Table 55: Availability and use of female condom

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a female condom	Yes	38/286	13.3	11.9	8.5	16.3
Ever used a female condom with a sexual partner	Yes	5/38	13.2	10.4	3.7	25.9
Knows of a place or person where to obtain female condoms	Yes	16/38	42.1	31.1	17.8	48.6

3.4.9 HIV testing history and avoidance of HIV services

Only 34.2% truckers in Mogadishu know where to go for a HIV test although 20.4% have ever received an HIV test in lifetime. However, only 11.4% know their HIV status from an HIV test within the past twelve months prior to this study. Lack of awareness on where to go for an HIV test is cited by the majority (75.2%) of truckers in Mogadishu as the reason for having never sought for an HIV test. Overall, 22.3% of truckers in Mogadishu avoid HIV services due to stigma and discrimination among FSWs as shown in Table 56.

Table 56: HIV testing history and avoidance of HIV services

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Knows where to go if he wishes to receive a confidential HIV test	Yes	99/283	35.0	34.2	28.7	40.2
Knows his HIV status from an HIV test	Have ever been tested	60/286	21.0	20.4	16.0	25.8
When last tested	Less than 6 months	24/60	40.0	42.2	29.5	56.1
	6-12 months	16/60	26.7	26.5	16.3	40.0
	More than 12 months	20/60	33.3	31.3	20.1	45.2
Result of last HIV test	Positive	2/60	3.3	0.5	0.1	2.1
	Negative	58/60	96.7	99.5	98.0	99.9
	Indeterminate	0/60	-	-	-	-
Nature of HIV testing	Voluntary	15/60	25.0	23.2	12.6	38.7
	Required	45/60	75.0	76.9	61.3	87.4
During most recent HIV counselling/ testing, revealed to the health provider that he is engaged in transactional sex	Yes	4/16	25.0	23.6	7.6	53.9
Reasons for having never sought for an HIV test	Fear of or concern about stigma by staff or neighbours	37/230	16.1	14.7	10.6	20.1
	Fear of or concern about or experienced violence	1/230	0.4	0.8	0.1	5.8
	Fear of or concern about or experienced police harassment or arrest	22/230	9.6	9.3	5.8	14.5
	Didn't know where to go for an HIV test	170/230	73.9	75.2	68.7	80.7
GARPR 3.4: Knows his/her HIV status from an HIV test	Yes	42/286	14.7	14.2	10.4	18.9
GARPR 4.2: Avoidance of HIV services because of stigma and discrimination among key populations	Yes	60/286	21.0	22.3	17.6	27.8

3.4.10 Physical and Sexual violence

Almost one quarter (23.5%) of truckers in Mogadishu have seen or heard of a woman being hit, kicked, or beaten because someone believed they sell sex to men. In addition, 19.3% of truckers in Mogadishu have seen or heard of a FSW being physically forced to have sexual intercourse against their as presented in Table 57.

Table 57: Physical and Sexual violence

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have seen/heard of a woman being hit, kicked, or beaten because someone believed she sells sex to men someone believed they sell sex to men in the past 12 months	Yes	68/286	23.8	23.5	18.8	28.9
Have seen/heard of a woman being forced to have sex with a man by sexually assaulting or raping her intercourse against her will in the past 12 months	Yes	56/284	19.7	19.3	15.0	24.5
Sought medical treatment after being physically forced to have sexual intercourse against her will	Yes	8/36	22.2	18.3	8.7	34.5
Reported this incident to the police	Yes	12/41	29.3	26.6	14.9	42.9

3.4.11 Programme coverage

Overall, the coverage of HIV prevention programmes among truckers in Mogadishu is low (5.1%). Furthermore, only 17.6% and 4.1% of truckers are aware of any Local NGO here that deliver non-medical assistance or advice to members of your group and have attended any meetings to discuss STI or HIV/AIDS during the last 12 months respectively as shown in Table 58.

Table 58: Programme coverage

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Aware of any Local NGO here that deliver non-medical assistance or advice to members of your group	Yes	51/277	18.4	17.6	13.4	22.7
Have attended any meetings to discuss STI or HIV/AIDS during the last 12 months	Yes	14/282	5.0	4.1	2.3	7.1
Attended the sites he was referred to	Yes	5/8	62.5	61.7	18.0	92.2
GARPR 3.7 Coverage of HIV prevention programmes among key populations	Yes	9/286	3.2	5.1	2.1	12.2

3.4.12 Alcohol and drug use in the past three months

Eleven point four per cent of truckers in Mogadishu consume alcohol compared to 75.5% who consume khat. In addition, 67.0% of truckers smoke cigarette. Other drugs and substances consumed include marijuana or hashish (12.1%), and shisha smoking (17.9%). Only 16.5% of truckers reported having had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette.

Table 59: Alcohol and drug use in the past three months

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Frequency of having a drink containing alcohol during the past three months	Never	254/286	88.8	89.6	85.5	92.7
	Monthly or less	20/286	7.0	6.5	4.1	10.1
	2-4 times a month	3/286	1.1	0.9	0.3	2.9
	2-3 times a week	5/286	1.8	1.7	0.7	4.1
	4 or more times a week	4/286	1.4	1.3	0.5	3.5
Frequency of chewing khat during the past three months	Never	74/285	26.0	24.5	19.8	30.0
	Monthly or less	28/285	9.8	8.8	6.0	12.7
	2-4 times a month	24/285	8.4	8.2	5.5	12.1
	2-3 times a week	47/285	16.5	18.1	13.9	23.4
	4 or more times a week	112/285	39.3	40.3	34.5	46.4
Frequency of smoking marijuana or hashish during the past three months	Never	252/286	88.1	87.9	83.4	91.3
	Monthly or less	8/286	2.8	2.7	1.3	5.4
	2-4 times a month	5/286	1.8	1.9	0.8	4.6
	2-3 times a week	10/286	3.5	3.7	2.0	6.9
	4 or more times a week	11/286	3.9	3.8	2.1	6.9
Frequency of smoking cigarette during the past three months	Never	98/286	34.3	33.0	27.6	38.8
	Monthly or less	15/286	5.2	5.4	3.2	8.9
	2-4 times a month	9/286	3.2	2.8	1.4	5.4
	2-3 times a week	24/286	8.4	8.5	5.7	12.5
	4 or more times a week	140/286	8.4	8.5	5.7	12.5
Frequency of smoking shisha during the past three months	Never	234/286	81.8	82.1	77.0	86.2
	Monthly or less	25/286	8.7	8.8	5.9	12.9
	2-4 times a month	7/286	2.5	2.5	1.2	5.1
	2-3 times a week	8/286	2.8	2.5	1.2	5.1
	4 or more times a week	12/286	4.2	4.2	2.4	7.4
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette		49/286	17.1	16.5	12.5	21.3

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3.5 Female Sex Workers

A total of 286 female sex workers were recruited. Eight initial seeds were purposely recruited through contacts with staff working at Global Fund sub-recipients working in Bossaso. The seeds were recruited to represent diverse characteristics including varied age and coming from different parts of Bossaso.

3.5.0 Response rate and eligibility

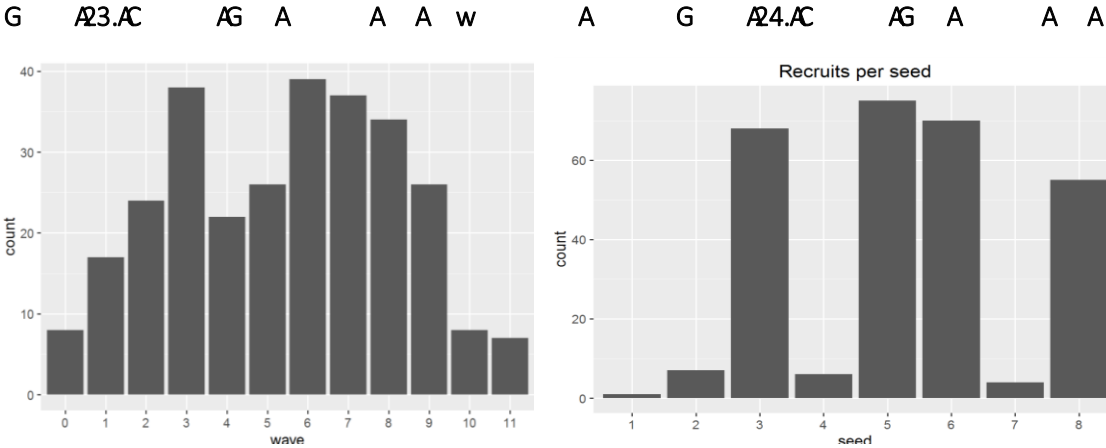
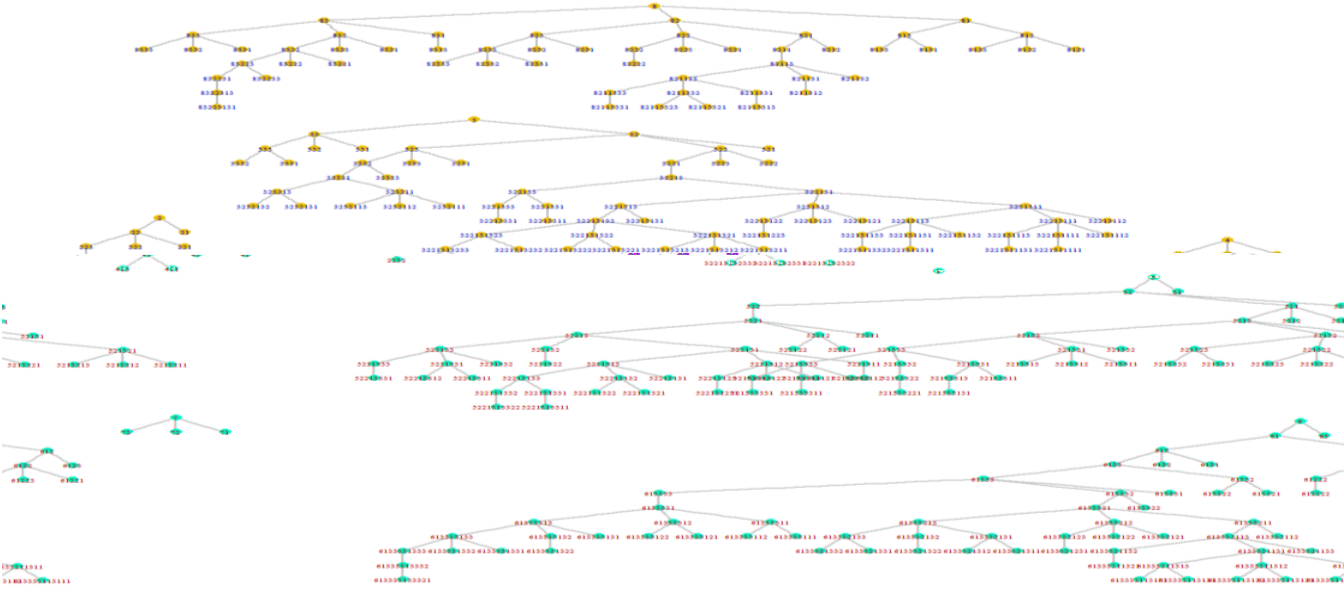
A total of 659 coupons were distributed. Less than half (44.6%) were returned by FSW at data collection site. However, 2.7% of FSW who returned coupons were not eligible and were therefore not allowed to participate in the survey. Among those ineligible, most (62.5%) of them were not FSW. None of the FSW refused to accept coupons from the coupon manager as shown in Table 60.

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Characteristic	Sample proportions	
	n/N	%
Coupons distributed	659	-
Coupons returned	294/659	44.6
FSW who rejected coupons	0/286	0.0
Participants ineligible	8/294	2.7
Reasons for ineligibility		
Not FSW	5/8	62.5
Under 18 years	3/8	37.5

3.5.1 Network properties

The recruitment tree for FSW in Bossaso is illustrated in Figure 11 below. This tree indicates eight FSW seeds and the accompanying recruitment chains. The maximum number of waves reached from one seed is 11 whereas the least is zero as shown in figure 12. While seed one and seven had the least recruits, seed 5 had the highest number of recruits as shown in figure 13.

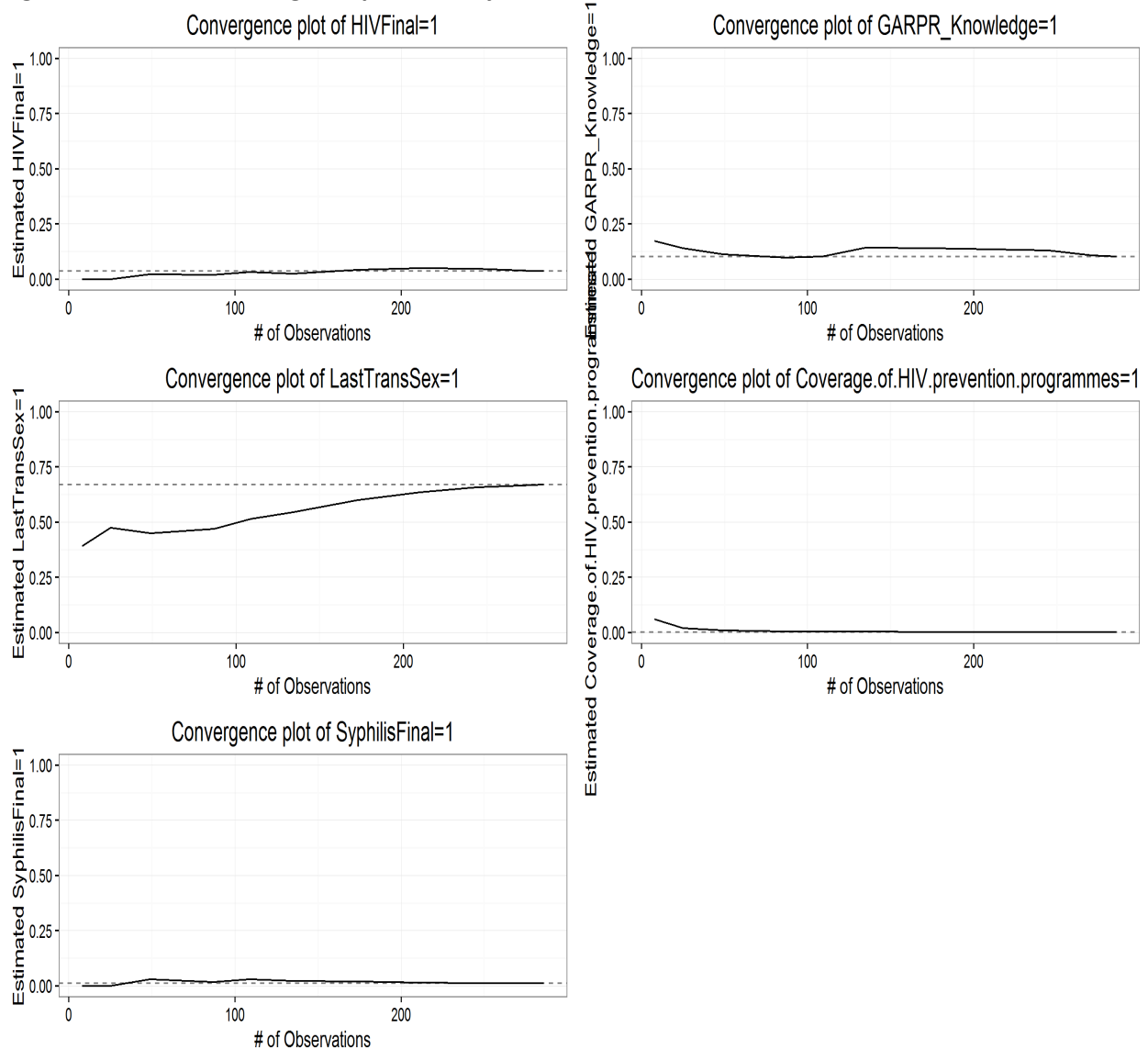
Figure 11: FSW recruitment tree



3.5.2 Convergence

Convergence was reached on five key indicators as shown in figure 14. The five key GARPR indicators tested to establish convergence comprised HIV prevalence, syphilis prevalence, knowledge on HIV, condom use at last transactional sexual intercourse, and coverage of HIV prevention programmes.

Figure 14: Bossaso convergence plots on key indicators



3.5.3 Socio-demographic characteristics

The average age of FSW in Bossaso is 28.4 years with the majority (54.0%) of FSW aged 25 to 34 years. Whereas most FSW are of Somali nationality (91.7%), more than half (54.3%) were born in South Central Somalia. Majority of the FSW (67.3%) have no education. More than three quarters of FSW (85.9%) have stayed in Bossaso for more than 2 years. Most FSW in Bossaso are divorced (82.4%) although most are living with children. Besides sex work, 71.1% of FSW earn money also doing other work, most often domestic work and tea selling. However, more than half of the FSW (64.4%) earn USD 100 or less as monthly income. Finally, all FSW have been circumcised, as shown below in Table 61.

Table 61: Socio-demographic characteristics

Characteristic	Sample proportions		Population Estimates
	n/N	%	% (95% Confidence Interval)
Age	Range = 18 – 49 Mean±SD = 28.7±6.1 Median = 28.0		28.4±6.0 27.0
	<25 Yrs	67/286	23.4
	25+ Yrs	219/286	76.6
	18 – 24	67/286	23.4
	25 – 34	153/286	53.4
	35 – 44	62/286	21.7
	45 or more	4/286	1.4
Level of education	None	197/286	68.9
	Primary	69/286	24.1
	Secondary	20/286	7.0
Nationality	Djibouti	7/286	2.4
	Ethiopia	13/286	4.5
	Somalia	266/286	93.0
Place of birth	Djibouti	2/286	0.6
	Ethiopia	10/286	3.5
	Puntland	61/286	21.3
	Somaliland	47/286	16.4
	South Central Somalia	166/286	58.0
Length of stay in Bossaso	2 – 3 Months	1/286	0.3
	7 – 11 Months	2/286	0.6
	1 – 2 Years	31/286	10.8
	More than 2 Years	252/286	88.1
Marital status	Divorced	229/286	80.1
	Married	11/286	3.8
	Single	20/286	7.0
	Widowed	26/286	9.1
Proportion of married FSW whose spouse/partner has another wife or wives	7/11	63.6	62.4 (20.5 – 64.6)
Person the FSW is currently living with	Children	186/285	65.3
	Roommate	26/285	9.1
	Alone	25/285	8.8
	Other Family	41/285	14.4

	Siblings	7/285	2.5	2.5 (0 – 5.8)
Proportion of FSW who currently earn money doing work other than sex work	205/286		71.7	71.1 (64.5 – 77.6)
Type of other work currently done (multiple answers possible)	Tea Seller	68/205	33.2	31.5 (23.9 – 39.0)
	Hotel Worker	39/205	19.0	18.7 (12.3 – 25.1)
	Khat Seller	16/205	7.8	6.9 (3.7 – 9.9)
	Cleaning Shops	19/205	9.3	8.0 (3.3 – 12.5)
	Domestic Worker	61/205	29.8	32.1 (24.1 – 40.3)
	Trader	1/205	0.5	1.7 (0 – 4.8)
	Other	14/205	6.8	6.8 (2.7 – 10.9)
Overall monthly household income (in USD)	Range = 20 – 800 Mean±SD = 114.7±125.9 Median = 80.0			118.5±130.1 90.0
	=< 100	188/286	65.7	64.4 (57.3 – 71.6)
	More than 100	98/286	34.3	35.6 (28.5 – 42.7)
Number of people she is currently supporting	Range = 0 – 14 Mean±SD = 3.4±2.8 Median = 3			
	0	63/286	22.0	23.5 (16.6 – 30.4)
	1 – 5	156/286	54.9	55.3 (48.1 – 62.6)
	6 – 10	64/286	22.4	20.6 (15.2 – 26.1)
	More than 10	3/286	0.1	0.5 (0.1 – 0.9)
Undergone circumcision	286/286		100	-

3.5.4 HIV and syphilis prevalence

The overall prevalence of HIV and syphilis infection among FSW in Bossaso is 4.5% and 1.1% respectively. All FSW who are positive for syphilis have a currently active syphilis infection. In addition, HIV and syphilis comorbidity is 0.7% as shown in Table 62.

Table 62: HIV and syphilis prevalence

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
HIV	7/286	2.4	4.5	0.7 – 8.3
Syphilis – Ever infected	5/286	1.7	1.1	0.3 – 1.9
Syphilis – Active infection	5/286	1.7	1.1	0.3 – 1.9
HIV and syphilis comorbidity	2/286	0.7	0.4	0.02 – 0.7

3.5.5 Patterns of STI care and treatment seeking behaviour

Almost all FSW have heard of HIV/AIDS (98.3%) and of other infections that can be transmitted through sex (96.4%). While 30.5% of FSW had received an STI test in the past three months, only 12.7% have been diagnosed to have an STI twelve months prior to this study. In addition, 13.9% of FSW have experienced an abnormal discharge from their vagina in the past 12 months prior to this study with more than three quarters (80.5%) seeking STI treatment. Furthermore, 23.6% of FSW have had a sore or ulcer on or near their vagina in the past 12 months prior to this survey with only (19.0%) of them seeking treatment as shown in Table 63.

Table 63: Patterns of STI care and treatment seeking behaviour

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Proportion who have ever heard of HIV/AIDS	279/286	97.6	98.3	97.2 – 99.4
Proportion who have heard about other infections that can be transmitted through sex	272/286	95.1	96.4	95.0 – 97.9
Proportion of FSW who know at least one symptom of a sexually transmitted infection (among those who know of sexually transmitted infections)	269/272	98.9	99.4	99.1 – 99.6
Proportion of FSW tested for sexually transmitted infections in the past three months	77/286	26.9	30.5	23.6 – 37.4
Proportion of FSW diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	33/285	11.4	12.7	7.8 – 17.6
Proportion of FSW who have had an abnormal discharge from their vagina in the past 12 months	41/286	14.3	13.9	9.4 – 18.5
Proportion of FSW who had an abnormal discharge from their vagina in the past 12 months and sought treatment	31/41	75.6	80.6	70.3 – 92.5
Type of treatment received for abnormal discharge in the past 12 months among FSW who sought treatment (<i>multiple answers possible</i>)	Tablets 31/31 Cream 9/31 Injections 4/31	100 29.0 12.9	100 30.2 9.9	- 16.5 – 43.3 6.0 – 12.8
Reasons for not seeking treatment for abnormal discharge in the past 12 months among FSW who did not seek treatment (<i>multiple answers possible</i>)	Unable to get transport 5/8	62.5	67.0	38.9 – 98.5
	Could not Afford 5/8	62.5	67.0	38.4 – 98.5
Proportion of FSW who have had a sore or ulcer in the genital area in the past 12 months	5/286	1.7	23.6	0 – 47.5
Proportion of FSW who had a sore or ulcer in the genital area in the past 12 months and sought treatment	2/5	40.0	19.0	0 – 31.5

Type of treatment received for sore or ulcer in the genital area in the past 12 months among FSW who sought treatment (<i>multiple answers possible</i>)	Tablets 2/2 Cream 1/2	100 50.0	100 62.9	- 0 – 63.0
Reasons for not seeking treatment for sore or ulcer in the genital area in the past 12 months among FSW who did not seek treatment (<i>multiple answers possible</i>)	Embarrassed 2/3 Unable to get transport 1/3 Afford treatment 2/3	66.7 33.3 66.7	77.8 22.4 82.6	36.9 – 77.8 0 – 60.6 57.5 – 66.7

3.5.6 Knowledge on transmission of HIV and STI

There is varied knowledge among FSW regarding knowledge on HIV prevention and transmission. For instance, the majority of FSW know HIV can be transmitted from mother to baby during pregnancy (92.6%), delivery (91.2%), and breastfeeding (96.0%). In addition, 91.8% of FSW know that a healthy looking person can have HIV and AIDS whereas less than half (47.2%) of them know that one cannot get HIV from mosquito bites. More than three quarters (67.9%) of the FSW know that one can reduce their chance of getting HIV and STI by using a condom every time they have sex. One quarter (26.0%) of FSW know of antiretroviral treatment that can reduce the risk of HIV transmission from a woman infected with HIV to the baby. Contrastingly, the overall knowledge of ways of preventing the sexual transmission of HIV and rejection of major misconceptions about HIV transmission among FSW is very low (22.5%), as shown in Table 64.

Table 64: Knowledge on transmission of HIV and STI

Characteristic	Response	Sample proportions		Population Estimates	
		n/N	%	%	95% Confidence Interval
Risk of HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners	Yes	221/286	77.3	79.7	74.8 – 84.6
People can reduce their chance of getting HIV and STI by using a condom every time they have sex	Yes	184/286	64.3	67.9	61.6 – 74.2
It is possible for a healthy-looking person to have HIV/AIDS	Yes	260/286	90.9	91.8	88.4 – 95.3
People can get HIV from mosquito bites	No	139/286	48.6	47.2	40.1 – 54.3
People can get HIV by sharing food with a person who has HIV/AIDS	No	224/286	78.3	79.0	73.7 – 84.4
Have heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer	Yes	157/286	54.9	59.1	52.1 – 66.1
HIV can be transmitted from mother to her baby during pregnancy	Yes	264/286	92.3	92.6	89.2 – 96.1
HIV can be transmitted from mother to her baby during delivery	Yes	264/286	92.3	91.2	86.7 – 95.8
HIV can be transmitted from mother to her baby by breastfeeding	Yes	277/286	96.9	96.0	92.8 – 99.1
There are special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby	Yes	62/286	21.7	26.0	18.9 – 33.0
GARPR 3.4: Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	Yes	57/286	19.9	22.5	16.4 – 28.6

3.5.7 General sexual history

The average age at first vaginal sex among FSW in Bossaso is 21.5 years, although many (17.6%) were younger than 18 years of age at first vaginal sex. Few (7.7%) FSW have had anal sex. The average age at which most of the FSW first received money, a gift (like Khat) or favour in exchange of sexual intercourse is 22.7 years. More than one third of FSW meet their new transactional clients and engage in sex at the FSW's homes. Only 21.2% of FSW work through pimps, who in most cases take one third (56.1%) of the money FSW earn by selling sex, as shown in Table 65 below.

Table 65: General sexual history

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Age at first vaginal sex.	Range = 9 – 39 Mean±SD = 21.4±5.3 Median = 20		21.5±5.3 20.0	
	<18 56/286	19.6	17.6	12.8 – 22.4
	<25yrs 210/286	73.4	73.1	66.4 – 79.6
	25 yrs or more 76/286	26.6	26.9	20.4 – 33.6
Had anal sex	27/286	9.4	7.7	3.9 – 11.3
Age at first anal sex.	Range = 15 – 31 Mean±SD= 20.2±3.6 Median = 20			
	<25yrs 25/27	92.6	94.0	86.3 – 94.0
	25 yrs or more 2/27	7.4	6.0	2.4 – 6.0
Age at which she first received money, a gift (like Khat) or favour in exchange of sexual intercourse.	Range = 14 – 42 Mean±SD = 22.7±5.2 Median = 21.0		22.7±5.4 21.0	
	< 18 30/286	10.5	10.9	6.1 – 15.8
	<25yrs 170/286	59.4	59.6	52.8 – 66.4
	25 yrs or more 86/286	30.1	29.5	23.3 – 35.5
Reasons that led to exchange sex for money the first time (<i>multiple answers possible</i>)	Orphan 35/286	12.2	13.4	8.3 – 18.5
	Didn't have other job 83/286	29.0	27.7	21.6 – 33.9
	Grew up around people doing sex work 43/286	15.0	16.4	11.0 – 21.7
	I like it or for pleasure 50/286	17.5	19.4	13.2 – 25.7
	Abandoned by husband 67/286	23.4	21.3	16.1 – 26.4
	Abandoned by parents or siblings 36/286	12.6	13.2	8.3 – 18.0
	Encouraged by friends 85/286	29.7	30.1	24.2 – 35.0
	Forced or pressurized 15/286	5.2	5.3	2.1 – 8.6
	Pays well 83/286	29.0	24.6	19.4 – 29.7
	Have extra money 42/286	14.7	15.2	10.2 – 20.2
	I needed money 240/286	83.9	83.5	78.0 – 88.9
	Other 11/286	3.8	3.8	1.5 – 6.1
Total number of different sexual partners who she had	Range = 1 – 50 Mean±SD = 10.2±6.6 Median = 9.0		10.6±6.7 9.0	

sexual intercourse with in the past one month	<5	43/286	15.0	12.6	8.7 – 16.6
	5 – 10	140/286	49.0	51.5	44.9 – 58.0
	11 – 20	91/286	31.8	32.9	26.1 – 39.6
	More than 20	12/286	4.2	3.0	1.3 – 4.7
Where most new transactional sex clients are met	At clients' home	51/286	17.8	14.3	10.1 – 18.5
	At FSW home	104/286	36.4	36.6	29.7 – 43.4
	Beach	19/286	6.6	6.2	3.4 – 9.1
	Hotel or restaurant	39/286	13.6	12.4	8.3 – 16.5
	Khat shop	2/286	0.7	0.3	0 – 0.7
	Tea Shop	9/286	3.1	3.1	0.9 – 5.2
	They call me	56/286	19.6	25.4	18.6 – 32.1
	Through pimps or dalals	1/286	0.3	0.1	0 – 0.3
	Other	5/286	1.7	1.4	0.3 – 2.6
Place where FSW and client engage in transactional sex	At FSW home she shares with my family	105/ 286	36.7	33.1	26.8 – 39.3
	At FSW home she shares with other FSW	34/286	11.9	13.4	8.4 – 18.6
	Hotel or restaurant	50/286	17.5	15.6	11.0 – 20.1
	Khat Shop	1/286	0.3	0.3	0 – 0.8
	Tea Shop	5/286	1.7	1.1	0.3 – 1.8
	The clients house	9/286	31.1	35.7	28.9 – 42.5
	Other	2/286	0.7	0.8	0 – 1.8
Working through a pimp		61/284	21.5	21.2	12.6 – 29.7
Sharing the money earned from sexual transaction with the pimp		59/59	100	100	-
Amount shared/given out to the other person	One third	33/59	55.9	56.1	41.5 – 70.8
	Half	24/59	40.7	41.9	27.8 – 56.4
	Two thirds	2/59	3.4	2.0	0 – 5.6

3.5.8 Sexual History with paying clients

The majority of FSW (64.2%) used a (male) condom the last time they had a sexual intercourse with a client, and most often it was the client (64.9%) who suggested condom use. Among those FSW who did not use a condom at last sex with a clients, most often it was because they do not like condoms (35.6%) or they do not think a condom is necessary (32.8%). Only slightly over one third of FSW (37.8%) used condoms consistently in the last 30 days. On the last day they worked, FSW on average sold sex to 2 clients, earning an average of USD 24.1 for last sexual intercourse with a client. FSW in Bossaso believe that khat selling (26.8%) and truck driving (18.7%) are most common occupations of their clients.

Table 66: Sexual History with paying clients

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
GARPR 3.6: Proportion who used a condom at last sexual intercourse with a client	184/284	64.8	64.2	57.8 – 70.6
Type of condom used	Male Condom	184/184	100	100
Person who suggested condom use at last sexual intercourse	Joint decision	23/184	12.5	13.3
	Client	118/184	64.1	64.9
	FSW	43/184	23.4	21.7
Reason for not using condom at last sexual intercourse	Used other contraceptive	17/100	8.0	28.0
	We didn't have	1/100	1.0	0.6
	I don't like them	37/100	37.0	35.6
	Client objected	15/100	15.0	17.9
	Didn't think it was necessary	31/100	31.0	32.8
	Didn't think of it	12/100	12.0	8.2
	Don't know where to buy	10/100	10.0	8.0
	Condoms transmit HIV	1/100	1.0	3.2
	Other	5/100	5.0	4.2
Consistent condom use with clients during the last 30 days (1 month)	Don't know	21/100	21.0	14.8
	Every time	97/284	34.2	37.8
	Almost every time	39/284	13.7	10.8
	Sometimes	57/284	20.1	20.7
Number of clients on the last day worked	Never	91/284	32.0	30.6
	Range = 1 – 10 Mean $\pm$ SD = 2.2 $\pm$ 1.3 Median = 2.0			2.2 $\pm$ 1.4 2.0
	1	91/286	31.8	35.3
	2	110/286	38.5	38.6
	3	49/286	17.1	16.5
Amount of money received for last sexual intercourse with a client (in USD)	4 or more	36/286	12.6	9.6
	Range = 1.2 – 300 Mean $\pm$ SD = 23.4 $\pm$ 31.6 Median = 18.0			24.1 $\pm$ 33.1 18.0
	0 – 5	35/286	12.2	12.1
	6 – 10	51/286	17.8	18.6
	11 – 20	105/286	36.7	37.4
Typical occupations of clients (multiple answers possible)	More than 21	95/286	33.2	31.9
	Businessman	49/286	17.1	17.9
	Truck Driver	177/286	61.9	64.9
	Government worker	51/286	17.8	15.0
	Fishermen	82/286	28.7	28.1
	Police	86/286	30.1	26.4
	Port worker	114/286	39.9	39.8
	Tea client	75/286	26.2	28.7
	Khat client	82/286	28.7	32.1
	Unemployed	10/286	3.5	2.5
	Khat Seller	155/286	54.2	58.1
	Humanitarian worker	7/286	2.4	3.5

	Military	10/286	3.5	3.8	1.2 – 6.5
	Other	16/286	5.6	6.7	2.3 – 11.2
Most common occupation among clients	Businessman	18/285	6.3	7.8	3.5 – 12.4
	Fishermen or Seafarer	32/285	11.2	9.9	5.9 – 13.8
	Government worker	11/285	3.9	3.1	1.4 – 4.9
	Humanitarian aid worker	1/285	0.4	0.2	0 – 0.5
	Khat client	18/285	6.3	5.9	2.8 – 9.0
	Khat Seller	69/285	24.2	26.8	20.2 – 33.5
	Police	30/285	10.1	8.5	5.6 – 11.5
	Port worker	38/285	13.3	11.6	7.5 (15.7
	Tea client	8/285	2.8	3.9	0 – 8.4
	Truck driver	52/285	18.2	18.7	14.2 – 23.1
	Other	8/285	2.8	3.6	1.2 – 5.9

3.5.9 Sexual history with non-paying partners

Among FSW who had a non-paying sexual partner in the past 30 days (69.2%), slightly over half have (55.7%) used a condom at last sex with their last non-transactional partner, although again, in the majority of cases it was the partner who suggested using a condom (54.4%). FSW who had a non-paying partner in the last 30 days on average had sexual intercourse with them less than once a week (i.e., 3 times), as shown in Table 67.

Table 67: Sexual history with non-paying partners

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Had sexual intercourse with a non-paying partner over the last 30 days (1 month)	208/286	72.7	69.2	62.8 – 75.7
Number of times had sexual intercourse with non-paying partners over the last 30 days (1 month) (among those who had a non-paying partner in the last 30 days)	Range = 1 – 12 Mean±SD= 3.3±2.4 Median = 3.0		3.4±2.5 3.0	
	1	51/208	24.5	23.3 – 41.0
	2 – 5	123/208	59.1	42.6 – 60.4
	More than 5	34/208	16.3	10.4 – 22.4
Condom use during last non-paying/ non-transactional sexual intercourse with partner (among those who had a non-paying partner in the last 30 days)	106/208	51.0	55.7	48.3 – 63.4
Person who suggested condom use during last non-paying/ non-transactional sexual intercourse with partner (among those who had a non-paying partner in the last 30 days)	Joint decision	15/106	14.2	4.7 – 20.2
	Partner	60/106	56.6	38.9 – 68.8
	FSW	31/106	29.2	18.9 – 48.4

Reason for not using condom during last non-transactional sexual intercourse (among those who had a non-paying partner in the last 30 days) (multiple answers possible)	Didn't think it was necessary	14/98	13.7	14.3	6.1 – 22.5
	Didn't think of it	10/98	9.8	9.6	1.9 – 17.2
	Do not know where to but one	9/98	8.8	7.3	0.4 – 13.9
	Don't like them	19/98	18.6	17.6	9.2 – 25.3
	Partner objected	22/98	21.6	26.7	15.8 – 38.6
	Too expensive	1/98	1.0	0.5	0.3 – 0.5
	Used other contraceptives	13/98	12.7	14.1	3.7 – 24.6
	We did not have one with us	1/98	1.0	1.3	0.9 – 1.6
	Other	1/98	2.0	2.0	1.4 – 2.5
	Don't know	23/98	22.5	21.8	12.0 – 31.7
	Condoms transmit HIV	1/98	1.0	1.3	0.9 – 1.6

3.5.10 Availability and use of male condom

Most FSW in Bossaso have ever heard of or seen a male condom (92.3%). Among them, most have also ever used a male condom (72.9%) and know a place or person where to obtain male condoms (86.4%). Pharmacy is the most preferred (63.2%) ideal place to obtain male condoms although very few FSW have received male condoms (0.7%) or counselling on condom use (0.2%) three months prior to this survey. Most FSW (62.6%) perceive male condoms to be affordable, although it is usually not them but their clients (71.4%) who supply condoms, as shown in Table 68.

Table 68: Availability and use of male condom

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
Ever heard of a male condom before today	255/286	89.2	92.3	89.8 – 95.0	
Ever used a male condom	198/255	77.6	72.9	66.1 – 79.5	
Knows place or person where to obtain male condoms	222/255	87.1	86.4	81.5 – 91.4	
Places or persons do you know where she can obtain male condoms (multiple answers possible)	Pharmacy	217/222	97.7	96.8	93.5 – 96.8
	Private hospital/clinic	104/222	46.8	48.6	40.7 – 56.7
	Public hospital	79/222	35.6	38.1	30.3 – 46.1
	MCH Centre	155/222	69.8	71.0	63.8 – 78.3
	Friend	65/222	29.3	31.0	23.0 – 38.1
	Clients	3/222	1.4	0.7	0 – 1.2
	Other sex worker	11/222	5.0	3.5	1.5 – 5.4
	Local NGO	3/222	1.4	1.4	0 – 2.9
	Shop	5/222	2.3	1.2	0.3 – 2.0
Ideal place to obtain male condoms	Client	1/238	0.4	0.2	0 – 0.3
	Friend	20/238	7.8	8.7	2.6 – 14.9
	MCH centre	14/238	5.5	7.0	1.7 – 12.3
	Other sex worker	1/238	0.4	0.1	0 – 0.3
	Pharmacy	156/238	61.2	63.2	55.9 – 70.5
	Private hospital/Clinic	8/238	3.1	2.2	1.7 – 2.7
	Public hospital	3/238	1.2	2.9	0 – 8.9
	Shop	32/238	12.5	14.4	9.4 – 19.5
	Other	3/238	1.2	1.1	0.5 – 1.6
Usually carry condoms with her	175/255	68.6	66.3	59.3 – 73.2	

Received condoms (e.g. through an outreach service, hospital, VCT centre, TB centers, NGO, Pharmacy, FP clinic, MCH) in the past 3 months		4/255	1.6	0.7	0.2 – 1.2
Received counselling on condom use and safe sex in the past 3 months		1/255	0.4	0.2	0.1- 0.2
Person who usually supplies the condoms	Client	167/226	73.9	71.4	63.7 – 78.9
	I never use a condom	39/226	17.3	19.9	13.1 – 26.9
	FSW	20/226	8.8	8.7	4.0 – 13.3
Affordability of male condoms	Affordable	147/231	63.3	62.6	54.3 – 70.7
	Somewhat affordable	51/231	22.1	21.6	16.0 – 27.1
	Not affordable	4/231	1.7	1.6	0.3 – 2.9
	Don't know	29/231	12.6	14.3	8.1 – 20.6

3.5.11 Availability and use of female condom

Unlike with male condoms, few FSW in Bossaso have ever heard (38.1%) of female condoms. Among those who have, few have used them (13.4%) or know where to obtain them (12.5%), as shown in Table 69.

Table 69: Availability and use of female condom

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Ever heard of a female condom before today	95/286	33.2	38.1	30.6 – 45.6
Ever used a female condom	15/95	15.8	13.4	3.3 – 23.0
Knows place or person where to obtain female condoms	17/95	17.9	12.5	0 – 24.5
Places or persons do you know where she can obtain female condoms (multiple answers possible)	Friend	7/17	41.2	0 – 51.6
	Other sex workers	9/17	52.9	0 – 43.3
	MCH Center	1/17	5.9	1.5 – 3.8
	Pharmacy	8/17	47.0	38.5 – 96.2

3.5.12 Population size estimation

Using successive sampling-population size estimation (SS-PSE) method, the network size information of individual FSW participants was entered into RDS Analyst to generate measures of central tendency to represent population size estimates. Therefore, the mean, median and mode FSW population estimate in Bossaso is 1,473, 1,189, and 876 respectively. Although the findings of size estimation using SS-PSE are higher, this closely approximates population size estimates generated in 2016 indicating 911 as the average FSW estimate in Mogadishu (IOM, 2016). However, when using wisdom of the crowds method, much lower estimates were generated. The mean FSW estimate in Bossaso using wisdom of crowds method is 76.5 with a standard deviation of 72.2 while ranging from 3 to 300 FSW. When asked regarding their FSW network size, the average number of FSW they knew by name and knew them to have had sex in the last 12 months in exchange for money, gifts or favour was 7.9 FSW, while the minimum was 1 and maximum was 27 FSW.

3.5.13 HIV testing history and avoidance of HIV services

Although more than three quarters of FSW (80.7%) in Bossaso know where to go for a HIV test, only 16.5% know their HIV status from an HIV test. Fear of or concern about stigma by staff or neighbours was cited by majority of the FSW (75.6%) as the reason for having never sought for an HIV test. Overall, 69.8% of FSW in Bossaso avoid HIV services due to stigma and discrimination among FSWs as shown in Table 70.

Table 70: HIV testing history and avoidance of HIV services

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Knows where to go for a confidential HIV test	218/286	76.2	80.7	76.1 – 85.2
Known places where one can get tested for HIV (<i>multiple answers possible</i>)	Government hospital	143/218		
	MCH Centre	109/218		
	Pharmacy	59/218		
	Government TB Centre	75/218		
	Government VCT	66/218		
	Mobile counselling			

3.5.14 Stigma and discrimination related to HIV and AIDS

Two major forms of stigma and discrimination cited by FSWs in Bossaso included verbal insults (16.5%) and refusal for housing (11.3%). FSW who were verbally insulted, were in most cases insulted by their family or relatives (59.6%), as shown in Table 71.

Table 71: Stigma and discrimination related to HIV and AIDS

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
Have been refused health care in the past 12 months because someone believed they sell sex to men	0/286	0.0	0.0	-	
Have been refused employment in the past 12 months because someone believed they sell sex to men	6/286	2.1	1.2	0.5 – 1.9	
Have been refused attend prayers at the mosque in the past 12 months because someone believed they sell sex to men	0/286	0.0	0.0	-	
Have been refused housing in the past 12 months because someone believed they sell sex to men	39/286	13.6	11.3	7.7 – 15.0	
Have been refused police assistance in the past 12 months because someone believed they sell sex to men	1/286	0.3	0.1	0 – 0.3	
Have had verbal insults directed at her in the past 12 months because someone believed she sell sex to men	58/286	20.3	16.5	12.0 – 21.0	
Person who last directed a verbal insult at her	Client	16/58	27.6	27.4	13.6 – 41.0
	Family or relative	33/58	56.9	59.6	44.6 – 75.7
	Other sex worker	1/58	1.7	1.7	0 – 3.9
	Police	1/58	1.7	1.3	0 – 1.6
	Social acquaintance	5/58	8.6	6.6	2.4 – 9.8
	Other	2/58	3.4	3.4	0 – 6.6

3.5.15 Physical and Sexual violence

Many FSW in Bossaso have been hit, kicked, or beaten in the past 12 months because someone believed they sell sex to men (14.3%), in most cases by their male clients (75.8%). In addition, 11.7% of FSW have been physically forced her to have sexual intercourse against their will, again, in most cases by their clients (98.1%). Among them, 60.2% sought medical treatment and 59.4% reported the cases to police. FSW in Bossaso have also experienced other forms of physical and sexual violence from their partners and clients; in particular, they were slapped (16.0%), pushed or shoved (14.8%), hit with a fist or something else that could hurt them (14.7%), and kicked, dragged or beaten up (14.8%), as shown in Table 72.

Table 72: Physical and Sexual violence

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Have been hit, kicked, or beaten in the past 12 months because someone believed they sell sex to men	49/286	17.1	14.3	9.9 – 18.8
Person who last hit, kicked, or beat her	Client 38/49 Family or relative 4/49 Other sex worker 3/49 Pimp 1/49 Police 1/49 Other 2/49	77.6 8.2 6.1 2.0 2.0 4.1	75.8 11.5 5.3 2.9 1.5 2.9	58.1 – 92.5 0 – 28.7 0 – 10.6 0 – 3.3 1.4 – 1.4 0 – 14.9
A client or partner physically forced her to have sexual intercourse against her will in the past 12 months	37/286	12.9	11.7	7.3 – 15.9
Person who physically forced her to have sexual intercourse against her will	Client 36/37 Non-paying partner 1/37	97.3 2.7	98.1 1.9	88.0 – 98.6 0 – 1.9
Proportion who sought medical treatment after being physically forced to have sexual intercourse against her will	23/37	62.2	60.2	24.7 – 94.5
Proportion who reported this incident to the police	24/37	64.9	59.4	39.7 – 75.7
In the past 12 months, a client or partner slapped her or threw something that could hurt her	52/286	18.2	16.0	11.5 – 20.4
Proportion pushed or shoved by a client or partner in the past 12 months	52/286	18.2	14.8	10.6 – 18.9
In the past 12 months, a client or partner hit her with a fist or something else that could hurt her	51/286	17.8	14.7	10.7 – 18.8
Proportion kicked, dragged or beat up by a client or partner in the past 12 months,	51/286	17.8	14.8	10.6 – 19.1
Proportion choked or burned by a client or partner in the past 12 months	14/286	4.9	3.5	2.0 – 5.0
Proportion whose client or partner threatened or used a gun, knife or other weapon against them in the past 12 months	21/286	7.3	5.4	3.3 – 7.3

Proportion forced by client or partner in the past 12 months to do something sexual she found degrading or humiliating	37/286	12.9	11.5	7.3 – 15.7
Proportion whose client or partner in the past 12 months made them afraid of what would happen if they did not have sexual intercourse	41/286	14.3	11.8	8.0 – 15.7

3.5.16 Programme coverage

Overall, the coverage of HIV prevention programmes among FSW in Bossaso is very low (0.2%), although nearly half of FSW (45.4%) in Bossaso are aware of local NGOs that deliver non-medical assistance or advice to FSW and 59.4% of FSW in Bossaso have attended meeting(s) to discuss STI or HIV and AIDS, as shown in Table 73.

Table 73: Programme coverage

Characteristic	Sample proportions		Population Estimates	
	n/N	%	%	95% Confidence Interval
Proportion aware of Local NGO here that deliver non-medical assistance or advice to FSW	123/286	43.0	45.4	38.7 – 52.1
Attended meeting(s) to discuss STI or HIV/AIDS during the last 12 months	167/286	58.4	59.5	53.0 – 65.9
Services/ items received from an outreach worker in the past 12 months (multiple answers possible)	Condom	3/268	1.1	0.1 – 1.0
	Pamphlets	7/268	2.6	0.9 – 5.9
	Referral	3/268	1.1	0 – 4.7
	Lubricants	1/268	0.4	0 – 3.6
	None	258/268	96.3	94.3 – 99.4
Proportion of referred FSW who went to referred site to receive medical care	1/3	33.3	61.0	0 – 63.6
Given condom in the past three months	4/255	1.6	0.7	0.2 – 1.2
Received counselling on condom use and safe sex in the past three months	1/255	0.4	0.1	0 – 0.4
Tested for STIs in the past three months	77/286	26.9	30.5	23.6 – 37.4
GARPR 3.7 Coverage of HIV prevention programmes among key populations	1/286	0.3	0.2	0.0 – 0.4

3.5.17 Alcohol and drug use in the past three months

With regard to alcohol and drug use, Khat and cigarettes are the most commonly consumed, with almost all FSW having consumed them in the past three months and about half of FSW consuming khat and/or cigarettes at least 2-3 times a week. Alcohol consumption and marijuana/hashish use is far less common (13.3% and 30.8%, respectively). Finally, 12.5% of FSW in Bossaso have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, or smoked marijuana/hashish/cigarette, as shown in Table 74.

Table 74: Alcohol and drug use in the past three months

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
Frequency of having a drink containing alcohol during the past three months	4 or more times a week	9/286	3.1	3.6	0.6 – 6.8
	2 - 3 times a week	6/286	2.1	1.7	0.5 – 3.0
	2 - 4 times a month	9/286	3.1	3.0	0.6 – 5.5
	Monthly or less	18/286	6.3	4.8	2.2 – 7.4
	Never	244/286	85.3	86.7	82.1 – 91.2
Frequency of chewing khat during the past three months	4 or more times a week	94/286	32.9	35.5	28.5 – 42.4
	2 - 3 times a week	47/286	16.4	18.4	12.9 – 24.0
	2 - 4 times a month	12/286	4.2	2.8	1.5 – 4.1
	Monthly or less	125/286	43.7	40.9	33.8 – 47.9
	Never	8/286	2.8	2.4	0 – 5.2
Frequency of smoking marijuana or hashish during the past three months	4 or more times a week	16/286	5.6	3.6	2.1 – 5.2
	2 - 3 times a week	17/286	5.9	6.8	3.0 – 10.6
	2 - 4 times a month	15/286	5.2	4.2	1.7 – 6.7
	Monthly or less	50/286	17.5	16.1	11.2 – 21.1
	Never	188/286	65.7	69.2	62.9 – 75.4
Frequency of smoking cigarette during the past three months	4 or more times a week	139/286	48.6	52.7	45.6 – 60.0
	2 - 3 times a week	6/286	2.1	1.7	0.3 – 3.1
	2 - 4 times a month	2/286	0.7	0.5	0 – 1.1
	Monthly or less	131/286	45.8	42.2	35.4 – 49.0
	Never	8/286	2.8	2.7	0.3 – 5.1
Frequency of smoking shisha during the past three months	4 or more times a week	23/286	8.0	7.1	4.0 – 10.1
	2 - 3 times a week	34/286	11.9	13.3	8.1 – 18.4
	2 - 4 times a month	47/286	16.4	17.1	11.9 – 22.2
	Monthly or less	54/286	18.9	18.1	13.1 – 23.2
	Never	128/286	44.8	44.5	37.9 – 51.1
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette	42/286	14.7	12.5	8.3 – 16.8	
Frequency of injecting drugs during the past three months	0/286	0.0	0.0	-	

3.5.18 Socio-demographic correlates of safer HIV-related behaviour among FSW in Bossaso

Finally, multivariable analyses were used to identify socio-demographic correlates of safer HIV-related behaviour, specifically, condom use at last transactional sex, knowledge of HIV status from an HIV test in the past 12 months, and HIV composite knowledge. Only one variable in the model assessing factors associated with HIV knowledge was statistically significant, as shown in Table 75. FSW with more than USD 100 monthly income are less likely (aOR = 0.5, 95% CI = 0.2 – 0.9) to have answered correctly to all five questions regarding HIV knowledge.

Table 75. Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission

	Preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission		Adjusted OR (95% CI)	<i>P-value</i>
	n/N	%		
Total	57/286	19.9		
Age				
25+	40/219	18.3	0.6 (0.3 – 1.3)	0.2
<25	17/67	25.4	1.0	
Level of Education				
None	40/197	20.3	1.0 (0.5 – 2.2)	0.9
Some education	17/89	19.1	1.0	
Overall monthly household income				
< 100	38/157	24.2	1.0	
>=100	19/129	14.7	0.5 (0.2 – 0.9)	0.03
Marital status				
Single	4/20	20.0	2.0 (0.5 – 8.0)	0.3
Ever Married	53/266	19.9	1.0	
Number of people she is currently supporting				
0-5	44/219	20.1	0.7 (0.3 – 1.4)	0.3
>5	13/67	19.4	1.0	
Length of stay in Bossaso				
Less than 2 Years	6/34	17.7	1.0	
More than 2 Years	51/252	20.2	0.9 (0.3 – 2.3)	0.8
Currently earn money doing other work other than sex work				
Yes	42/205	20.5	1.1 (0.6 – 2.3)	0.7
No	15/81	18.5	1.0	

Bold P-value: Statistically significant

3.6 BOSSASO UNIFORMED PERSONNEL

3.6.0 Socio-demographic characteristics

A total of 287 uniformed personnel participated in the study (43.7% and 56.3% military and police personnel respectively). The average age of uniformed personnel in Bossaso is 32.8 years with the majority (42.5%) of respondents aged 25 to 34 years. Most uniformed personnel (50.9%) had no education and three quarters of them (85.2%) had stayed in Bossaso for more than two years. Furthermore, the majority are married (61.8%) with an average of 4.1 dependents but having an average monthly income of USD 131.2. Most uniformed personnel (99.6%) have Somalia nationality as shown below in Table 76.

Table 76: Socio-demographic characteristics

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Age (Years)	Mean±SD	32.8±9.9			31.7	34.0
	Range	18 – 68				
	< 25 years	57/287	19.9	19.3	15.0	24.5
	25+ years	230/287	80.1	80.7	75.5	85.1
	18 – 24	57/287	19.9	19.3	15.0	24.5
	25 - 34	125/287	43.6	42.5	36.6	48.6
	35 - 44	67/287	23.3	23.8	19.0	29.4
	45 +	38/287	13.2	14.4	10.5	19.4
Category of uniformed personnel	Military personnel	134/287	46.7	43.7	36.9	50.8
	Police personnel	153/287	53.3	56.3	49.2	63.1
Education level	None	123/287	42.9	50.9	48.4	58.0
	Primary	125/287	43.6	40.1	33.3	47.3
	Secondary	33/287	11.5	7.6	5.0	11.5
	University / College	6/287	2.1	1.3	0.5	3.3
Nationality	Somalia	286/287	99.7	99.6	97.1	99.9
	Somaliland	1/287	0.4	0.4	0.0	2.9
Length of stay in Bossaso	Less than 7 days	1/287	0.4	0.5	0.0	3.4
	7 days – 1 month	2/287	0.7	1.0	0.2	3.9
	2 – 3 months	4/287	1.4	1.8	0.7	4.7
	4 – 6 months	2/287	0.7	0.9	0.2	3.4
	7 – 11 months	3/287	1.1	1.0	0.3	3.1
	1 – 2 years	27/287	9.4	9.7	6.6	14.0
	More than 2 years	248/287	86.4.0	85.2	80.2	89.1
Frequency of visiting his family	Daily	123/287	42.9	41.8	36.0	47.9
	Once in a week	48/287	16.7	16.9	12.8	22.0
	>once in a week	13/287	4.5	4.8	2.7	8.3
	Once in a month	30/287	10.5	8.5	5.9	12.1
	Twice in a month	21/287	7.3	7.8	5.1	11.9
	2 - 3 months	46/287	16.0	18.2	13.8	23.6
	>3 months	6/287	2.1	2.0	0.9	4.5
Marital status	Single	58/287	20.2	19.5	15.2	24.7
	Married	172/287	59.9	61.8	55.8	67.5
	Divorced	52/287	18.1	18.1	11.5	24.8
	Widowed	5/287	1.7	1.7	0.7	4.1

Number of dependents	Mean±SD Range	4.1±3.3 0 - 19			3.7	4.5
Number of wives	1 2 3 4	122/172 44/172 6/172 0/172	70.9 25.6 3.5 -	70.7 25.2 4.2 -	63.0 19.0 1.9 -	77.3 32.6 9.2 -
Frequency of visiting neighbouring countries	Never Weekly Monthly Every 2 – 3 months After > 3 months	249/287 7/287 2/287 1/287 28/287	86.8 2.4 0.7 0.4 9.8	86.0 2.8 0.7 0.5 10.0	81.2 1.3 0.2 0.0 6.9	89.8 5.9 2.9 3.4 14.3
Overall monthly income in USD	< 100 ≥100 Mean±SD Range	136/287 151/287 131.2±86.3 20 - 750	47.4 52.6	47.9 52.1	41.9 46.0 121.1	54.0 58.1 141.2

3.6.1 HIV and syphilis prevalence

The overall prevalence of HIV infection among uniformed personnel in Bossaso is 1.1% whereas the prevalence of syphilis infection is 0.7%. HIV and syphilis co-infection is 0.4% as shown in Table 77.

Table 77: HIV and syphilis prevalence

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
HIV	3/287	1.1	1.1	0.3	3.5
Syphilis – Ever infected	2/287	0.7	0.7	0.2	2.9
Syphilis – Active infection	2/287	0.7	0.7	0.2	2.9
HIV and syphilis comorbidity	1/287	0.4	0.4	0	2.9

3.6.2 Patterns of STI care and treatment seeking behaviour

More uniformed personnel have heard about HIV/AIDS (99.6%) than other STIs (83.5%). The proportion of uniformed personnel tested for STI in the past three months is 43.9% compared to those diagnosed to have STI infection (13.7%) twelve months prior to the IBBS survey. Contrastingly, none of the uniformed personnel has experienced either an abnormal penile discharge or penile ulcer or sore in the past 12 months prior to this study as shown in Table 78.

Table 78: Patterns of STI care and treatment seeking behaviour

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of HIV/AIDS	Yes	286/287	99.7	99.6	96.9	99.9
Heard about other infections that can be transmitted through sex	Yes	239/287	83.3	83.5	78.5	87.5
Tested for sexually transmitted infections in the past three months	Yes	105/239	43.9	43.9	37.4	50.6
Diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	Yes	32/239	13.4	13.7	9.7	19.0
Had an abnormal discharge from their penis in the past 12 months	Yes	0/285	0.0	0.0	-	-
Had a sore or ulcer on or near penis or anus in the last 12 months	Yes	0/286	0.0	0.0	-	-

3.6.3 Knowledge on transmission of HIV and STI

The uniformed personnel generally have good knowledge scores on individual knowledge components. However, their overall knowledge on how to correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission is less than one quarter (24.4%) as shown in Table 79.

Table 79: Knowledge on transmission of HIV and STI

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Risk of HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners	Yes	275/287	95.8	95.5	92.0	97.5
People can reduce their chance of getting HIV and STI by using a condom every time they have sex	Yes	165/287	57.5	57.8	51.7	73.7
It is possible for a healthy-looking person to have HIV/AIDS	Yes	259/286	90.6	89.1	84.3	92.5
People can get HIV from mosquito bites	No	101/287	35.2	34.4	28.9	40.4
People can get HIV by sharing food with a person who has HIV/AIDS	No	175/287	61.0	61.6	55.5	67.3
Heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer	Yes	220/287	76.7	75.0	69.3	80.0

HIV can be transmitted from mother to her baby during pregnancy	Yes	238/287	82.9	82.9	77.7	87.0
HIV can be transmitted from mother to her baby during delivery	Yes	256/287	89.2	89.4	85.1	92.6
HIV can be transmitted from mother to her baby by breastfeeding	Yes	258/287	89.9	90.7	86.7	93.6
There are special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby	Yes	195/287	67.9	66.6	60.5	72.1
GARPR 5.1: Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	Yes	72/287	25.1	24.4	19.6	30.0

3.6.4 General sexual history

The majority (83.3%) of uniformed personnel have had vaginal sex compared to none who have ever had anal sex. The average age at first vaginal sex among uniformed personnel in Bossaso is 20.3 years. Only 8.6% of uniformed personnel admit to have ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse while tea shops (43.3%) and khat shops (35.4%) being used as places to engage in transactional sex as shown in Table 80 below.

Table 80: General sexual history

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have ever had vaginal sex with a woman	Yes	234/283	82.7	83.3	78.3	87.4
Age at first vaginal sex	Mean±SD Range	20.3±3.6 10 - 32			19.8	20.7
Ever had anal sex with a woman	Yes	0/282	0.0	0.0	-	-
Ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse	Yes	23/285	8.1	8.6	5.7	12.9
Number of different sexual partners in total he had sexual intercourse with in the past one month	Mean±SD Range	1.4±0.7 1 - 2			1.1	1.7
Where uniformed personnel meet most of their new transactional sex clients	Hotel /	6/23	26.1	25.4	10.5	49.8
	Restaurant	11/23	47.8	45.1	24.4	67.6
	Khat shop	5/23	21.7	23.1	9.0	47.9
	Tea shop	1/23	4.4	6.4	0.8	37.5
Where uniformed personnel most often engage in transactional sex	They call					
	Car / vehicle	1/23	4.4	6.4	0.8	37.5
	Hotel /	3/23	13.0	8.5	2.4	26.4
	Restaurant					
	Khat shop	7/23	30.4	35.4	16.9	59.7
	Tea shop	11/23	47.8	43.3	23.1	66.0
	Client's house	1/23	4.4	6.4	0.8	37.5

3.6.5 Sexual History with paying clients

Three quarters (75.8%) of uniformed personnel, who ever have ever exchanged sexual intercourse for money goods or favour, used a male condom in their last transactional sexual intercourse while 20.6% never used condoms with transactional clients over the last one month. In most cases, it is the uniformed officer (92.2%) who suggest condom use. An average amount of USD 6.7 was paid by a uniformed officer to a FSW during last transactional sex while the majority (81.7%) paid between USD 0 - 5 as shown in Table 81.

Table 81: Sexual History with paying clients

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Interval	Confidence
Used a condom the last time had transactional sexual intercourse with a client	Yes	17/22	77.3	75.8	49.9	90.8
Type of condom	Male condom	17/17	100	100	-	-
Person who suggested condom use at last transactional sexual intercourse	FSW	1/17	5.9	7.8	0.9	44.8
	Uniformed personnel	16/17	94.1	92.2	55.2	99.1
Frequency of using condoms with transactional clients over the last 30 days (1 month)	Almost every time	4/23	17.4	13.6	4.6	34.2
	Sometimes	14/23	60.9	65.7	42.3	83.3
	Never	5/23	21.7	20.6	7.6	45.1
Number of female sex workers uniformed officer had sex with on the last day	Mean±SD	1.2 ±0.4			1.0	1.3
	Range	1 - 2				
Amount of money paid during last transactional sex in USD	0 - 5	19/23	82.6	82.1	57.6	94.0
	6 - 10	3/23	13.0	15.0	4.4	40.5
	>= 21	1/23	4.4	2.0	0.3	20.6
	Mean±SD	6.7±12.8			1.2	12.2
	Range	2 - 65				

3.6.6 Sexual history with non-paying partners

Whereas 75.8% of uniformed personnel reported using a condom during their last sexual intercourse with transactional clients, only 17.1% of uniformed personnel used a condom with their last non-transactional client. The average number of times a uniformed personnel had sexual intercourse with non-paying clients over the last 30 days is 1.3 times and in all cases it is the uniformed personnel who suggested condom use during last non-transactional sex as shown in Table 82.

Table 82: Sexual history with non-paying partners

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Number of times uniformed officer had sexual intercourse with a non-transactional sexual partner over the last 30 days (1 month)	Mean±SD Range	1.3±2.5 0 - 28			1.0	1.6
Used a condom last time he had sexual intercourse with non-paying / transactional sexual partner	Yes	18/111	16.2	17.1	10.8	26.1
Person who suggested condom use at last non-transactional sexual intercourse	Uniformed personnel	18/18	100	100	-	-

3.6.7 Availability and use of male condom

Although 90.4% of uniformed personnel in Bossaso have ever heard of or seen a male condom and 40.5% know a place or person where to obtain them, only 11.2% have ever used a male condom. Very few uniformed personnel received male condoms (5.6%) or counselling on condom use (33.0%) twelve months prior to this survey. Half (53.5%) of uniformed personnel perceive male condoms as not affordable as shown in Table 83.

Table 83: Availability and use of male condom

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a male condom	Yes	258/287	89.9	90.4	86.4	93.4
Ever used a male condom with a sexual partner	Yes	27/258	10.5	11.2	7.7	16.1
Knows of a place or person where to obtain male condoms	Yes	110/258	42.6	40.5	34.4	46.9
Usually carries condoms	Yes	22/257	8.6	9.6	6.3	14.4
Received condoms in the past 3 months	Yes	13/258	5.0	5.6	3.2	9.5
Received counselling on condom use and safe sex in the past three months	Yes	85/258	33.0	33.0	27.2	39.3
Person who usually supplies the condoms	Client (FSW)	1/250	0.4	0.6	0	4.0
	Never use a condom	224/250	89.6	88.3	83.1	92.0

	Myself	25/250	10.0	11.2	7.6	16.3
Affordability of male condom	Affordable	35/245	14.3	14.5	10.4	19.8
	Not affordable	128/245	52.2	53.5	46.9	60.0
	Somewhat affordable	82/228	33.5	32.0	26.3	38.4

3.6.8 Availability and use of female condom

Unlike male condoms, fewer uniformed personnel in Bossaso have ever heard (13.1%) or used (9.1%) female condoms although only 5.6% know where to obtain them as shown in Table 84.

Table 84: Availability and use of female condom

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a female condom	Yes	38/287	13.2	13.1	9.5	17.8
Ever used a female condom with a sexual partner	Yes	3/38	7.9	9.1	2.7	26.4
Knows of a place or person where to obtain female condoms	Yes	2/38	5.3	5.6	1.2	22.4

3.6.9 HIV testing history and avoidance of HIV services

The majority (83.1%) of uniformed personnel in Bossaso know where to go for a HIV test even though only 58.5% have ever received an HIV test in their lifetime. More than half (65.3%) of those who have ever tested have done so within the past twelve months prior to this study constituting. Consequently, 38.2% of uniformed personnel have accessed HIV testing and know their HIV status. Lack of awareness on where to go for an HIV test is cited by nearly half (55.8%) of uniformed personnel in Bossaso as the main reason for having never sought for an HIV test. Overall, 45.0% of uniformed personnel in Bossaso avoid HIV services due to stigma and discrimination as shown in Table 85

Table 85: HIV testing history and avoidance of HIV services

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence	
Knows where to go if he wishes to receive a confidential HIV test	Yes	237/287	82.6	83.1	78.1	87.1
Knows his HIV status from an HIV test	Have ever been tested	161/287	56.1	58.5	52.4	64.3
When last tested	Less than 6 months	72/161	44.7	44.2	36.4	52.4
	6-12 months	33/161	20.5	21.1	15.2	28.6
	More than 12 months	56/161	34.8	34.7	27.4	42.7
Result of last HIV test	Positive	0/86	-	-	-	-
	Negative	161/161	100	100		
	Indeterminate	0/86	0	-		
Nature of HIV testing	Voluntary	116/161	72.1	70.1	62.1	77.1
	Required	45/161	28.0	30.0	22.9	37.9
During most recent HIV counselling/ testing, revealed to the health provider that he is engaged in transactional sex	Yes	0/23	0.0	0.0	-	-
Reasons for having never sought for an HIV test	Fear of or concern about stigma by staff or neighbours	26/124	21.0	20.0	13.6	28.5
	Fear of or concern about or experienced violence	16/124	12.9	14.1	8.6	22.3
	Fear of or concern about or experienced police harassment or arrest	13/124	10.5	10.1	5.7	17.3
	Didn't know where to go for an HIV test	69/124	55.7	55.8	46.4	64.8
GARPR 3.4: Knows his/her HIV status from an HIV test	Yes	105/287	36.6	38.2	32.4	44.3
GARPR 4.2: Avoidance of HIV services because of stigma and discrimination among key populations	Yes	55/122	45.1	45.0	35.9	54.5

3.6.10 Physical and Sexual violence

Only 7.7% of uniformed personnel in Bossaso have seen or heard of a woman being hit, kicked, or beaten because someone believed they sell sex to men. In addition, 4.2% of uniformed personnel have seen or heard of a FSW being physically forced to have sexual intercourse against their will mostly by the police (33.9%) as presented in Table 86.

Table 86: Physical and Sexual violence

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have seen/heard of a woman being hit, kicked, or beaten because someone believed she sells sex to men someone believed they sell sex to men in the past 12 months	Yes	21/287	7.3	7.7	5.0	11.8
Person who last hit, kicked, or beat the female sex worker	Don't know the person Social acquaintance	11/287 10/287	52.4 47.6	52.6 47.5	29.4 25.3	74.7 70.6
Have seen/heard of a woman being forced to have sex with a man by sexually assaulting or raping her intercourse against her will in the past 12 months	Yes	12/279	4.3	4.2	2.3	7.4
Person who last forced her to have sex with them against her will	Social acquaintance Police Family and relatives Client Don't know the person Pimp	2/12 4/12 1/12 1/12 3/12 1/12	16.7 33.3 8.3 8.3 25.0 8.3	14.7 33.9 6.2 12.3 24.7 8.2	2.5 10.5 0.6 1.3 6.1 0.8	53.7 69.2 42.3 61.1 62.4 50.0
Sought medical treatment after being physically forced to have sexual intercourse against her will	Yes	5/10	50.0	43.7	13.8	79.0
Reported this incident to the police	Yes	10/11	90.9	86.9	36.0	98.7

3.6.11 Programme coverage

Overall, the coverage of HIV prevention programmes among uniformed personnel in Bossaso is very low (5.9%). However, most (82.3%) uniformed personnel are aware of any Local NGO here that deliver non-medical assistance or advice to members of your group even though only 10.5% have attended any meetings to discuss STI or HIV/AIDS during the last 12 months respectively as shown in Table 87.

Table 87: Programme coverage

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Aware of any Local NGO here that deliver non-medical assistance or advice to members of your group	Yes	226/276	81.9	82.3	78.3	87.3
Have attended any meetings to discuss STI or HIV/AIDS during the last 12 months	Yes	28/286	9.8	10.5	7.2	15.0
Attended the sites he was referred to	Yes	6/11	54.6	62.3	28.3	87.4
GARPR 3.7 Coverage of HIV prevention programmes among key populations	Yes	15/287	5.2	5.9	3.5	9.7

3.6.12 Alcohol and drug use in the past three months

Few (5.6%) uniformed personnel in Bossaso consume alcohol compared to 85.4% who consume khat. In addition, 81.7% of the uniformed personnel smoke cigarette. Other drugs and substances consumed include marijuana or hashish (1.7%), injectable drugs (0.3%), and shisha smoking (1.9%). Only 2.5% of uniformed personnel reported having had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette.

Table 88: Alcohol and drug use in the past three months

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Frequency of having a drink containing alcohol during the past three months	Never	275/287	95.8	94.4	90.4	96.8
	Monthly or less	5/287	1.7	2.6	1.1	6.1
	2-4 times a month	5/287	1.7	2.3	1.0	5.5
	2-3 times a week	1/287	0.4	0.5	0	3.4
	4 or more times a week	1/287	0.4	0.2	0	1.5
Frequency of chewing khat during the past three months	Never	40/287	13.9	14.6	10.7	19.5
	Monthly or less	123/287	42.6	42.1	36.2	48.2
	2-4 times a month	23/287	8.0	8.3	5.5	12.4
	2-3 times a week	34/287	11.9	10.3	7.3	24.3
	4 or more times a week	67/287	23.3	24.7	19.8	30.5
Frequency of smoking marijuana or hashish during the past three months	Never	283/287	98.6	98.3	95.4	99.4
	Monthly or less	2/287	0.7	1.0	0.2	3.9
	2-4 times a month	0/287	0.0	-	-	-
	2-3 times a week	2/287	0.7	0.7	0.2	3.2
	4 or more times a week	0/287	0.0	-	-	-
Frequency of smoking cigarette during the past three months	Never	52/287	18.1	18.3	14.0	23.5
	Monthly or less	64/287	22.3	21.8	17.3	27.2
	2-4 times a month	50/287	17.4	16.2	12.4	21.1
	2-3 times a week	59/287	20.6	21.6	16.9	27.2

	4 or more times a week	62/287	21.6	22.0	17.4	27.5
Frequency of smoking shisha during the past three months	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week	282/287 1/287 1/287 0/287 3/287	98.3 0.4 0.4 0.0 1.1	98.1 0.3 0.3 - 1.4	95.4 0.0 0 - 0.5	99.2 1.8 1.8 - 4.3
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette	Yes	5/284	1.8	2.5	1.1	6.0
Frequency of injecting drugs during the past three months	Monthly Never	1/287 286/287	0.3 99.7	0.3 99.7	0.0 97.7	2.3 99.9
Type of drug injected	Decline to answer	1/1	100	100	-	-
Used a sterile needle and syringe during last injectable drug use	Yes	1/1	100	100	-	-
Shared a syringe or needle with anyone else when injecting drugs in the last three months	No	1/1	100	100	-	-
Received new, clean needles or syringes in the past three months	Yes	1/1	100	100	-	-

3.7 BOSSASO PORT WORKERS

3.7.0 Socio-demographic characteristics

A total of 289 port workers participated in the study. The average age of port workers in Bossaso is 31.5 years half (48.7%) of whom are aged 25 to 34 years. More than half (77.6%) of port workers had no education and 83.6% had stayed in Bossaso for more than two years. Half (53.3%) are married with an average of 2.9 dependents. Most (44.3%) port workers visit their families on a daily basis as presented in Table 89.

Table 89: Socio-demographic characteristics

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95%	Confidence
Age (Years)	Mean±SD	31.5±9.0			30.5	32.6
	Range	19 - 75				
	< 25 years	61/289	21.1	20.1	15.8	25.3
	25+ years	228/289	78.9	79.9	74.7	84.2
	18 – 24	61/289	21.1	20.1	15.8	25.3
	25 - 34	140/289	48.4	48.7	42.7	54.7
	35 - 44	63/289	21.8	22.9	18.1	28.4
	45 +	25/289	8.7	8.3	5.6	12.2
Education level	None	225/289	77.9	77.6	72.1	82.2
	Primary	49/289	17.0	17.0	13.0	22.0
	Secondary	15/289	5.2	5.4	3.2	9.0
Nationality	Somalia	283/289	97.9	98.0	95.6	99.1
	Ethiopia	5/289	1.7	1.8	0.7	4.2
	Somalia & Ethiopia	1/289	0.4	0.2	0.0	1.4
Length of stay in Bossaso	Less than 7 days	3/289	1.0	1.1	0.4	3.5
	7 days – 1 month	1/289	0.4	0.4	0.0	2.6
	2 – 3 months	2/289	0.7	0.6	0.2	2.4
	4 – 6 months	5/289	1.7	1.6	0.7	4.0
	7 – 11 months	10/289	3.5	3.3	1.7	6.2
	1 – 2 years	25/289	8.7	9.4	6.3	13.8
	More than 2 years	243/289	84.1	83.6	78.5	87.6
Frequency of visiting his family	Daily	135/289	46.7	44.3	38.4	50.3
	Once in a week	59/289	20.4	22.0	17.3	27.6
	>once in a week	28/289	9.7	10.0	6.9	14.2
	Once in a month	13/289	4.5	4.5	2.6	7.8
	Twice in a month	19/289	6.6	6.8	4.3	10.5
	2 - 3 months	11/289	3.8	3.9	2.2	7.0
	>3 months	24/289	8.3	8.6	5.8	12.7
Marital status	Single	80/289	27.7	27.9	22.8	33.7
	Married	155/289	53.6	53.3	47.3	59.3
	Divorced	53/289	18.3	18.4	12.6	26.5
	Widowed	1/289	0.4	0.4	0	2.6

Number of dependents	Mean±SD Range	2.9±3.0 0 - 20			2.5	3.2
Number of wives	1 2 3 4	133/155 20/155 2/155 0/155	85.8 12.9 1.3 0.0	86.0 12.6 1.4 -	79.1 8.0 0.4 -	90.8 19.2 5.6 -
Frequency of visiting neighbouring countries	Never Weekly Monthly Every 2 – 3 months After > 3 months	267/289 5/289 0/289 5/289 12/289	92.4 1.7 0.0 1.7 4.2	92.6 1.5 0.0 2.0 3.9	88.8 0.6 - 0.8 2.2	95.2 3.8 - 5.0 6.9
Overall monthly income in USD	< 100 ≥ 100 Mean±SD Range	95/289 194/289 168.6±249.3 20 - 3000	32.9 67.1	32.4 67.6	27.1 61.7 139.7	38.3 72.9 197.4

3.7.1 HIV and syphilis prevalence

The overall prevalence of HIV and active syphilis infection among port workers in Bossaso is 1.2% and 0.6% respectively. All the two syphilis infection cases were active as shown in Table 90. However, there was no HIV and syphilis comorbidity.

Table 90: HIV and syphilis prevalence

Characteristic	Sample proportions		Population Estimates		
	n/N	%	%	95% Confidence Interval	
HIV	3/289	1.0	1.2	0.4	3.6
Syphilis – Ever infected	5/289	1.7	1.8	0.7	4.4
Syphilis – Active infection	2/289	0.7	0.6	0.1	2.8

3.7.2 Patterns of STI care and treatment seeking behaviour

Nearly all port workers (99.2%) have heard of HIV and AIDS and other STIs (93.9%). While 21.0% of port workers had received an STI test in the past three months, only 15.2% have been diagnosed to have an STI twelve months prior to this survey. Contrastingly, only 3.1% of port workers have experienced an abnormal penile discharge in the past 12 months prior to this study and all sought STI treatment. In addition, only 4.0% of port workers have had a sore or ulcer on or near their penis in the past 12 months prior to this survey and half (55.7%) sought treatment as shown in Table 91.

Table 91: Patterns of STI care and treatment seeking behaviour

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of HIV/AIDS	Yes	286/289	99.0	99.2	97.5	99.8
Heard about other infections that can be transmitted through sex	Yes	268/289	92.7	93.9	90.7	96.1
Tested for sexually transmitted infections in the past three months	Yes	54/267	20.2	21.0	16.3	26.7
Diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	Yes	45/266	16.9	15.2	11.4	20.1
Had an abnormal discharge from their penis in the past 12 months	Yes	9/288	3.1	3.1	1.6	6.0
Had an abnormal discharge from their penis in the past 12 months and sought treatment	Yes	9/9	100	100	-	-
Type of treatment received	Injections Tablets	6/9 2/9	66.7 33.3	73.0 27.0	31.6 5.9	94.1 68.4
Had a sore or ulcer on or near penis or anus in the last 12 months	Yes	12/286	4.2	4.0	2.3	7.1
In the last 12 months, had a sore or ulcer on or near penis or anus and sought treatment	Yes	6/12	50.0	55.7	24.7	82.7
Type of treatment received	Injections Tablets	5/6 1/6	83.3 16.7	83.8 16.2	19.0 0.9	99.1 81.0

3.7.3 Knowledge on transmission of HIV and STI

There is varied knowledge score among port workers on HIV prevention and transmission with 60.1% (knowledge on one not getting HIV from mosquito bite) as the lowest score to 80.0% (HIV can be transmitted from mother to the baby during delivery) as the highest score. The overall composite knowledge among port workers who correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission is however low (7.7%) as shown in Table 92.

Table 92: Knowledge on transmission of HIV and STI

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Risk of HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners	Yes	174/289	60.2	62.3	56.3	67.9
People can reduce their chance of getting HIV and STI by using a condom every time they have sex	Yes	190/289	65.7	67.8	62.1	73.1
It is possible for a healthy-looking person to have HIV/AIDS.	Yes	205/289	70.9	74.2	68.8	79.0
People can get HIV from mosquito bites	No	217/289	75.1	74.7	69.0	79.6
People can get HIV by sharing food with a person who has HIV/AIDS	No	179/289	62.2	60.1	54.0	65.9
Heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer	Yes	183/288	63.5	65.8	60.0	71.2
HIV can be transmitted from mother to her baby during pregnancy	Yes	204/289	70.6	73.3	67.8	78.3
HIV can be transmitted from mother to her baby during delivery	Yes	224/288	77.8	80.0	74.9	84.3
HIV can be transmitted from mother to her baby by breastfeeding	Yes	213/289	73.7	76.7	71.4	81.3
There are special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby	Yes	196/289	67.8	70.7	65.1	75.8
GARPR 5.1: Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	Yes	22/289	7.6	7.7	5.0	11.7

3.7.4 General sexual history

Most (93.8%) port workers have had vaginal sex compared to only 4.5% who have ever had anal sex with a woman. The average age at first vaginal sex among port workers in Bossaso is 21.1 years. Only 41.7% of port workers have ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse while uniformed officer's houses being used as places to engage in transactional sex. Most port workers meet their new transactional clients and engage in sex at the uniformed personnel's homes as shown in Table 93 below.

Table 93: General sexual history

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have ever had vaginal sex with a woman	Yes	271/289	93.8	93.8	90.1	96.1
Age at first vaginal sex	Mean±SD Range	21.1±3.7 11 - 32			20.6	21.5
Ever had anal sex with a woman	Yes	13/287	4.5	4.5	2.5	7.7
Ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse	Yes	119/289	41.2	41.7	35.9	47.8
Number of different sexual partners in total he had sexual intercourse with in the past one month	Mean±SD Range	2.4±3.2 0 - 20			1.9	3.0
Where truckers meet most of their new transactional sex clients	Client's home	3/119	2.5	3.0	1.0	19.1
	At port worker's home	20/119	16.8	17.4	11.3	25.9
	Beach	25/119	21.0	17.7	11.9	25.7
	Hotel / Restaurant	2/119	1.7	2.3	0.5	9.6
	Khat shop	3/119	2.5	1.7	0.5	5.2
	Tea shop	2/119	1.7	1.6	0.4	6.5
	They call	64/119	53.8	56.3	46.8	65.3
Where port workers most often engage in transactional sex	At home they share with their family	72/119	60.5	62.8	53.3	71.3
	Car / vehicle	1/119	0.8	0.5	0.0	3.4
	Hotel or restaurant	1/119	0.8	0.5	0.0	3.4
	Khat shop	1/119	0.8	0.7	0.0	4.8
	Tea shop	1/119	0.8	0.5	0.0	3.8
	FSW's house	43/119	36.1	35.1	26.7	44.6

3.7.5 Sexual History with paying clients

Less than one quarter (20.8%) of port workers used a male condom in their last transactional sexual intercourse. In most cases (77.9%), it is the port worker who suggest condom use. However, more than half of port workers (74.0%) never use condoms. The average amount of money paid by a port worker to a FSW during last transactional sex is USD 16.4 while the majority (32.6%) paid between USD 11 – 20 as shown in Table 94.

Table 94: Sexual History with paying clients

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Used a condom the last time had transactional sexual intercourse with a client	Yes	22/105	21.0	20.8	13.8	30.0
Type of condom	Male condom	22/22	100	100	-	-
Person who suggested condom use at last transactional sexual intercourse	FSW	5/22	22.7	22.1	8.3	47.1
	Myself (port worker)	17/22	77.3	77.9	52.9	91.7
Frequency of using condoms with transactional clients over the last 30 days (1 month)	Every time	13/117	11.1	11.3	6.5	19.1
	Almost every time	6/117	5.1	4.5	2.0	10.2
	Sometimes	12/117	10.3	10.1	5.6	17.7
	Never	39/117	73.5	74.0	64.8	81.5
Number of female sex workers port worker had sex with on the last day	Mean±SD	1.3±5.7			1.2	1.4
	Range	0-3				
Amount of money paid during last transactional sex	0 - 5	10/119	8.4	7.4	3.9	13.7
	6 - 10	31/119	26.1	26.5	18.9	35.8
	11 - 20	61/119	51.3	50.7	41.3	60.1
	>= 21	17/119	14.3	15.4	9.5	23.8
	Mean±SD	16.4±16.9			23.3	23.8
	Range	2 - 150				

3.7.6 Sexual history with non-paying partners

Nearly a similar proportion of port workers reported using a condom during their last sexual intercourse with transactional clients (20.8%) and with non-transactional clients (25.1%). The average number of times a port workers had sexual intercourse with non-paying clients over the last 30 days is 4.7 times with port workers being the ones (54.0%) who mostly suggest condom use during last non-transactional sex as shown in Table 95.

Table 95: Sexual history with non-paying partners

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Number of times uniformed officer had sexual intercourse with a non-transactional sexual partner over the last 30 days (1 month)	Mean±SD Range	4.7±4.8 0 -25	-		4.1	5.2
Used a condom last time he had sexual intercourse with non-paying/ transactional sexual partner	Yes	56/212	26.4	25.1	19.5	31.6
Person who suggested condom use at last non-transactional sexual intercourse	Joint decision	4/53	7.6	5.7	2.0	15.3
	My partner	23/53	43.4	40.3	27.3	54.9
	Myself (port worker)	26/53	49.1	54.0	39.7	67.7

3.7.7. Availability and use of male condom

Although 81.0% of port workers in Bossaso have ever heard of or seen a male condom and 53.7% know a place or person where to obtain male condoms, only 33.7% have ever used a male condom. Few port workers received male condoms (5.5%) or counselling on condom use (9.1%) twelve months prior to this survey even though 5.1% perceive male condoms as not affordable as shown in Table 96.

Table 96: Availability and use of male condom

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a male condom	Yes	224/289	77.5	81.0	76.2	85.1
Ever used a male condom with a sexual partner	Yes	75/221	33.9	33.7	27.5	40.5
Knows of a place or person where to obtain male condoms	Yes	119/221	53.9	53.7	46.8	60.5
Usually carries condoms	Yes	49/215	22.8	23.9	18.4	30.4
Received condoms in the past three months	Yes	13/221	5.9	5.5	3.1	9.6
Received counselling on condom use and safe sex in the past three months	Yes	22/221	10.0	9.1	5.9	13.6

Person who usually supplies the condoms	Client (FSW)	24/216	11.1	10.3	6.8	15.3
	Never use a condom	143/216	66.2	66.2	59.3	72.5
	Myself	41/216	19.0	20.3	15.2	26.7
	Owner or manager of the place	8/216	3.7	3.2	1.5	6.5
Affordability of male condom	Affordable	76/211	36.0	37.9	31.3	45.0
	Not affordable	95/211	45.0	45.1	38.3	52.2
	Somewhat affordable	40/211	19.0	17.0	12.5	22.7

3.7.8 Availability and use of female condom

Unlike male condoms, fewer port workers in Bossaso have ever heard (15.5%), used (11.3%) or know where to obtain (13.3%) female condoms as shown in Table 97.

Table 97: Availability and use of female condom

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a female condom	Yes	47/289	16.3	15.5	11.7	20.4
Ever used a female condom with a sexual partner	Yes	5/47	10.6	11.3	4.5	25.8
Knows of a place or person where to obtain female condoms	Yes	6/47	12.8	13.3	5.7	28.1

3.7.9 HIV testing history and avoidance of HIV services

Nearly half (43.6%) of port workers in Bossaso know where to go for a HIV test while only one quarter (22.0%) have ever received an HIV test in their lifetime. However, only 8.9% know their HIV status from an HIV test within the past twelve months prior to this study. Fear of or concern about stigma by staff or neighbours is cited by the majority (47.5%) of port workers in Bossaso as the reason for having never sought for an HIV test. Overall, 73.8% of port workers in Bossaso avoid HIV services due to stigma and discrimination as shown in Table 98.

Table 98: HIV testing history and avoidance of HIV services

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Knows where to go if he wishes to receive a confidential HIV test	Yes	123/289	42.6	43.6	37.7	49.7
Knows his HIV status from an HIV test	Have ever been tested	65/289	22.5	22.0	17.4	27.4
When last tested	Less than 6 months	15/65	23.1	25.9	16.0	39.1
	6-12 months	8/65	12.3	12.8	6.2	24.6
	More than 12 months	42/65	64.6	61.3	42.7	83.5
Result of last HIV test	Positive	1/65	1.5	1.7	0.2	11.3
	Negative	64/65	98.5	98.3	88.7	99.8
	Indeterminate	0/65	0.0	0.0	0.0	0.0
Nature of HIV testing	Voluntary	59/65	90.8	92.5	83.7	96.7
	Required	6/65	9.2	7.5	3.3	16.3
Reasons for having never sought for an HIV test	Fear of or concern about stigma by staff or neighbours	121/245	49.4	47.5	41.0	54.1
	Fear of or concern about or experienced violence	43/245	17.6	19.8	14.9	25.8
	Fear of or concern about or experienced police harassment or arrest	15/245	6.1	6.1	3.6	10.0
	Didn't know where to go for an HIV test	66/245	26.9	26.7	21.3	32.8
GARPR 3.4: Knows his/her HIV status from an HIV test	Yes	24/289	8.3	8.9	6.0	13.0
GARPR 4.2: Avoidance of HIV services because of stigma and discrimination among key populations	Yes	179/243	73.7	73.8	67.7	79.2

3.7.10 Physical and Sexual violence

Only 7.2%

Table 99: Physical and Sexual violence

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have seen/heard of a woman being hit, kicked, or beaten because someone believed she sells sex to men someone believed they sell sex to men in the past 12 months	Yes	24/286	8.4	7.2	4.8	10.8
Person who last hit, kicked, or beat the female sex worker	Social acquaintance	10/24	41.7	34.7	17.7	56.7
	Police	3/24	12.5	17.2	5.3	43.6
	Family and relatives	1/24	4.2	2.8	0.3	20.0
	Client	3/24	12.5	12.2	3.5	35.1
	Don't know the person	7/24	29.4	33.1	15.6	57.0
Have seen/heard of a woman being forced to have sex with a man by sexually assaulting or raping her intercourse against her will in the past 12 months	Yes	13/287	4.5	4.1	2.3	7.8
Person who last forced her to have sex with them against her will	Social acquaintance	2/12	16.7	17.8	3.4	57.2
	Family and relatives	1/12	8.3	5.8	0.6	40.8
	Client	1/12	8.3	11.5	1.2	59.0
	Don't know the person	8/12	66.7	64.9	30.1	88.9
Sought medical treatment after being physically forced to have sexual intercourse against her will	Yes	7/10	70.0	79.2	41.9	95.3
Reported this incident to the police	Yes	6/10	60.0	65.0	27.7	90.0

3.7.11 Programme coverage

Overall, the coverage of HIV prevention programmes among port workers in Bossaso is low (28.3%). Furthermore, only 16.4% and 10.0% of port workers are aware of any Local NGO here that deliver non-medical assistance or advice to members of your group and have attended any meetings to discuss STI or HIV/AIDS during the last 12 months respectively as shown in Table 100.

Table 100: Programme coverage

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Aware of any Local NGO here that deliver non-medical assistance or advice to members of your group	Yes	50/289	17.3	16.4	12.4	21.2
Have attended any meetings to discuss STI or HIV/AIDS during the last 12 months	Yes	28/276	10.1	10.0	6.9	14.3
Attended the sites he was referred to	Yes	8/93	8.6	8.5	4.2	16.6
GARPR 3.7 Coverage of HIV prevention programmes among key populations	Yes	87/289	30.0	28.3	23.2	33.9

3.7.12 Alcohol and drug use in the past three months

Few (3.8%) port workers in Bossaso consume alcohol compared to 60.4% who consume khat. In addition, 52.9% of them smoke cigarette. Other drugs and substances consumed include marijuana or hashish (9.5%), and shisha smoking (12.0%). In addition, 1.3% inject drugs (mostly cocaine and memphetamine) while nearly three quarters (74.1%) reporting use of a sterile needle and syringe the last time the used injectable drugs of abuse. Only 11.9% of port workers reported having had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette.

Table 101: Alcohol and drug use in the past three months

Characteristic		Sample proportions		Population Estimates	
		n/N	%	%	95% Confidence Interval
Frequency of having a drink containing alcohol during the past three months	Never	278/288	96.5	96.2	92.9
	Monthly or less	6/288	2.1	2.4	
	2-4 times a month	2/288	0.7	0.8	
	2-3 times a week	1/288	0.4	0.3	
	4 or more times a week	1/288	0.4	0.4	0.0

Frequency of smoking cigarette during the past three months	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week	148/289 17/289 32/289 27/289 65/289	51.2 5.9 11.1 9.3 22.5	47.1 5.5 11.9 11.4 24.2	41.2 3.3 8.4 7.8 19.3	53.1 9.0 16.5 16.3 29.8
Frequency of smoking shisha during the past three months	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week	252/289 15/289 21/289 0/289 1/289	87.2 5.2 7.3 - 0.4	88.0 4.4 7.2 - 0.4	83.6 2.6 4.6 - 0.0	91.4 7.6 11.0 - 2.8
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette	Yes	40/287	13.9	11.9	8.7	16.1
Frequency of injecting drugs during the past three months	Monthly Never	5/289 284/289	1.7 99.0	1.3 99.0	0.5 96.9	3.2 99.7
Type of drug injected	Cocaine Memphetamaine Decline to answer	1/5 3/5 1/5	20.0 60.0 20.0	17.4 48.6 34.1	0.6 4.8 1.6	87.6 94.6 94.3
Used a sterile needle and syringe during last injectable drug use	Yes	2/3	66.7	74.1	0.4	99.9
Shared a syringe or needle with anyone else when injecting drugs in the last three months	Yes	2/5	40.0	33.0	2.6	90.1
Received new, clean needles or syringes in the past three months	Yes	0/5	0.0	0.0	-	-

3.8 BOSSASO TRUCKERS

3.8.0 Socio-demographic characteristics

A total of 287 truckers, all of Somalia nationality, participated in the study. The average age of truckers in Bossaso is 32.5 years with half (50.8%) of the respondents aged 25 to 34 years. Most truckers (46.9%) have primary level of education and the majority (54.8%) have stayed in Bossaso for more than two years. Three quarters (73.3%) are married with an average monthly income of USD 227.0. Nearly two thirds (63.3%) of truckers travel to neighbouring countries mostly on a weekly basis as shown below in Table 102.

Table 102: Socio-demographic characteristics

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Age (Years)	Mean±SD	32.5±9.6			31.4	33.7
	Range	19 - 64				
	< 25 years	54/287	18.8	19.1	13.9	25.5
	25+ years	233/287	81.2	80.9	74.5	86.1
	18 – 24	54/287	18.8	19.1	13.9	25.5
	25 - 34	132/287	46.0	50.8	43.6	58.0
	35 - 44	55/287	19.2	13.3	9.6	18.2
Education level	45 +	46/287	16.0	16.8	12.3	22.6
	None	97/287	33.8	40.9	34.2	47.9
	Primary	144/287	50.2	46.9	40.2	53.7
	Secondary	42/287	14.6	11..4	8.2	15.7
	University / College	4/287	1.4	0.9	0.3	2.4
Nationality	Somalia	287/287	100.0	100.0	-	-
Length of stay in Bossaso	Less than 7 days					
	7 days – 1 month					
	2 – 3 months					

Overall monthly income in USD	< 100	24/287	8.4	8.8	5.6	13.5
	>= 100	263/287	91.6	91.2	86.5	94.4
	Mean±SD Range	227.0±174.9 20 - 1000			206.6	247.3

3.8.1 HIV and syphilis prevalence

The overall prevalence of HIV and syphilis infection (active) among truckers in Bossaso is 0.4% and 0.2% respectively as shown in Table 103.

Table 103: HIV and syphilis prevalence

Characteristic	Sample proportions		Population Estimates			
	n/N	%	%	95% Confidence Interval		
HIV	2/287	0.7	0.4	0	1.5	
Syphilis – Ever infected	1/287	0.4	0.2	0	1.4	
Syphilis – Active infection	1/287	0.4	0.2	0	1.4	

3.8.2 Patterns of STI care and treatment seeking behaviour

Nearly all truckers have heard of HIV and AIDS (97.1%) and STIs (89.4%). Even though 17.8% of truckers had received an STI test in the past three months, only 11.1% had been diagnosed to have an STI twelve months prior to this survey. Contrastingly, only 5.3% of truckers had experienced an abnormal penile discharge in the past 12 months prior to this study and 91.4% of among them sought STI treatment. In addition, only 0.6% of truckers have had a sore or ulcer on or near their penis in the past 12 months prior to this survey and none of them sought treatment as shown in Table 104.

Table 104: Patterns of STI care and treatment seeking behaviour

Characteristic	Response	Sample proportions		Population Estimates			
		n/N	%	%	95% Confidence Interval		
Ever heard of HIV/AIDS	Yes	281/287	97.9	97.1	93.6	98.7	
Heard about other infections that can be transmitted through sex	Yes	265/287	92.3	89.4	84.0	93.1	
Tested for sexually transmitted infections in the past three months	Yes	44/262	16.8	17.8	13.0	23.8	
Diagnosed by a doctor or medical professional to have had a sexually transmitted infection in the past 12 months	Yes	24/264	9.1	11.1	7.0	17.1	
Had an abnormal discharge from their penis in the past 12 months	Yes	14/285	4.9	5.3	2.9	9.3	
Had an abnormal discharge from their penis in the past 12 months and sought treatment	Yes	12/14	85.7	91.4	64.6	98.4	
Reasons for not seeking treatment for the sore or ulcer on or near penis or anus	Could not afford treatment	1/2	50.0	57.1	0	100	

	Embarrassed or afraid to seek treatment	1/2	50.0	42.9	0	100
Had a sore or ulcer on or near penis or anus in the last 12 months	Yes	1/284	0.4	0.6	0	4.1
In the last 12 months, had a sore or ulcer on or near penis or anus and sought treatment	Yes	0/1	0.0	0.0	-	-

3.8.3 Knowledge on transmission of HIV and STI

While all truckers scored above 55.0% on individual knowledge questions, their overall composite knowledge on how to correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission is however very low (8.6%). Highest knowledge score (88.8%) recorded on awareness of existence of special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby as shown in Table 105.

Table 105: Knowledge on transmission of HIV and STI

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Risk of HIV transmission can be reduced by having sex with only one uninfected partner who has no other partners	Yes	171/281	60.9	62.7	56.1	68.9
People can reduce their chance of getting HIV and STI by using a condom every time they have sex	Yes	156/279	55.9	57.0	50.2	63.5
It is possible for a healthy-looking person to have HIV/AIDS.	Yes	242/279	86.7	81.7	75.4	86.7
People can get HIV from mosquito bites	No	218/282	77.3	75.5	68.7	81.2
People can get HIV by sharing food with a person who has HIV/AIDS	No	235/282	83.3	84.4	79.0	88.6
Heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer	Yes	243/284	85.6	84.7	79.2	88.9
HIV can be transmitted from mother to her baby during pregnancy	Yes	245/281	87.2	84.6	78.9	88.9
HIV can be transmitted from mother to her baby during delivery	Yes	248/282	87.9	85.1	79.5	89.4
HIV can be transmitted from mother to her baby by breastfeeding	Yes	249/282	88.3	85.5	79.9	89.7
There are special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby	Yes	257/284	90.5	88.0	82.6	91.9
GARPR 5.1: Both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	Yes	27/287	9.4	8.6	5.6	13.0

3.8.4 General sexual history

Nearly all (94.6%) truckers have had vaginal sex compared to only 1.3% who have ever had anal sex. The average age at first vaginal sex among truckers in Bossaso is 20.6 years. Nearly one third (30.3%) of truckers having ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse. The majority of truckers meet their new transactional clients and engage in sex at their client's (FSW) homes as shown in Table 106 below.

Table 106: General sexual history

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Interval	Confidence
Have ever had vaginal sex with a woman	Yes	270/279	96.8	94.6	89.0	97.4
Age at first vaginal sex	Mean±SD Range	20.6±2.7 16 - 30	-		20.3	20.9
Ever had anal sex with a woman	Yes	4/282	1.4	1.3	0.5	3.6
Ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse	Yes	90/279	32.3	30.8	24.8	34.5
Number of different sexual partners in total he had sexual intercourse with in the past one month	Mean±SD Range	2.6±1.8 1 - 14			2.2	3.0
Where truckers meet most of their new transactional sex clients	Client's home	57/90	63.3	62.8	50.4	73.8
	At trucker's home	6/90	6.7	7.2	3.0	16.3
	Hotel / Restaurant	1/90	1.1	1.0	0.1	7.2
	Khat shop					
	Tea shop	23/90 3/90	25.6 3.3	22.1 6.9	14.0 2.2	32.9 19.5
Where truckers most often engage in transactional sex	At home they share with their family	3/90	3.3	3.2	0.9	10.8
	Car / vehicle					
	Khat shop	5/90	5.6	5.9	2.2	14.5
	FSW's house	5/90	5.6	4.7	1.8	12.0
		77/90	85.6	86.3	76.3	92.4

3.8.5 Sexual History with paying clients

The majority of truckers (38.8%) used a male condom in their last transactional sexual intercourse. In most cases (97.8%), it is the truckers who suggested condom use. However, half of truckers (55.5%) never use condoms. The average amount of money paid by a trucker to a FSW during last transactional sex is USD 8.1 while the majority (52.9%) paid between USD 0 - 5 as shown in Table 107.

Table 107: Sexual History with paying clients

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Used a condom the last time had transactional sexual intercourse with a client	Yes	36/88	40.9	38.8	27.7	51.3
Type of condom	Male condom	36/36	100	100	-	-
Person who suggested condom use at last transactional sexual intercourse	FSW	1/36	2.8	2.3	0.3	15.8
	Myself (trucker)	35/36	97.2	97.8	84.2	99.7
Frequency of using condoms with transactional clients over the last 30 days (1month)	Every time	9/90	10.0	9.9	4.8	19.3
	Almost every time	7/90	7.8	5.1	2.3	10.7
	Sometimes	27/90	30.0	29.6	19.7	41.7
	Never	47/90	52.2	55.5	43.2	67.1
Number of female sex workers truckers had sex with on the last day	Mean±SD	1.4±0.5			1.3	1.5
	Range	0 - 3				
Amount of money paid during last transactional sex	0 - 5	47/90	52.2	52.9	40.6	64.9
	6 - 10	35/90	38.9	37.4	26.5	49.7
	11 - 20	7/90	7.8	8.7	3.8	18.8
	>= 21	1/90	1.1	1.0	0.1	7.2
	Mean±SD	8.1±6.6			6.7	9.5
	Range	0 - 60				

3.8.6 Sexual history with non-paying partners

Whereas the majority of truckers reported using a condom during their last sexual intercourse with transactional clients, only 20.5% of truckers used a condom with their last non-transactional client. In addition, the average number of times truckers had sexual intercourse with non-paying clients over the last 30 days is 1.9 times. In most non-transactional sexual intercourse acts, it is the truckers (79.7%) who suggested condom use as shown in Table 108.

Table 108: Sexual history with non-paying partners

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Number of times trucker had sexual intercourse with a non-transactional sexual partner over the last 30 days (1 month)	Mean±SD Range	1.9±1.8 0 - 15	-		1.7	2.1
Used a condom last time he had sexual intercourse with non-paying/transactional sexual partner	Yes	42/205	20.5	20.1	14.6	27.1
Person who suggested condom use at last non-transactional sexual intercourse	Joint decision	2/41	4.9	4.4	0.9	18.5
	My partner	6/41	14.6	16.0	6.4	34.6
	Myself (trucker)	33/41	80.5	79.7	61.2	90.7

3.8.8 Availability and use of male condom

Though 88.9% of truckers in Bossaso have ever heard of or seen a male condom and 46.0% know a place or person where to obtain male condoms, only 19.9% have ever used a male condom. Few truckers received male condoms (3.2%) or counselling on condom use (7.1%) twelve months prior to this survey even though 96.4% perceive male condoms to be affordable as shown in Table 109.

Table 109: Availability and use of male condom

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a male condom	Yes	255/287	85.8	88.9	79.8	90.2
Ever used a male condom with a sexual partner	Yes	53/254	20.9	19.9	15.0	26.0
Knows of a place or person where to obtain male condoms	Yes	127/254	50.0	46.0	38.9	53.1
Usually carries condoms	Yes	37/254	14.6	13.0	9.2	18.1
Received condoms in the past 3 months	Yes	8/249	3.2	3.2	1.4	7.2
Received counselling on condom use and safe sex in the	Yes	17/251	6.8	7.1	4.2	12.0
Person who usually supplies the condoms	Client (FSW)	2/249	0.8	0.5	0.1	2.1
	Never use a condom	196/249	78.7	78.5	72.1	83.7
	Myself	46/249	18.5	18.3	13.5	24.4
	Owner or manager of the place	5/249	2.0	2.7	1.1	6.5

Affordability of male condom	Affordable	218/226	96.5	96.4	92.4	98.4
	Not affordable	3/226	1.3	1.7	0.5	5.7
	Somewhat affordable	5/226	2.2	1.9	0.7	4.8

3.8.9 Availability and use of female condom

Unlike male condoms, fewer truckers in Bossaso have ever heard (28.4%), used (2.4%) or know where to obtain (25.7%) female condoms as shown in Table 110.

Table 110: Availability and use of female condom

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Ever heard of a female condom	Yes	85/287	29.6	28.4	22.9	34.8
Ever used a female condom with a sexual partner	Yes	1/85	1.2	2.4	0.3	15.8
Knows of a place or person where to obtain female condoms	Yes	18/85	21.2	25.7	16.0	38.5

3.8.10 HIV testing history and avoidance of HIV services

More than half (59.9%) of truckers in Bossaso know where to go for a HIV test. However, only 10.9% know their HIV status from an HIV test within the past twelve months prior to this study. Fear of or concern about stigma by staff or neighbours is cited by the majority (50.2%) of truckers in Bossaso as the reason for having never sought for an HIV test. Overall, 75.3% of truckers in Bossaso avoid HIV services due to stigma and discrimination among FSWs as shown in Table 111.

Table 111: HIV testing history and avoidance of HIV services

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Knows where to go if he wishes to receive a confidential HIV test	Yes	164/281	58.4	59.9	53.1	66.3
Knows his HIV status from an HIV test	Have ever been tested	53/287	18.5	18.9	14.1	24.9
When last tested	Less than 6 months	14/53	26.4	30.3	17.6	47.0
	6-12 months	19/53	35.9	27.7	16.5	42.6
	More than 12 months	20/53	37.7	42.1	24.0	71.5
Result of last HIV test	Negative	53/53	100	100	-	-
Nature of HIV testing	Voluntary	46/52	88.5	92.1	79.9	97.1
	Required	6/52	11.5	7.9	2.9	20.1
During most recent HIV counselling/ testing, revealed to the health provider that he is engaged in transactional sex	Yes	0/27	0.0	0.0	-	-
Reasons for having never sought for an HIV test	Fear of or concern about stigma by staff or neighbours	124/224	55.4	50.2	42.6	57.8
	Fear of or concern about or experienced violence	41/224	18.3	20.2	14.4	27.7
	Fear of or concern about or experienced police harassment or arrest	3/224	1.3	2.1	0.7	6.6
	Didn't know where to go for an HIV test	56/224	25.0	27.5	21.1	34.8
GARPR 3.4: Knows his/her HIV status from an HIV test	Yes	33/287	11.5	10.9	7.5	15.7
GARPR 4.2: Avoidance of HIV services because of stigma and discrimination among key populations	Yes	168/219	76.7	75.3	68.0	81.3

3.8.11 Physical and Sexual violence

The proportion of truckers in Bossaso who have seen or heard of a woman being hit, kicked, or beaten (social acquaintance (54.2%)) because someone believed they sell sex to men is 13.2%. In addition, 6.5% of truckers in Bossaso have seen or heard of a FSW being physically forced to have sexual intercourse against their will commonly by their social acquaintance (69.1%) as illustrated in Table 112.

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Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Have seen/heard of a woman being hit, kicked, or beaten because someone believed she sells sex to men someone believed they sell sex to men in the past 12 months	Yes	38/274	13.9	13.2	9.2	18.5
Person who last hit, kicked, or beat the female sex worker	Social acquaintance	23/38	60.5	54.2	35.2	72.1
	Police	2/38	5.3	8.4	1.9	30.6
	Other sex worker	5/38	13.2	16.5	6.3	36.7
	Client	1/38	2.6	2.1	0.3	14.6
	Don't know the person	2/38	5.3	11.0	2.7	35.7
	Family or relative	3/38	7.9	3.8	1.1	12.1
	Non-paying partner or boyfriend	2/38	5.3	4.1	0.9	16.2
Have seen/heard of a woman being forced to have sex with a man by sexually assaulting or raping her intercourse against her will in the past 12 months	Yes	23/276	8.3	6.5	4.2	10.1
Person who last forced her to have sex with them against her will	Social acquaintance	16/23	69.6	69.1	44.2	86.4
	Don't know the person	1/23	4.4	2.6	0.3	19.3
	Police	1/23	4.4	4.4	0.5	28.7
	Other sex worker	2/23	8.7	11.4	2.2	41.8
	Client	3/23	13.0	12.6	3.7	35.3
Sought medical treatment after being physically forced to have sexual intercourse against her will	Yes	9/23	39.1	34.9	16.9	58.5
Reported this incident to the police	Yes	11/23	47.8	50.4	27..9	72.8

3.8.12 Programme coverage

Overall, the coverage of HIV prevention programmes among truckers in Bossaso is (11.9%). Furthermore, only 6.8% and 3.9% of truckers are aware of any Local NGO here that deliver non-medical assistance or advice to members of your group and have attended any meetings to discuss STI or HIV/AIDS during the last 12 months respectively as shown in Table 113.

Characteristic	Response	Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Aware of any Local NGO here that deliver non-medical assistance or advice to members of your group	Yes	14/278	5.0	6.8	3.9	11.5
Have attended any meetings to discuss STI or HIV/AIDS during the last 12 months	Yes	9/274	3.3	3.9	1.9	7.9
Attended the sites he was referred to	Yes	6/20	30.0	35.3	14.7	63.3
GARPR 3.7 Coverage of HIV prevention programmes among key populations	Yes	29/287	10.1	11.9	8.0	17.2

3.8.13 Alcohol and drug use in the past three months

About 5.3% truckers in Bossaso consume alcohol compared to 100% who consume khat. In addition, 72.7% of the truckers smoke cigarette. Other drugs and substances consumed include marijuana or hashish (6.8%), injectable drug, cocaine (0.4%), and shisha smoking (11.9%). Furthermore, 3.4% of truckers reported having had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette.

Table 114: Alcohol and drug use in the past three months

Characteristic		Sample proportions		Population Estimates		
		n/N	%	%	95% Confidence Interval	
Frequency of having a drink containing alcohol during the past three months	Never	272/285	95.4	94.7	90.7	97.1
	Monthly or less	4/285	1.4	2.0	0.7	5.4
	2-4 times a month	2/285	0.7	0.6	0.1	2.2
	2-3 times a week	5/285	1.8	2.2	0.9	5.5
	4 or more times a week	2/285	0.7	0.6	0.1	2.2
Frequency of chewing khat during the past three months	Never	71/287	24.7	27.3	21.7	33.7
	Monthly or less	12/287	4.2	5.4	3.0	9.7
	2-4 times a month	52/287	18.1	14.9	11.0	19.9
	2-3 times a week	48/287	16.7	14.8	10.8	19.8
	4 or more times a week	104/287	36.2	37.6	31.1	44.6
Frequency of smoking marijuana or hashish during the past three months	Never	271/287	94.4	93.2	87.9	96.3
	Monthly or less	2/287	0.7	0.9	0.2	4.3
	2-4 times a month	1/287	0.4	0.7	0.0	4.8
	2-3 times a week	3/287	1.1	1.7	0.5	5.6

	4 or more times a week	10/287	3.5	3.5	1.5	8.1
Frequency of smoking cigarette during the past three months	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week	77/287 12/287 45/287 57/287 96/287	26.8 4.2 15.7 19.9 33.5	30.8 5.9 14.0 17.2 32.1	24.9 3.3 10.1 12.9 25.9	37.4 10.3 19.1 22.5 39.1
Frequency of smoking shisha during the past three months	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week	240/287 0/287 12/287 12/287 23/287	83.6 - 4.2 4.2 8.0	88.1 - 2.8 3.3 5.7	83.9 - 1.5 1.7 3.6	91.4 - 5.4 6.3 8.8
Have had sex with a client in the past three months after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette	Yes	10/272	3.7	3.4	1.7	6.8
Frequency of injecting drugs during the past three months	Never 2-4 times a month	285/286 1/286	99.7 0.4	99.7 0.3	97.9 0.0	99.9 2.1
Type of drug injected	Cocaine	1/1	100	100	-	-
Used a sterile needle and syringe during last injectable drug use	Yes	1/1	100	100	-	-
Shared a syringe or needle with anyone else when injecting drugs in the last three months	Yes	0/1	0.0	0.0	-	-
Received new, clean needles or syringes in the past three months	Yes	1/1	100	100	-	-

4. DISCUSSION

This section examines the various key variables and GARPR indicators and makes intergroup comparisons. Since this is the first IBBS study to be implemented in south central Somalia and Puntland, the majority of discussions will be based on both intergroup discussion and Somaliland FSW IBBS studies in 2008 and 2014. At the same time uniformed officers, port workers and truckers are key populations though no IBBS in Somalia had been conducted before targeting these particular groups. Therefore, comparison with Hargeisa IBBS will be limited to FSW only. This study, however, forms a good baseline for subsequent IBBS surveys required to track HIV programme performance in Somalia.

4.1 Socio-demographic characteristics and HIV/Syphilis prevalence

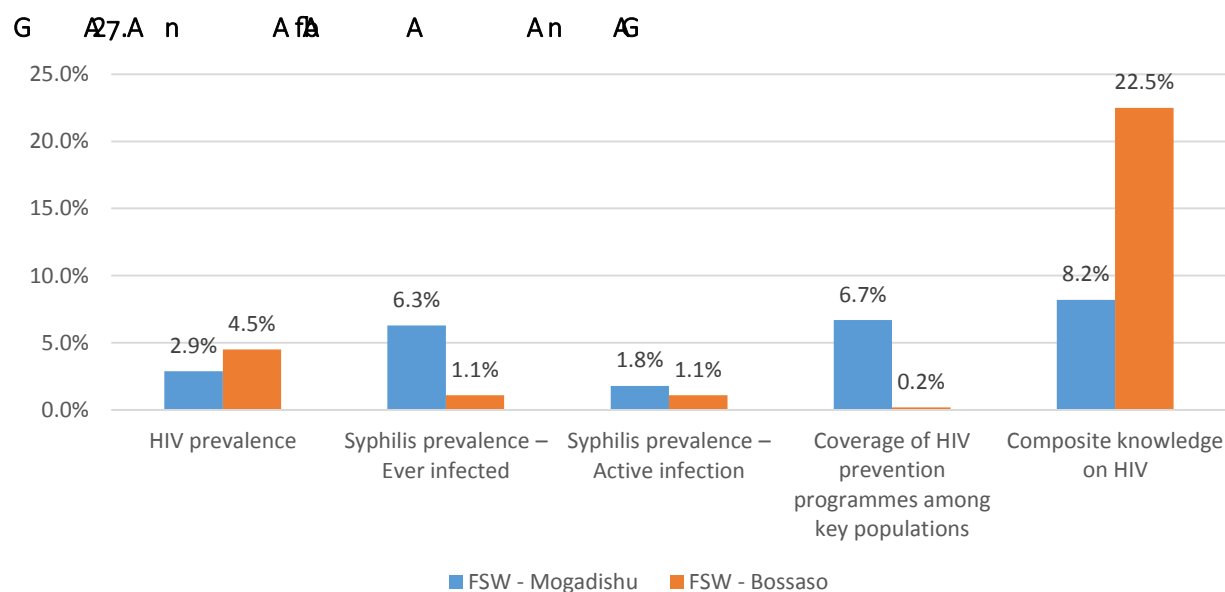
The findings of this IBBS indicate relatively similar patterns across the surveys. Most of the participants were youths aged between 25 – 34 years with their mean ages ranging from 28 years – 33 years, with either no education or primary education. This finding is similar to those in previous studies indicating the majority of FSW have a mean age of about 28 – 29 years (IOM, 2016; IOM, 2014; Kritmaa et al. (2008). This is critical to informing HIV programming in Somalia to tailor Information Education Communication (IEC) materials to the target key population group. In addition, the majority of truckers, port workers and uniformed categories were married with some having up to four wives. In comparison, across the two survey sites, many FSW were either separated or divorced, which could be a contributing factor to engagement in transactional sex. This could explain in part the findings of this survey showing the majority of transactional sexual activities happen at client's (FSW) home. Across the four surveys, truckers significantly travel to neighbouring countries with varied duration of stay outside the country before visiting their families.

This study reports an almost similar HIV prevalence among FSW in Bossaso (4.5%) to that conducted Somaliland in 2014 (4.8%). However, the Mogadishu FSW HIV prevalence of 2.9 is lower than that established in Hargeisa in 2014.

4.2 Comparison of key indicators across Mogadishu and Bossaso study groups

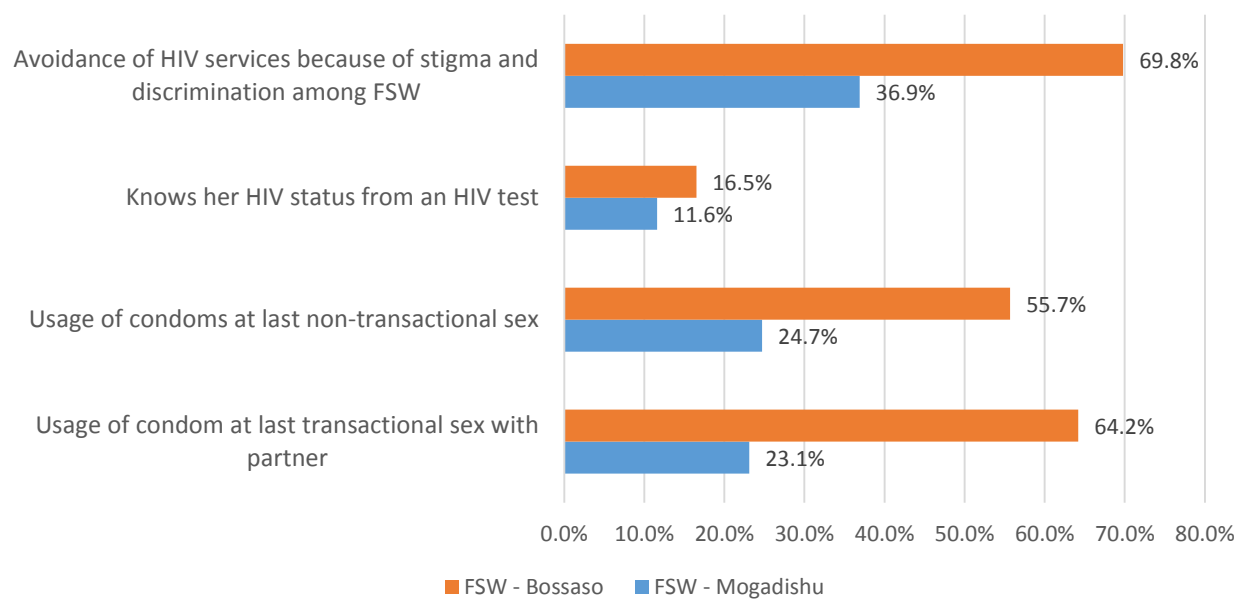
4.2.1 Female sex workers

Comparison of FSW group across Mogadishu and Bossaso indicate a higher HIV disease burden in Bossaso compared to Mogadishu as evidenced by a comparatively high HIV prevalence but low coverage of HIV prevention programmes targeting FSW. However, syphilis prevalence is higher in Mogadishu as shown in figure 15.



Although most FSW are avoiding HIV services in Bossaso due to stigma and discrimination, a higher proportion of FSW in Bossaso used condom with both last transactional and non-transactional clients compared to FSW in Mogadishu. Similarly, fewer FSW in both Bossaso and Mogadishu have had an HIV test and know their HIV status. This indicates the magnitude of high risk sex the FSW and their clients in these two areas engage in. Furthermore, it demonstrates the need to bridge this gap by increasing coverage of HIV prevention programmes targeting key populations in Somalia.

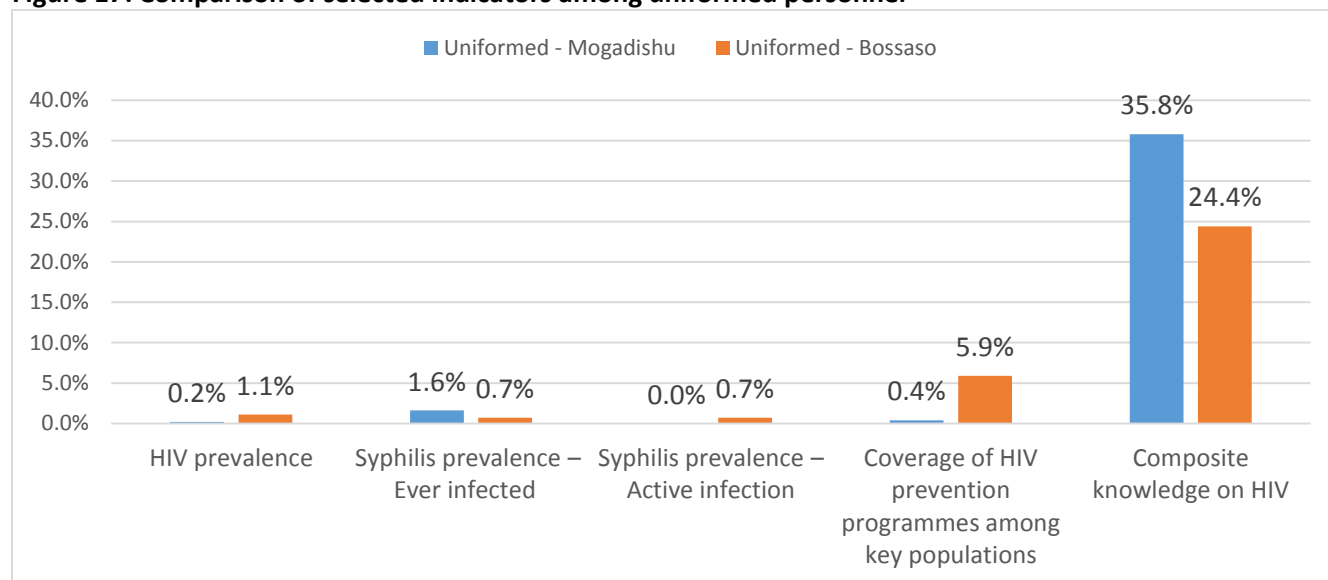
Figure 16: Comparison of selected indicators among FSWs



4.2.2 Uniformed personnel

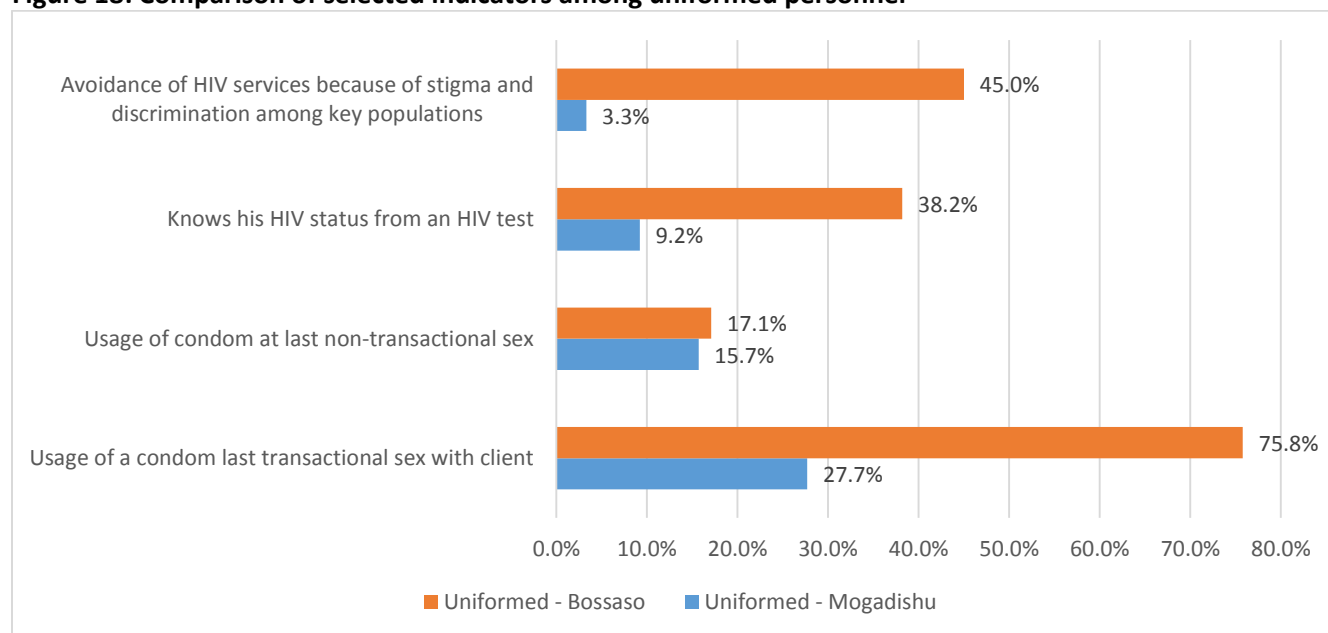
HIV and syphilis prevalence among uniformed personnel is low in both Mogadishu and Bossaso. Unlike Bossaso FSWs, coverage of HIV prevention programme is high among uniformed personnel in Bossaso. However, uniformed personnel in Mogadishu have higher composite knowledge on HIV compared to their colleagues in Bossaso as illustrated below in figure 17.

Figure 17: Comparison of selected indicators among uniformed personnel



The findings in figure 18 indicating higher proportion of uniformed personnel avoiding HIV prevention services due to fear of stigma and discrimination is consistent with findings for FSW, port workers, and truckers in Bossaso on the same indicator as shown in figures 18,19,20.

Figure 18: Comparison of selected indicators among uniformed personnel



4.2.3 Port workers

Across Mogadishu and Bossaso, HIV prevalence and active syphilis is low as shown in figure 19 below. Condom usage is higher among transactional clients than non-transactional clients. The performance among groups is highest across all indicators in Bossaso. This could, in part, be explained by the relatively higher coverage of HIV prevention programmes among key populations.

Figure 19: Comparison of selected indicators among port workers

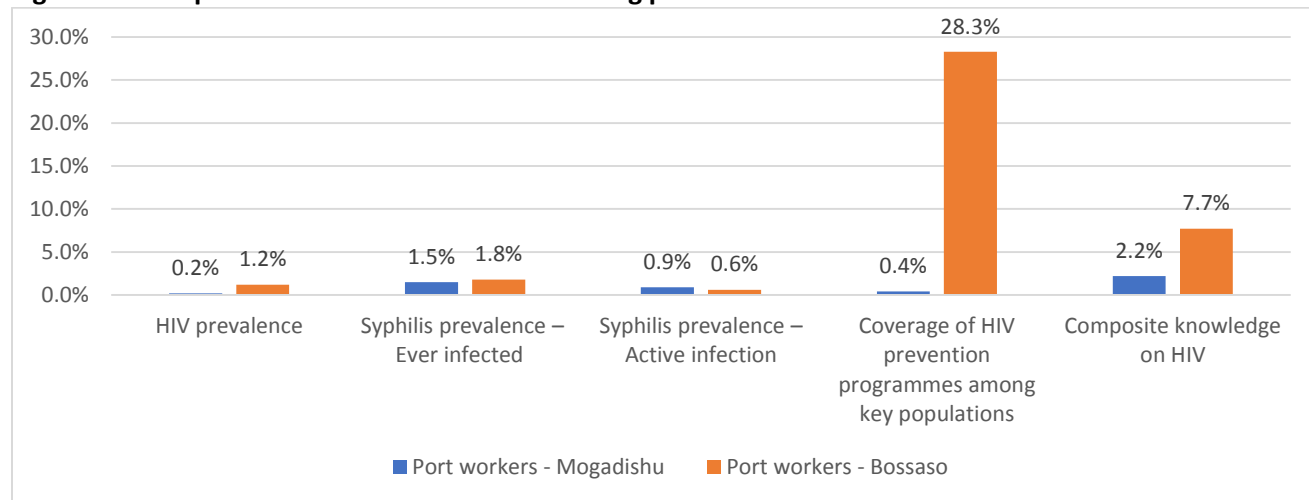
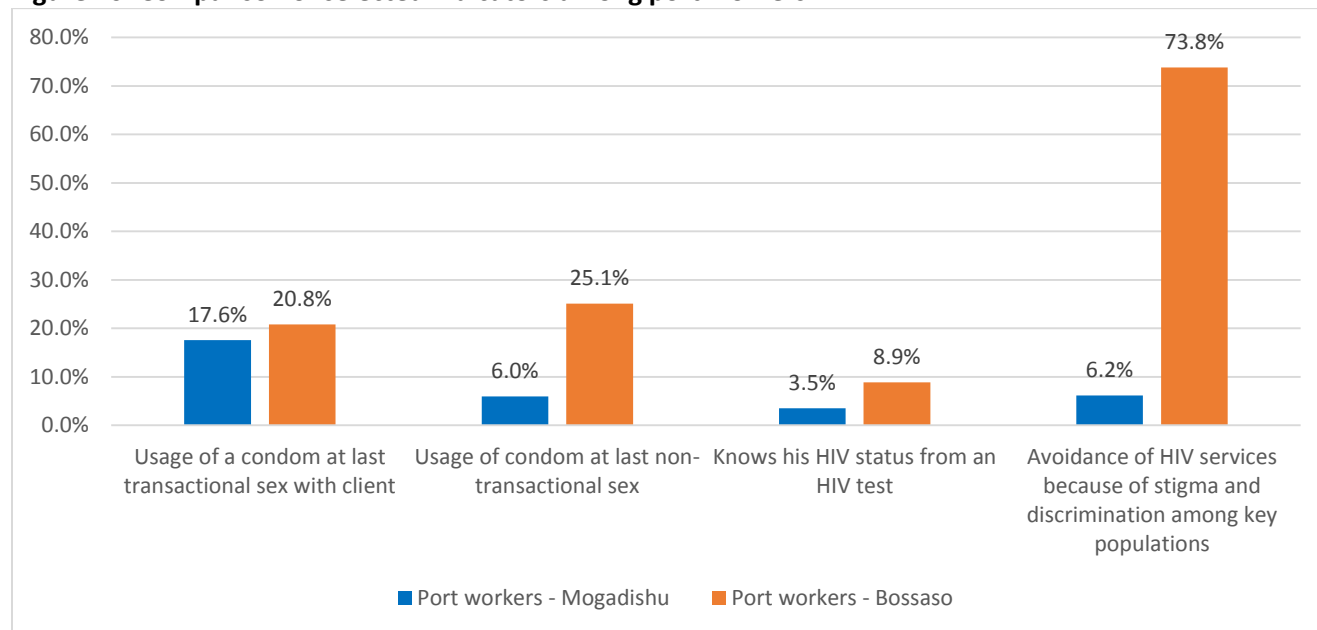


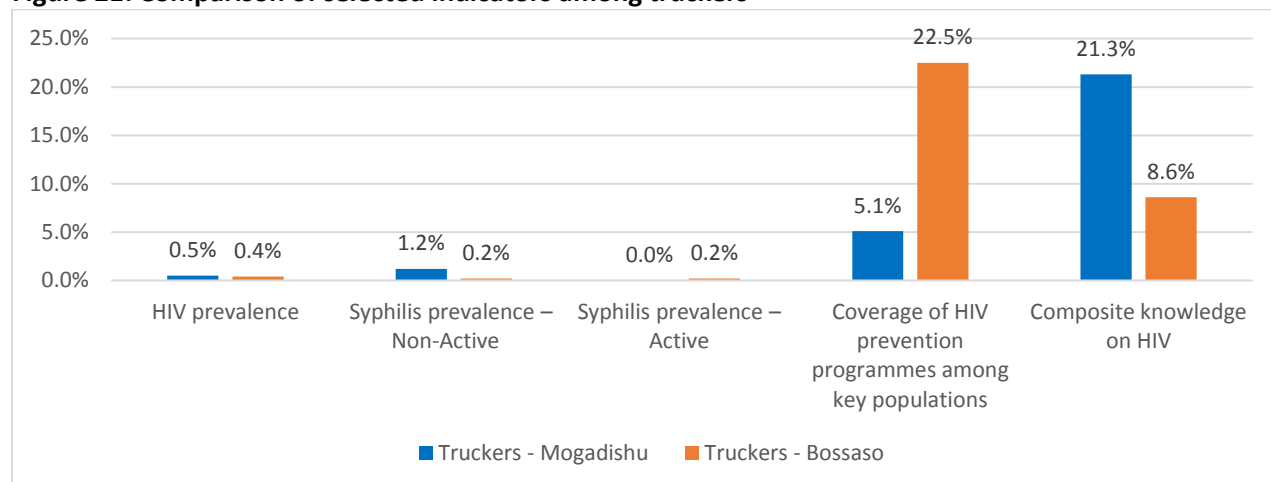
Figure 20: Comparison of selected indicators among port workers



4.2.4 Truckers

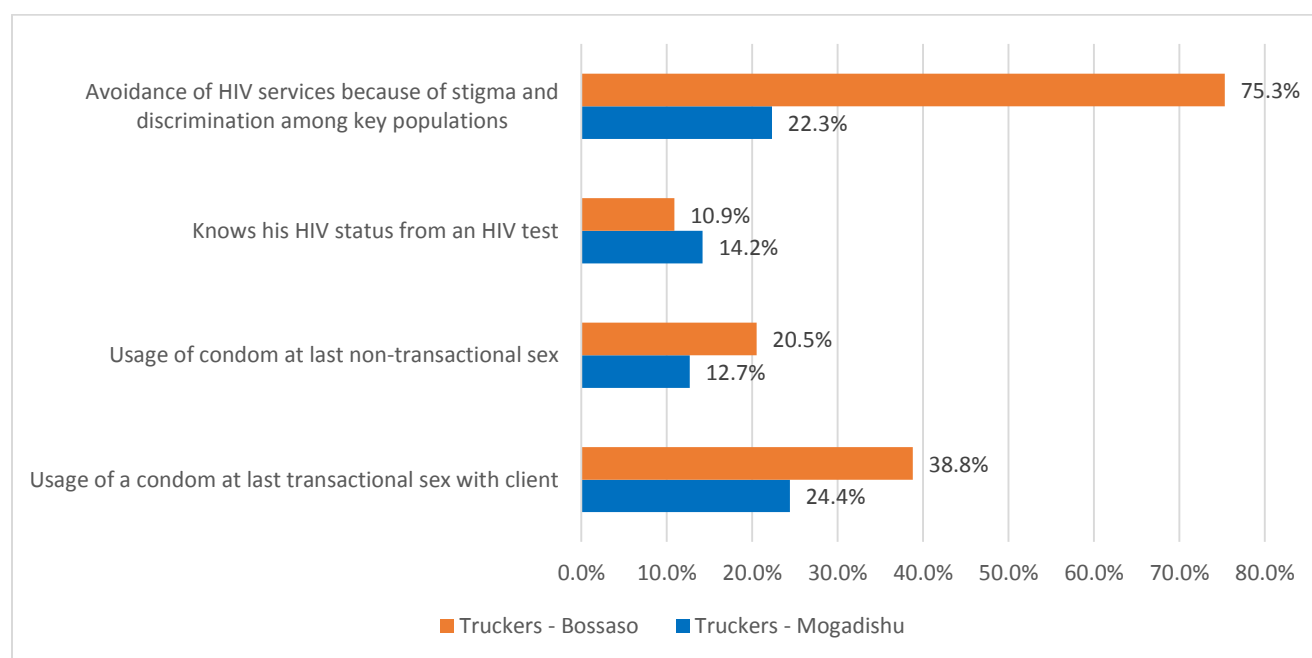
A significantly higher HIV prevalence and coverage of HIV prevention programmes among Bossaso truckers. However, composite knowledge on HIV is higher among truckers in Mogadishu.

Figure 21: Comparison of selected indicators among truckers



Avoidance of HIV services is more pronounced among truckers in Bossaso. This could have affected their uptake for HIV services in Bossaso. Inconsistency in condom usage is present in both Mogadishu and Bossaso truckers as illustrated in figure 22 below.

Figure 22: Comparison of selected indicators among truckers



5. CONCLUSION

The prevalence of HIV in South Central Somalia and Puntland is higher among FSW compared with truckers, uniformed officer and port workers. The prevalence of HIV among FSW in Mogadishu (2.9%) and Bossaso (4.5%) is highest. Amongst uniformed personnel, the prevalence of HIV is 0.9% in Mogadishu compared with 1.1% amongst uniformed personnel in Bossaso. The prevalence of HIV among port workers is lower in Mogadishu (0.2%) compared to port workers in Bossaso (1.2%). In addition, truckers in Bossaso have a slightly lower HIV prevalence (0.4%) compared to those in Mogadishu (0.5%).

Furthermore, the prevalence of syphilis infection (ever infected) among FSW in Mogadishu is 6.3% compared to 1.1% among FSW in Bossaso. Active syphilis infection is less than those who have had a previous syphilis infection across the study groups. For instance, 1.8% and 1.1% is the active syphilis infection prevalence among FSW in Mogadishu and Bossaso respectively. On the other hand, the prevalence of syphilis infection among client groups is highest amongst port workers in Bossaso (1.8%), uniformed personnel (1.6%) and port workers (1.5%) in Mogadishu.

The proportion of participants who correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission is highest among uniformed personnel (35.8% in Mogadishu and 24.4% in Bossaso) but lowest among port workers in Mogadishu (2.2%). Condom usage during last transactional sex is generally low across study groups though highest among uniformed personnel in Bossaso (75.8%) and lowest among port workers in Mogadishu (17.6%). However, in most study groups in Bossaso and Mogadishu, condom use at last non-transactional sex is less than that in transactional sex.

Few participants knew their HIV status from an HIV test. A higher proportion among uniformed personnel in Bossaso (38.2%) know their HIV status from an HIV test compared to other groups. Coverage of HIV prevention programmes among Key populations is generally low across the surveys in Mogadishu and Bossaso. Highest HIV programme coverage recorded among groups in Bossaso compared to those in Mogadishu. Port workers in Bossaso had the highest coverage (28.3%) whereas the lowest is 0.2% among FSW in Bossaso.

Avoidance of HIV programmes because of stigma and discrimination among key populations is more pronounced among groups in Bossaso. For instance, 75.3% of truckers in Bossaso reported this as a contributor to their low access to HIV services in Bossaso.

Injectable drug use (IDU) exists among key populations in Mogadishu and Bossaso. IDU is highest among FSW in Mogadishu and port workers both in Mogadishu and Bossaso. In addition, a small proportion of truckers and uniformed personnel also inject drugs across the two study sites.

6. LIMITATIONS OF THE STUDY

In order to meet project timelines, this IBBS survey was implemented within a short period. The duration of the data collection ranged from one month to two months. In order for the survey team, especially FSW team, to build trust with participants, it requires considerably more time to ensure validity of survey subjects, and comfort responding to invasive and personal questions. The IBBS team was able to reassure those who had the courage to come to the survey site and to participate in the interview and obtain an HIV and syphilis test; however with additional time and outreach/advocacy of the survey, the participants could have been more varied.

Security for both participants and IBBS survey data collection team was a constant challenge especially in Mogadishu. Frequent explosions occasionally led to teams and participants failing to access study site. The time lost was compensated by working from 7am until 6 pm for the days the security situation was favourable.

This IBBS survey intended to estimate the size of key population as part of good IBBS practices and in line with GARPR recommendations. However, there was no programme data specific to key population groups. This could have allowed for computation using survey data to generate size estimates by the health service multiplier methods.

This IBBS survey was undertaken during a drought and food shortage in Somalia. The fact that monetary incentives were given to participants to compensate their time and travel, the study risked to recruit participants disguising as FSW, truckers, port workers or uniformed personnel. However, each study site had a well-trained screener and site team leader who tried as much as possible to ensure all participants met inclusion criteria. All the same, during the TWG in Mogadishu and Garowe agreed on locally appropriate incentive amount that could not meet the threshold of luring people to fake eligibility.

The high level of stigma and criminalization of sex work and HIV/ AIDS in Somalia was more evident during RDS recruitment of FSW. Some refused to come to the study site fearing they could be arrested by law enforcers. In other instances two FSW relocated from Mogadishu and Bossaso to other towns like Garowe for fear that people might know they are sex workers and or had HIV and AIDS. The IBBS site staff constantly reassured the participants of the safety and confidentiality of the whole data collection process.

The high stigma and discrimination associated with those who test HIV positive among uniformed personnel, truckers, port workers, and FSW could have contributed to some potential participants who knew their HIV positive status choose not to participate in the IBBS survey as participation in this survey was entirely voluntary. The uniformed personnel also risked losing their job in the police or military in case their managers discovered they are HIV positive.

7. RECOMMENDATIONS

1. Optimization of HIV testing services among key populations

Findings of this IBBS survey indicate very low proportion of key populations who know their HIV status. To be precise, the lowest is 3.5% (Mogadishu port workers) whereas the highest is 38.2% (Bossaso uniformed personnel). Multiple HIV testing strategies targeting key populations at different hotspots should be undertaken by all stakeholders including outreach testing using peer education approaches, and testing within health facility outpatient and inpatient testing (Provider Initiated Counselling and Testing).

2. Design and prompt implementation of a peer education strategy to increase coverage of HIV prevention programme among key populations

Coverage of HIV prevention programmes among key populations is low (less than 25%) with high rates of avoidance of HIV services due to stigma and discrimination, especially in Bossaso (up to 75.3% and 73.8% among truckers and port workers in Bossaso respectively). To ensure essential HIV services reach the target population through recruited and trained key population peer educators, efforts need to be made by all stakeholders in Somalia to quickly design and roll out a peer education strategy. Such a peer education strategy should be designed in a way to increase referral of peers for HIV counselling and testing services in addition to STI screening and treatment.

3. Increase access to and use of condoms among key populations

Across all study groups, condom use is low with inconsistencies in condom use between transactional and non-transactional clients. The majority of respondents preferred to access condoms through pharmacies. HIV programmes in Somalia should consider partnering with private pharmacies to enable easier access to condom among key populations. Such partnership however, should take precautions as religious practices in Somalia prohibit condom promotion and use.

4. Additional future IBBS research

While this survey acts as a baseline, future IBBS surveys should be conducted in Somalia to track progress of performance on key HIV indicators and establish trends in prevalence for HIV and STIs. Such future IBBS will help to measure the success of HIV programme in Somalia. Such future IBBS surveys will help to measure the success of HIV programmes in Somalia. In future IBBS surveys, it will be ideal to follow up the four groups included in this IBBS survey; however, it is also recommended to consider including other key population groups not included in this round. In Mogadishu for instance, key HIV risk groups recommended to be included in future surveys include returnees, prisoners and internally displaced persons (IDPs).

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		More than 2 years	Wax ka badan 2 sano	
10	What is your current marital status? (Waa maxay xaladaada guur ee waqtii xadirkar?)	Single	Ma lii qabo	SKIP TO QN 12
		Married	waa lii qabaa	
		Separated	waan kala tagnay	SKIP TO QN 12
		Divorced	waa lii furay	SKIP TO QN 12
		Widowed	waa liiga dhintay	SKIP TO QN 12
11	Does your spouse/partner have another wife or wives? (Ninkaaga/saxiibka miyuu qabaa naag ama naaga kale?)	Yes	Haa	
		No	Maya	
12	Who do you currently live with? DO NOT READ ANSWERS (Yaad la nooshahay hadda?) HA AKHRININ JAWAABAHA (Multi select))	I live alone	Kaligey ayaa nool	
		Parents	Waalidka	
		Husband	Ninkayga	
		Siblings	Walalahay	
		Children	Caruurteyda	
		Other family/relatives	Qaraaba kale	
		Friend or roommate (not sexual partner)	Saaxib ama qof aan qol wadaagno (ma ahan qof uu xiriir galmo naga dhaxeeyo)	
		Boyfriend or man I am committed to	Saaxiibkey ama nin aan balan ka haayo.	
		Other (specify):	qof kale (cadey):	
		Don't know	ma aqaanno	
		Decline to answer	jawaab ka bixini maayo	
13	Do you currently earn money doing work other than sex work? (Wax lacag ah ma ka heshaa shaqa kale oo aan ka ahayn ganacsiga jirka?)	Yes	Haa	
		No	Maya	SKIP TO QN 15
				SKIP TO QN 15
		Decline to answer	Jawaab ka bixini maayo	
14	What is this other work you currently do? (Waa maxay shaqada kale oo aad hadda qabatid?) (Multi select)	Khat seller	Qaad Ayaan iibiya	
		Tea seller	Shah Ayaan iibiya	
		Domestic worker (cleaning, child care)	Cid ayaan shaqaale u ahay (nadiifin, xanaanada caruurta)	
		Hotel worker (cleaning rooms)	Hotel worker (cleaning rooms)	
		Cleaning Shops	Cleaning Shops	
		Trader	Trader	
		Other (specify) _____	Other (specify) _____	
15	What is your overall monthly household income? (Total income from ALL sources) (Marki laisku daro bishi meqaa reerkaaga soo gasha (isku dar lacagta ka soo gasha DHAMAAN dhinacyada?))	Somalia shilling _____	Shillin Somaali _____	
		Somaliland shilling _____	Shillinka Somaaliland _____	
		US Dollars _____	Doolarka Mareikanka _____	
		Other currency and amount _____	Lacaga kale iyo intey tahay _____	
		Don't remember	Ma xasuusto	
		Decline to answer	Jawaab ka bixini maayo	
16	How many people are you supporting now? (Meqa qof ayaa kugu hoos nool hadda?)		_____ cadadka dadka	
17	Some women have been circumcised. Have you been circumcised? (Dumar qaar waa la guday. Adiga ma lagu guday?)	Yes	Haa	
		No	Maya	
		Don't Know	Ma aqaano	
		Decline to answer	Jawaab ka bixini maayo	
Section 2: Knowledge on transmission of HIV and STI (Aqoonta la xiriirta gudbinta HIV-ga iyo Cudurada galmada)				
18	Have you ever heard of HIV/AIDS? (Waliga ma maqashay HIV/AIDS-ka?)	Yes	Haa	
		No	Maya	
19	Apart from HIV, have you heard about other infections that can be transmitted through sex? (Waxa aan ka ahayn HIV-ga, ma maqashay cudura kale oo lagu kala qaado galmada?)	Yes	Haa	
		No		SKIP TO QN 21
			Maya	
20		Lower abdominal pain	waxaa xanuunta qaybta hoose ee caloosha	

		Rectal pain	Waxaa xanuunta xaartada	
		Unusual genital discharge/leaking	Dhecaan ayaa ka yimaada/ka soo daata meesha kaadida	
	How would a person know that he or she had a sexually transmitted infection? (Multi select)	Anal discharge	Dhecaan ka yimaada xaartada	
	DO NOT READ ANSWERS	Burning pain on urination	kaadi olol	
	(Side ayuu qofka ku ogaanaya in uu ku dhacay cudurada lagu kala qaado galmada?)	Genital or anal sores/ulcers	Kaadi mareenka/xaarta oo bararta	
	(Multi select)	Genital warts	Kadi mareenka oo cuncunta	
	HA AKHRININ JAWAABAHA	Blood in urine	Kaadi dhiig	
		Loss of weight	misaanka oo qofka ka yaraada	
		Would not have any symptoms	Wax calaamad ah ma qabalah	
		their (specify):	Waxyaaba kale(Cadey):	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
21	Have you been tested for sexually transmitted infections in the past three months ? (Ma lagaa baaray cudurada lagu kala qaado galmada sadaxdi bilood ee la soo dhaafay?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
22	In the last 12 months , has a doctor or a medical professional told you that you had a sexually transmitted infection? (12ki bilood ee ugu dambeesay, dhaqtar ama qof leh xirfad caafimaad ma kuu sheegay in aad qabtid cudur lagu kala qaaday galmada?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
23	Sometimes women experience an abnormal discharge from their vagina. In the last 12 months , have you had an abnormal discharge from your vagina? (Mararka qaar haweenka waxaa dhecaan ka yimaadaa kaadi mareenka, 12ki bilood ee ugu dambaysay wax dhecaan ah makaa yimadee kaadi mareenka?)	Yes	Haa	
		No	Maya	SKIP TO QN 28
		Don't know	Ma aqaani	SKIP TO QN 28
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 28
24	When did you last have abnormal discharge from your vagina? (Gormaa ugu dambesay in uu dhecaan kaa yimaado kaadi mareenka?)	[]/[] / []/[] (month []/[]/[] (Bisha/Sanadka) /year)		
25	Did you seek treatment for this vaginal discharge? (Wax daweeyn ah maraadsatay marki uu dhacankaan kaa yimaaday?)	Yes	Haa	SKIP TO QN 27
		No	Maya	SKIP QN 27
		Don't know	Ma aqaani	SKIP QN 27
		Decline to answer	Jawaab ka bixini mayo	SKIP QN 27
26	Why did you NOT seek treatment? DO NOT READ ANSWERS (Maxaad daweeyn u doonani weyday ? HA AKHRININ JAWAABAHA) (Multi select)	Didn't know where to go for treatment	Ma aqaanin goobta aan daweeynta u aadi laha	
		Embarrassed or afraid to seek treatment	Waan ka xishooday ama ka cabsaday in aan daawo doonto	
		Could not afford treatment	Waan awoodi waaye	
		Unable to get transportation	waxaan awoodi waaye baabur raaca	
		Didn't think I needed it	Ma u maleynin in aan ubaahanahay	
		Other (specify):	Waxyaaba kale (Cadeey):	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
27	What treatment(s) did you receive? READ ANSWERS (Daawo (yin) nooce ah ayaad heshay? AKHRI JAWAABAHA) (Multi select)	Injections	cirbada	
		Tablets	kaniini	
		Cream	Bomaato	
		Other (specify):	Mid kale(cadeey):	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
28	Sometimes women have a sore or ulcer on or near their vagina. In the last 12 months , have you had a sore or ulcer on or near your vagina?	Yes	Haa	
		No	Maya	SKIP TO QN 33
		Don't know	Ma aqaani	SKIP TO QN 33

	(Mararka qaar waxaa barara ama alaso uga soo baxda kaadi mareynka ama aga gaarkiisa. 12ki bilood ee ugu dambesay maku bararay ama aalso makaaga soo baxday kaadi mareynka ama aga garkiisa?)	Decline to answer	Jawaab ka bixini mayo	SKIP TO QN 33
29	When did you last have a sore or ulcer on or near your vagina? (Gormaay ahayd marki ugu dambesay oo kaadi mareynka ku bararay ama aalso kaaga soo baxday?)	[]/[]/ []/[]/[] (month /year)	[]/[]/[]/[] (bisha /sanadka)	
		Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
30	Did you seek treatment for this sore or ulcer on or near your vagina? (Wax daawo ah ma raadsatay bararka ama aalsada kaaga soo baxday kaadi mareynka ama aga garkiisa?)	Yes	Haa	SKIP TO QN 32
		No	Maya	SKIP QN 32
		Don't know	Ma aqaani	SKIP QN 32
		Decline to answer	Jawaab ka bixini maayo	SKIP QN 32
31	Why did you NOT seek treatment? DO NOT READ ANSWERS (Maxaad daweeyn u doonani weyday? HA AKHRININ JAWAABAHA) (Multi select)	Didn't know where to go for treatment	Ma aqaanin goobta aan daweeynta u aadi laha	
		Embarrassed or afraid to seek treatment	Waan ka xishooday ama ka cabsaday in aan daawo doonto	
		Could not afford treatment	Waan awoodi waaye	
		Unable to get transportation	waxaan awoodi waaye baabur raaca	
		Didn't think I needed it	Ma u maleynin in aan ubaahanahay	
		Other (specify):	Waxyaaba kale (Cadeey):	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
32	What treatment(s) did you receive? READ ANSWERS (Daawo (yin) nooce ah ayaad heshay? AKHRI JAWAABAHA) (Multi select)	Injections	cirbada	
		Tablets	kaniini	
		Cream	Bomaato	
		Other (specify):	Mid kale(cadeey):	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
33	Can the risk of HIV transmission be reduced by having sex with only one uninfected partner who has no other partners? (Halista qaadista HIV-ga mala yareyni kara hadii lala galmoodo hal qof oo aan lahayn cudurka oo aana qabin saxiiba kale?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
34	Can people reduce their chance of getting HIV and STI by using a condom every time they have sex? (Dadka ma yareen karaan qaditaanka HIV-ga iyo cudurada kale ee la ga qaado galmada hadii ay isticmalaan cinjirka (kondomka) marwaliba oo ay sameyaan galmada?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
35	Is it possible for a healthy-looking person to have HIV/AIDS? (Ma suura galba qof u'eg wax caafimaad leh in uu HIV/AIDS uu qabo?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
36	Can people get HIV from mosquito bites? (Dadka HIV-ga ma ka qaadi karaan qaniinja kaneeco?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
37	Can people get HIV by sharing food with a person who has HIV/AIDS? (Dadka HIV-ga maku dhici kara hadii cunno la cunaan qof leh cudurka HIV/AIDS-ka?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
38	Have you heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer?	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	

	(Ma maqashay inay jirto daawo ka hortaga fayruuska oo ay ka qaadani karan dhaqtarka ama kalkaaliyayaasha dadka qaba cudurka HIV/AIDS-ka oo ku caawineysa inay mudda dheer noladaan?)		
39	Can HIV be transmitted from mother to her baby during pregnancy? (Cudurka HIV-ga ma ku daarani kartaa canugeeda hooyada uurka leh?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
40	Can HIV be transmitted from mother to her baby during delivery? (Cudurka HIV-ga ma ku daarani kartaa canugeeda marki ay hooyada dhaleyso?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
41	Can HIV be transmitted from mother to her baby by breastfeeding? (Cudurka HIV-ga ma ku daarani kartaa canugeeda hooyada marki ay nuujineys?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
42	Are there any special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV transmission to the baby? (Majirtaa daawo gaar ah oo uu dhaqtarka ama kalkaayada ay siiso dumarka qabo cudurka HIV-ga si loo yareeyo halista uu canuga ugu dhaco HIV-ga?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
Section 3: Sexual History (Taariikhda Galmada)			
43	At what age did you first have vaginal sex? (Meqa sana ayaad jirtay marki ugu horeysay oo aad galma toos sameysay?)	_____ Years	_____ Sano
44	At what age did you first have anal sex? (Meqa sana ayaad jirtay marki aad galmada xaartada sameysay?)	_____ Years	_____ Sano
45	At what age did you first receive money, a gift (like Khat) or favour in exchange of sexual intercourse? (Meqa sano ayaad jirtay marki ugu horeysay oo aad lacag qaadatid, hadiyad (sida qaadka) ama asxaan lagu sameeye adiga oo ku badalanaayo galma?)		_____ Sano
46	What were the reasons that led you to exchange sex for money the first time? (Waa maxay sababta keentay in aad lacag ku badaltid galmada?)	I needed money	Waxaan u baahnay lacagta
I didn't have any other job		Shaqo kale ma haysanin	
I grew up around people who did sex work		Waxaan ku soo ag koray dad ka shaqeysta galmada	
I was forced/pressured into it		waa laigu qasbay/cadaadiye	
I like it/for pleasure		Waan ka helay/raaxo awgeed	
I was encouraged by friends/people I know		Waxaa igu dhiira galiye asxaab/dad aan garanaayo	
It pays well/you can make a lot of money		Lacag fiican bay keenta/ lacag badan ayaad ka heli	
I was abandoned by my parents/siblings		Waxaa I ceyriye walidkey/walaalahay	
I was abandoned by my husband		Waxaa I ceyriye ninkayga	
So that I can have extra money to buy material things I want		Si aan u helo lacag dheeri ah oo aan ku iibsado waxyaabaha aan rabo.	
1 Because I am an orphan/I don't have a mother or father		1 Because I am an orphan/I don't have a mother or father. Waayo waxaan ahay agoonama rajo/malihi aabo ama hooyo	
1 Other (specify):		1 waxyaabo kale (cadeey):	
47	How many different sexual partners in total did you have sexual intercourse with in the past one month? (Marki laisku daro meqa qof oo kala duwan ayaad la galmootay Halki bil ee ugu dambeesay?)		
48	Where do you meet most of your NEW transactional sex clients?	Beach	Xeebta
		They call me	Way isoo wacaan

	(Halkeed kula kulantaa macamishaada ugu badan ee CUSUB ee galmada?)	At my home	Gurigeeyga	
		At client's home	Guriga macamiilka	
		Tea Shop	Dukaanka shaha	
		<i>Khat</i> shop	<i>Dukaanka qaadka</i>	
		Hotel/restaurant	Hodheel/maqaayad	
		Town streets/highway	Shawaariicda magaalada/Wadada	
		Through pimps/Dalals	Asxaabta ayaa keento/dalaal	
		Other (Specify)	Siyaaba kale (cadeey)	
49	Where do you most often engage in transactional sex? (Halkeed badanaa ku sameysaan ganacsiga galmada?)	At my home I share with my family	Gurigeeyga, waxaan la wadaaga rerkeyga	
		At my home I share with other women exchanging sex	Gurigeeyga waxaan la wadaaga haween kale oo ka ganacsada galmada.	
		The client's house	Guriga macamiilka	
		Car/Vehicle	Gaari/babuur	
		Tea Shop	Dukaanka shaha	
		<i>Khat</i> Shop	<i>Dukaanka qaadka</i>	
		Hotel/restaurant	Hodheel/maqaayad	
		Other (specify) _____	Meela kale (cadeey) _____	
		Decline to answer	Jawaab ka bixini maayo	
50	Do you operate through a pimp/dilal?	Yes	Haa	
	<i>Dilal/pimp is someone who makes money from sex work by either acting as brothel owner or a broker between sex worker and a client</i>	No	Maya	SKIP TO QN 54
	(Miyaad u howlgasha adiga oo sii maraayo qof leh goob galmo lagu sameeyo/dalaal?) <i>Qof leh goob galmo lagu sameeyo/dalaal waa qof lacag ka helo ganacsiga galmada isaga oo iskaleh guriga ama ah dalaal u dhaxeeya dumarka jirkooda ka ganacsada iyo macamiisha.</i>	Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 54
51	Do you split (share) the money earned from this sexual transaction with the other people?	Yes	Haa	
		No	Maya	SKIP TO QN 54
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 54
52	With who do you (share) the money earned from sexual transaction? (Yawaaye qofka aad la (wadaagtid) lacagta aad ka heshid ganacsiga jirkaaga?)	Pimp / Broker (Dalal)	Qofka guriga leh/Dalaal	
		Female Head of House	Haweeneyda maamusha guriga	
		Male Head of House	Ninka maamula guriga	
		Other (specify) _____	Kuwa kale(cadeey) _____	
		Don't remember	Ma xasuusto	
		Decline to answer	Jawaab ka bixini maayo	
53	How much do you give this person (Meqaad siisa qofkaan?)	One third	Sadax kameel meel	
		Half	Nus	
		Two thirds	Sadax kameel laba melood.	
		More than two thirds	In kabadan sadax kameel laba meel	
		Decline to answer	Jawaab ka bixini maayo.	
Section 4: Sexual History: Paying Clients (Taariikhda galmada: macamiisha lacagta bixisa)				
<i>Think about your most recent sexual partner who you exchanged sexual intercourse for money, a gift or favour with</i> <i>Kafikir asxaabta galmada ee ugu dambeeye kuwaas oo aad galmada ugu badalatay lacag, hadiyad ama asxaan</i>				
54	Did you use a condom the last time you had sexual intercourse with a client?	Yes	Haa	
		No	Maya	SKIP TO QN 57
	(Ma isticmaashay cinjir (Kondhom) marki ugu dambeysay oo aad macamiil galma la sameysay?)	Don't know	Ma aqaani	SKIP TO QN 58
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 58
55	What type of condom did you use?	Male condom	Cinjirka raga	
	(Cinjir (kondhom) nocee ah ayaad isticmaashay?)	Female condom	Cinjirka haweenka	
		Don't know	Ma aqaani	

		Decline to answer	Jawaab ka bixini maayo	
56	The last time you had sexual intercourse with a client, who suggested condom use that time? (Marki ugu dambesay oo aad galma la sameysid macamiil, yaa soo jeediye in la isticmaalo cinjir?)	Myself	Aniga	
		My client	Macamiilka	
		Joint Decision	Talo wada jir ah	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
57	Why didn't you and your client use a condom that time? (Maxaa adiga iyo macamiilka aad u isticmaali waydeen cinjirka markaasi?) (Multi select)	We did not have one with us	Ma aana haysanin	
		They are too expensive	Aadbay qaali uyihiin	
		Do not know where to buy one	Ma aqaani goobta laga iibsado	
		Client objected	Macamiilka ayaa diiday	
		I don't like them	Ma jecli	
		Used other contraceptive	Waxaan isticmaalay ka hortage kale	
		Didn't think it was necessary	Ma umaleynin in loo baahanyahay.	
		Condoms transmit HIV	Cinjirka ayaa gudbiya HIV-ga	
		Didn't think of it	Maku fikirin	
		Other (specify) _____	Waxyaaba kale (cadeey) _____	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
58	How frequently did you use condoms with your clients over the last 30 days (1 month)? (Qaab iskuxig nooce ah ayaad cinjir (Kondhom) u isticmaashay 30ki maalin (Bishi) ee ugu dambeeye?)	Every time	Waqti kasta	
		Almost every time	Ugu badnaan waqti kasta	
		Sometimes	Mararka qaarkood	
		Never	Waligey ma isticmaalin	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
59	On the last day you worked, how many clients did you have? (Maalinti ugu dambesay ood shaqeysay, meqa macamiil ayaad heshay?)	_____ Number of clients	_____ macamiil	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo.	
60	The last time you had sexual intercourse with a client, how much money did you receive? (Marki ugu dambesay oo aad galma la sameysay macamiil, meqa lacag ah ayaad heshay?)	Somalia shilling _____	Shillinka Somaaliya _____	
		Somaliland shilling _____	Shillinka Somaaliland _____	
		US Dollars _____	Dollarka mareykanka _____	
		Other currency and amount to be specified	Lacaga kale, qiimaha ha la cadeeya	
		Don't remember	Ma xasuusto	
		Decline to answer	Jawaab ka bixini maayo	
61	What are the typical occupations of your clients? (Maxay qabtaan dadka macamiilka kuu ah?) (Multi select)	Khat Seller	Qaad iibiye	
		Businessman	Ganacsade	
		Truck Driver	Darawal babuurta xamuulka qaada	
		Police	Boolis	
		Military	Ciidan	
		Khat client	Macamiil qaad	
		Government Worker	Shaqaaale dowlad	
		Tea client	Macamiil shah	
		Port worker	Shaqaalaha dakkadda	
		Fishermen / Seafarer	kalumeyste/ Badmaax	
		Humanitarian or Development Worker	Shaqaaale ha'yad mucaawana ama horumar	
		Unemployed	Ma shaqeeyo	
		Other (specify) _____	Waxyaabe kale (cadeey) _____	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
62	What is the most common occupation among your clients?	Khat Seller	Qaad iibiye	

	(Waamaxay shaqada ugu badan oo ay macamiishaada qabtaan?)	Businessman	Ganacsade	
		Truck Driver	Darawal babuurta xamuulka qaada	
		Police	Boolis	
		Military	Ciidan	
		Government Worker	Shaqaalaha dowlad	
		NGO Worker	Shaqaalaha ha'yad	
		Humanitarian Aid Worker	Shaqaalaha ha'yad mucaawano	
		Unemployed	Ma shaqeeyo	
		Tea client	Macamiil shah	
		Khat client	Macamiil qaad	
		Port worker	Shaqaalaha dakkadda	
		Fishermen / Seafarer	Kalumeyste/ badmaax	
		Other (specify) _____	Waxyaabe kale (cadeey) _____	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
Section 5: Sexual History: Non-Paying Clients (Tariikhda Galmada: macamiisha aan lacagta bixinin)				
<i>Think about your most recent sexual partner who you did NOT exchange sexual intercourse for money, a gift or favour with.</i>				
(Kafikir asxaabtaada galmada oo ugudambesay kuwaas oo aadan wax lacag ah, hadiyad ama asxaan aadan ugu badalanin galmada)				
63	How many times did you have sexual intercourse with this person over the last 30 days (1 month)? (Meqa jeer ayaad qofkaan la yeelatay galmo 30ki maalin (Bishi) oo ugu dambesay?)	Number of times _____	Inta jeer _____	
		Don't Know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
64	The last time you had sexual intercourse with this NON-PAYING/ TRANSACTIONAL partner, did you and your partner use a condom? (Marki ugu dambesay oo aad la galmootid saxiibkan GANACSIGA/ LACAGTA AAN BIXININ, adiga iyo saxiibka miyaad isticmasheen cinjir (kondhom)?)	Yes	Haa	
		No	Maya	SKIP TO QN 66
		Don't Know	Ma aqaani	SKIP TO QN 67
65	Who suggested condom use that time? (Yaa soo jeediyey in la isticmaalo cinjirka?)	Myself	Aniga	
		My partner	Saxiibkey	
		Joint Decision	Talo wada jir ah.	
		Don't Know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
66	Why didn't you and your partner use a condom that time? (Maxaa adiga iyo saxiibka u isticmali weyseen cinjirka markaas ayada ah?) (Multi select)	We did not have one with us	Ma aana haysanin	
		Too expensive	Waa qaali	
		Do not know where to buy one	Ma aqaani goobta laga iibsado	
		Partner objected	Macamiilka ayaa diiday	
		Don't like them	Ma jecli	
		Used other contraceptive	Waxaan isticmaalay ka hortage kale	
		Didn't think it was necessary	Ma umaleynin in loo baahanyahay.	
		Condoms transmit HIV	Cinjirka ayaa gudbiya HIV-ga	
		Didn't think of it	Maku fikirin	
		Other (specify) _____	Waxyaaba kale (cadeey) _____	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
Section 6: Male condom (Cinjirka raga)				
67	Had you ever heard of a male condom before today? (Show picture or sample of male condom) (Waliga ma maqashay cinjirka raga wixi manta ka horeye?)	Yes	Haa	
		No	Maya	SKIP TO QN 77
68	Have you and any sexual partner ever used a male condom? (Miyaad isticmasheen cinjirka ragga adiga iyo mid kamid ah lamanayashaada?)	Yes	Haa	
		No	Maya	
69		Yes	Haa	

	Do you know of any place or person where you can obtain male condoms? (Miyaad ogtahay meel ama qof aad ka heli kartid cinjirka ragga?)	No	Maya	SKIP TO QN 71
70	Which places or persons do you know where you can obtain male condoms? (Halkee ama qofkee aad ogtahay oo aad ka heli karta cinjirka ragga?) (Multi select)	Shop	Dukaanka	
		Pharmacy	Firmishiyahaa	
		Private hospital or Clinic	Isbitaal goni loo leeyahay ama kiliinik.	
		Public Hospital	Isbitaalka dad weynaha	
		MCH Centre	Xarunta MCH-ka	
		Local NGO	Hay'ad maxali ah	
		Friend	Saaxib	
		Other sex worker(s)	Kuwa kale oo ka ganacsada jirkooda.	
		Client(s)	Macamiisha	
		Other _____	Kuwa kale. _____	
71	Where would you ideally like to be able to obtain condoms? (Halkee baad aad u jeceshahay in aad ka heshid cinjirka ragga?)	Shop	Dukaan	
		Pharmacy	Firmishia	
		Private hospital or Clinic	Isbitaal goni loo leeyahay ama kiliinik.	
		Public Hospital	Isbitaalka dad weynaha	
		MCH Centre	Xarunta MCH-ka	
		Local NGO	Hay'ad maxali ah	
		Friend	Saaxib	
		Other sex worker	Kuwa kale oo ka ganacsada jirkooda.	
		Client(s)	Macamiisha	
		Other _____	Kuwa kale. _____	
		Decline to answer	Jawaab ka bixini maayo	
72	Do you usually carry condoms with you? (Miyaad badanaa qaadataa cinjirka?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab kabixin maayo	
73	In the past 3 months, have you been given condoms? (e.g. through an outreach service, hospital, VCT centre, TB centers, NGO, Pharmacy, FP clinic, MCH) (3 bilood oo ugu dambesay, miyaa lagu siiye cinjir? (tusaale ahaan goobaha lagu bixiya adeegyada dadka lala soo gaaro, isbitaalada, xarumaha VCT-ga, xarumaha TB-da, hay'adaha, farmishiyaasha, kiliinkada FP-da MCH-yada))	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab kabixin maayo	
74	In the past three months, have you received counselling on condom use and safe sex? (e.g. through an outreach service, hospital, VCT centre, TB centers, NGO, Pharmacy, FP clinic, MCH) (3 bilood oo ugu dambesay, ma heshay qof kaa la taliya isticmaalka cinjirka? (tusaale ahaan goobaha lagu bixiya adeegyada dadka lala soo gaaro, isbitaalada, xarumaha VCT-ga, xarumaha TB-da, hay'adaha, farmishiyaasha, kiliinkada FP-da MCH-yada))	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab kabixin maayo	
75	Usually with clients, who supplies the condoms? (Badanaa marki aad la joogtid macamiilka, yaa bixiya cinjirka?)	I never use a condom	waligey ma isticmaalin cinjirka	
		Myself	Aniga	
		Client	Macamiilka	
		Owner / Manager of the place	qofka iskaleh/mareeya goobta	
		Don't know	ma aqaana	
		Decline to answer	Jawaab ka bixini maayo	
76	How affordable do you find male condoms to be? (Sidee baad u aragtay in loo awoodi karo cinjirka ragga?)	Affordable	waa la awooda	
		Somewhat affordable	Waa la yara awoodi kara	
		Not affordable	lama awoodo	
		Don't know	ma aqaani	

		Decline to answer	Jawaab ka bixini maayo	
Section 7: Female condom (Cinjirka dumarka)				
77	Had you ever heard of a female condom before today? (<i>Show picture or sample of female condom</i>)	Yes	Haa	
	Wixi maanta ka horeeye, waliga ma maqashay cinjirka dumarka?	No	Maya	SKIP TO QN 81
78	Have you and any sexual partner ever used a female condom?	Yes	Haa	
	(Miyaa adiga iyo lamaanahaga galmada waligiin isticmasheen cinjirka dumarka?)	No	Maya	
79	Do you know of any place or person where you can obtain female condoms?	Yes	Haa	
	(Miyaad ogtahay meel ama qof aad ka heli kartid cinjirka dumarka?)	No	Maya	SKIP TO QN 81
80	Which places or persons do you know where you can obtain female condoms?	Shop	Dukaanka	
	(Halkee ama qofkee aad ogtahay oo aad ka heli karta cinjirka dumarka?) (<i>Multi select</i>)	Pharmacy	Firmishiyaha	
		Private hospital or Clinic	Isbitaal goni loo leeyahay ama kiliinik.	
		Public Hospital	Isbitaalka dad weynaha	
		MCH Center	Xarunta MCH-ka	
		Local NGO	Hay'ad maxali ah	
		Friend	Saaxib	
		Other sex worker(s)	Kuwa kale oo ka ganacsada jirkooda.	
		Client(s)	Macamiisha	
		Other	Kuwa kale.	
Section 8: Population size estimation (Qiyaasta tirada dadka)				
81	How many female sex workers live in this town?	[] (number of persons)	[] (cadadka dadka)	
	(Waa meeqa dumarka jirkooda ka ganacsada oo kunool magaladaan?)	Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
82	How many female sex workers aged 18 and over live in this town?	[] (number of persons)	[] (cadadka dadka)	
	(Waa meeqa dumarka jirkooda ka ganacsada ee jira 18 sano iyo wixi ka weyn oo kunool magaladaan?)	Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
83	Have you been to one of the government MCH centers, VCT centers or TB centers in the last 12 months for HIV testing?	Yes	Haa	
	(Miyaad aaday mid ka mid ah xarumaha MCH-yada dowlada, xarumaha VCT-da ama xarumaha TB-da 12ki bilood ee ugu dambesay si aad isaga baartid HIV-ga?)	No	Maya	SKIP TO QN 86
		88 Don't remember	88 Maxasuusto	SKIP TO QN 86
84	Please name the government MCH centers, VCT centers or TB centers that you most recently visited for HIV testing, in the last 12 months. (Fadlan magacaaw xarunta MCH-ga dowlada, xarunta VCT-da ama xarunta TB-da oo aad mardahw booqatay si aad isaga baartid HIV-ga)	Clinic: _____ Date: _____ Don't know Decline to answer	Kiliinika: _____ tariikhda: _____ ma aqaani Jawaab ka bixini maayo	
85	When did you last visit this clinic for HIV testing? Month and Year (Gorma ahayd marki ugu dambesay oo aad booqatid kiliinikan si aad isaga baartid HIV-ga? Bisha iyo sanadka)	____/____ Month Year Don't know Decline to answer	____/____ bisha Sanadka ma aqaani Jawaab ka bixini maayo	
Section 9: HIV testing history (Tariikhda baritaanka HIV-ga)				
86	Do you know where you can go if you wish to receive a confidential HIV test?	Yes	Haa	
	(Ma garaneysa goob aad tagi kartid hadii aad rabtid inaad heshid baritaan HIV oo kalsooni kudheehantahay?)	No	Maya	SKIP TO QN 88
		Don't Know	Ma aqaani	SKIP TO QN 88
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 88
87	Please name all places you know where one can get tested for HIV. DO NOT READ ANSWERS (Fadlan magacaw dhamaan meelaha aad garaneysid oo aad kaheli kartid baritaanka HIV-ga Ha AKHRININ JAWAABAHA)	Government hospital/clinic/health centre Private facility/clinic Mobile counselling and testing outreach Government VCT centres Government TB centres	Isbitaalka dowlada/kiliinika/xarunta caafimaad isbitalka gaarka loo leeyahay/kiliinika Goobaha la-talinta iyo goobaha bixiya baritaanada. Xarumaha VCT-da ee dowlada Xarumaha TB-da ee dowlada	

	(Multi select)	Pharmacy	Firmishiyaha	
		MCH centre	Xarumaha MCH-yada	
		An NGO (specify):	Hay'ad (cadeey):	
		Other (specify):	kuwa kale (cadeey):	
		Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
88	Do you know your HIV status from an HIV test? (Miyaad ka ogaataay xaladaada HIV-ga goob lagu baaro HIV-ga?)	No, I have never been tested	Maya, waligeys laima baarin	SKIP TO QN 93
		Yes, I have been tested	Haa, waa laibaaray.	
89	When were you last tested? (Gormaa lagu baaray marki ugu dambesay?)	Less than 6 months	Wax ka yar 6 bilood	
		6-12 months	6-12 bilood	
		More than 12 months	Wax ka badan 12 bilood	
90	What was the result of your last test? (Maxay ahayd natiijada baaritankagi ugu dambeye?)	Positive	Waan qaba	
		Negative	Ma qabi	
		Indeterminate	dhexdhexaad	
91	Did you voluntarily have the HIV test, or were you required to have the test? Miyaad iska u raadsatay baritaanka HIV-ga, ama waxay ahayd mid loo bahanay?)	Voluntary	Iskey	
		Required	Waa loo bahnaaye	
		Other (specify) _____	Waxyaaba kale (cadeey) _____	
	READ: By voluntary, I mean that you wanted to be tested for HIV AKHRI: Iskaa, waxaan kala jeeda in aad adiga iskaa baritaanka u aaday.	Decline to answer	Jawaab ka bixini maayo	
92	At any time during your most recent HIV counselling/testing, did you reveal to the health provider that you sell sex? (Marka ka mid ah baritaanadaadi/wada tashigaadi ugu dambeye, miyaad shaaca ka qaaday in aad tahay dumarka jirkooda iibsada?)	Yes	Haa	
		No	Maya	
		Decline to answer	Jawaab ka bixini maayo	
93	Why have you never sought an HIV test? (Maxaad waligaa baritaanka HIV-ga u aadi wayday?)	1. Fear of or concern about stigma by staff or neighbours.	Cabsi ama walaac khuseeya faquuqa shaqaalaha ama dariska	
		Fear of or concern about or experienced violence.	Cabsi ama walaac khuseeya ama ku aadan rabsho aan horay u arkay.	
		Fear of or concern about or experienced police harassment or arrest	Cabsi ama walaac khuseeya ama ku aadan dhibateyn boolis ama xabsi aan horay u arkay.	
		I don't know where to go for HIV test	Ma aqaani goobta aan u aadaayo baritaanka HIV-ga	
		Other (specify) _____	waxyaaba kale (cadeey) _____	
		I don't know	Ma aqaani	
		Decline to answer	jawaab ka bixini maayo	
Section 10: Stigma and discrimination (Faquuqa iyo takoorka)				
94	In the past 12 months , have you been refused health care because someone believed you sell sex to men? (12ki bilood oo ugu dambesay, miyaa la guu diiday daryeel cafimaad waayo qof ayaa aaminsanaa inaad jirkaada ragga ka iibisid?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
95	In the past 12 months , have you been refused employment because someone believed you sell sex to men? (12ki bilood oo ugu dambesay, miyaa la guu diiday Shaqo waayo qof ayaa aaminsanaa inaad jirkaada ragga ka iibisid?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
96	In the past 12 months , have you been refused to attend prayers at the mosque because someone believed you sell sex to men? (12ki bilood oo ugu dambesay, miyaa la guu diiday inaad ku tukatid masaajidka waayo qof ayaa aaminsanaa inaad jirkaada ragga ka iibisid?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
97		Yes	Haa	

	In the past 12 months , have you been refused housing because someone believed you sell sex to men? (12ki bilod oo ugu dambesay, miyaa la guu diiday guri waayo qof ayaa aaminsanaa inaad jirkaada ragga ka iibisid?)	No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
98	In the past 12 months , have you been refused police assistance because someone believed you sell sex to men? (12ki bilod oo ugu dambesay, miyaa la guu diiday tageero boolis waayo qof ayaa aaminsanaa inaad jirkaada ragga ka iibisid?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
99	In the past 12 months , have you had verbal insults directed at you because someone believed you sell sex to men? (12ki bilod oo ugu dambesay, miyaa af lagaaddo laguu geesatay waayo qof ayaa aaminsanaa inaad jirkaada ragga ka iibisid?)	Yes	Haa	
		No	Maya	SKIP TO QN 101
		Don't know	Ma aqaani	SKIP TO QN 101
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 101
100	Who was the person who last directed a verbal insult at you? DO NOT READ ANSWERS (Yawaaye qofki ugu dambeye ee af lagaaddo kuu geestay? HA AKHRININ JAWAABAHA)	Do not know the person	Ma aqaani qofkaas	
		Social acquaintance	Qof aan saxiib nahay	
		Family/relative	rerka/qaraabada	
		Police	booliska	
		Client	macamiilka	
		Other sex worker	kuwa kale ee jirkooda ka ganacsada	
		Pimp	Mas'uulka goobta ganacsi	
		Non-paying partner or boyfriend	lamaanaha aan lacagta bixin/saxiibkey	
		Other (specify)	qof kale (cadeey	
		Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
Section 11: Physical and Sexual violence (Jirka Dilka iyo Dhibateynta Galmada)				
101	In the past 12 months , have you been hit, kicked, or beaten because someone believed you sell sex to men? (12ki bilood ee ugu dambeesay miyaa wax laguu dhuftay, lagu laaday, ama lagu dilay waayo qof ayaa aaminsanaaye in aad ka iibisid ragga jirkaada?)	Yes	Haa	
		No	Maya	SKIP TO QN 103
		Don't know	Ma aqaani	SKIP TO QN 103
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 103
102	Who was the person who last hit, kicked, or beat you? DO NOT READ ANSWERS (Yawaaye qofki ugu dambeeye oo wax kugu dhufto, ku laado ama ku dilo? HA AKHRININ JAWAABAHA)	Do not know the person	Ma aqaani qofkaas	
		Social acquaintance	Qof aan saxiib nahay	
		Family/relative	rerka/qaraabada	
		Police	booliska	
		Client	macamiil	
		Other sex worker	kuwa kale ee jirkooda ka ganacsada	
		Pimp	Mas'uulka goobta ganacsi	
		Non-paying partner or boyfriend	lamaanaha aan lacagta bixin/saxiibkey	
		Other (specify)	qof kale (cadeey	
		Don't know	ma aqaani	
		Decline to answer	jawaab ka bixini maayo	
103	In the past 12 months , has any client or partner physically forced you to have sexual intercourse against your will? (12ki bilood oo ugu dambeesay miyaa macamiil ama lamaana kugu qasbay inaad la sameysid galmo adiga oo aan raali ka ahayn?)	Yes	Haa	
		No	Maya	SKIP TO QN 108
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 108
104	Who was the client or partner who physically forced you to have sexual intercourse against your will? DO NOT READ ANSWERS (Yawaaye macamiilka ama laamaanaha kugu qasbay inaad la sameysid galmada adiga oo aan raali ka ahayn? HA AKHRININ JAWAABAHA)	Do not know the person	Ma aqaani qofkaas	
		Social acquaintance	Qof aan saxiib nahay	
		Family/relative	rerka/qaraabada	
		Police	booliska	
		Client	macamiil	
		Other sex worker	kuwa kale ee jirkooda ka ganacsada	
		Pimp	Mas'uulka goobta ganacsi	

		Non-paying partner or boyfriend	lamaanaha aan lacagta bixin/saxiibkey	
		Other (specify)	qof kale (cadeey	
		Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
105	Did you seek medical treatment after this happened? (Miyaad raadsatay daweeyn kadib marki ay tani dhacday?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
106	Did you report this incident to the police? (Dhacdadaan ma war galisay booliska?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
107	Why did you not report this incident to the police? (Maxaad dhacdadaan booliska u war galin wayday?)			
108	In the past 12 months, has any client or partner slapped you or threw something that could hurt you (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane ku dharbaaxay ama kugu soo tuuray wax ku dhaawici karo)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
109	In the past 12 months, has any client or partner pushed or shoved you (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane ku riixay ama ku kala tuuray?)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
110	In the past 12 months, has any client or partner hit you with a fist or something else that could hurt you (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane ku dhufatay feer ama wax kale oo ku dhaawici karo?)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
111	In the past 12 months, has any client or partner kicked, dragged or beat you up (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane ku laaday, dhulka kugu jiiday ama kugaraacay?)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
112	In the past 12 months, has any client or partner choked or burned you (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane ku ceejiye ama kugubay?)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
113	In the past 12 months, has any client or partner threatened or used a gun, knife or other weapon against you (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane kuu cagajugleye, ama kuu adeegsaday qori ama toori?)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
114	In the past 12 months, has any client or partner forced you to do something sexual you found degrading or humiliating (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane kugu qasbay inaad sameysid waxyaabo galmo oo hoos kuu dhigaayo ama kuliidaayo?)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
115	In the past 12 months, has any client or partner made you afraid of what would happen if you did not have sexual intercourse (12ki bilood ee ugu dambeesay, miyuu macamiil ama lamaane kugu cabsi galiye waxa dhici doono hadii aad la galmooni weydid?)	Yes	Haa	
		No	Maya	
		Decline to answer	jawaab ka bixini mayo	
	Section 12: Programme coverage (Gunaanadka Barnaamijka)			
116	Are you aware of any Local NGO here that deliver non-medical assistance or advice to FSW women? (Ma ogtahay hay'ad maxali ah oo bixisa tageero aan daawo ahayn ama talooyin siisa haweenka dhibateysan?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
117		Yes	Haa	

	(During the last 12 months , have you attended any meetings to discuss STI or HIV/AIDS? 12ki bilood oo ugu dambeesay, ma ka qayb gashay shir looga hadlaayo cudurada lagu kala qaada galmada ama HIV/AIDS-ka?)	No Don't know Decline to answer	Maya Ma aqaani Jawaab ka bixini mayo	SKIP TO QN 119
118	Which organization(s) sponsored this meeting? RECORD ALL MENTIONED Which organization(s) sponsored this meeting? (Hay'adee (hey'adahee) maal galisay shirkaan? DIWAANGALI DHAMAAN WIXI LASHEEGO)	 Don't know Decline to answer	 Ma aqaani Jawaab ka bixini mayo	
119	In the last 12 months , did you receive any of these items/services from an outreach worker? READ ANSWERS (12ki bilood ee ugu dambeesay, miyaad ka heshay alabtaan/adeegaan shaqaalaha gargaarka?) AKHRI JAWAABAH (Multi select)	Condoms Referral to STI screening and treatment Referral to HIV counselling and testing Pamphlets containing general information on STI/HIV/AIDS prevention or treatment Lubricants None Other (specify): Don't know Decline to answer	Cinirro In laguu gudbiyo goob lagu baaro oona lagu daweeyo cuduradda laga kala qaado galmada In laguu gudbiyo goob lagaala taliyo ama lagu daweeyo HIV-ga Qoraalo kashekeeyo maclumaadka guud ee kahor tagga iyo daweeynta STI/HIV/AIDS-ka Bomaatooyin waxna waxyaaba kale (cadeey): ma aqaani Jawaab ka bixini mayo	SKIP TO QN 121 SKIP TO QN 121 SKIP TO QN 121 SKIP TO QN 122 SKIP TO QN 122 SKIP TO QN 122
120	Did you go to the referred site to receive medical care? (Miyaad aaday goobta laguu gudbiye si aad uheshid daryeel cafimaad?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini mayo	
121	Which organization gave these items? RECORD ALL MENTIONED (Hay'adee bixisay alabaatan? DIWANGALI DHAMAAN WIXI LA SHEEGAY)	 Don't know Decline to answer	 Ma aqaani Jawaab ka bixini mayo	
	Section 13: Alcohol and drug use in the past three months (Khamriga iyo isticmaal daroogada)			
122	During the past 3 months , how often have you had a drink containing alcohol? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad u cabtay sharaab khamri kujuro? HA AKHRININ JAWAABAH)	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week Don't know Decline to answer	Waligey macabin. Bil waliba ama ka yar 2-4 jeer bishiba 2-3 jeer usbuuciba 4 jeer ama kabadan usbuuciba Ma aqaani Jawaab ka bixini maayo	
123	During the past 3 months , how often have you chewed khat? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad cuntay khat? HA AKHRININ JAWAABAH)	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week Don't know Decline to answer	Waligey macabin. Bil waliba ama ka yar 2-4 jeer bishiba 2-3 jeer usbuuciba 4 jeer ama kabadan usbuuciba Ma aqaani Jawaab ka bixini maayo	
124	During the past 3 months , how often have you smoked marijuana or hashish? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad darooga/xashiish dhuuqday? HA AKHRININ JAWAABAH)	Never Monthly or less 2-4 times a month 2-3 times a week 4 or more times a week Don't know Decline to answer	Waligey macabin. Bil waliba ama ka yar 2-4 jeer bishiba 2-3 jeer usbuuciba 4 jeer ama kabadan usbuuciba Ma aqaani Jawaab ka bixini maayo	
125		Never	Waligey macabin.	

	During the past 3 months , how often have you smoked cigarette? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad sigaar dhuuqday? HA AKHRININ JAWAABAHA)	Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
126	During the past 3 months , how often have you smoked Shisha? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad shiishad dhuuqday? HA AKHRININ JAWAABAHA)	Never	Waligey macabin.	
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
127	During the past 3 months , have you had sex with a client after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette? (3di bilood ee ugu dambeesay, miyaad la galmootay macamiil kadib marki cabtay sharaab khamri uu kujuro, qaad cuntay, dhuuqday darooga/xashiish ama sigaar?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
128	Some people have tried injecting drugs using a syringe or needle. In the past 3 months, have you injected drugs? DO NOT READ ANSWERS (Dadka qaarkood waxay isku dayeen inay isku duraan darooga iyaga oo isticmalaayo cirbad, 3di bilood ee ugu dambeesay miyaad iskudurtay darooga? HA AKHRININ JAWAABAHA)	Never	Waligey macabin.	END
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	END
		Decline to answer	Jawaab ka bixini maayo	END
129	What drug do you normally inject? (Darooga nocee ah ayaad sida caadada ah isku durtaa?) (Multi select)	Heroin	Heroin	
		Cocaine	Kokaine	
		Speedball (heroin plus cocaine)	Speedball (heroin iyo kokaine oo iskujur ah)	
		Methamphetamine	Methamphetamine-da	
		Other (specify):	Kuwa kale (Cadeey):	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
130	The last time you injected drugs, did you use a sterile needle and syringe? (Marki ugu dambeesay oo aad is durtay, ma isticmaashaycirbad la nadiifiye?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
131	In the last 3months, have you shared a syringe or needle with anyone else when injecting drugs? (3di bilood ee ugudambeesay, miyaad la wadaagtay cirbad qof kale marki aad isku dureeysay darooga?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
132	Have you received new, clean needles or syringes in the past three months? (Miyaad heshay cirbada cusuban ama nadiif ah 3di bilood ee ugudambeesay?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	

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Section 1: Demographics (Degaanka)			Skip Logic
	Name of interviewer Magaca wareystaha		Interviewer name, GPS coordinates, date and time of the interview was recorded by the phone automatically.
	Interview location (GPS coordinates) Goobta wareysiga (tix raaca GPS-ka)		
	Date of interview Taariikhda wareysiga	dd/mm/yyyy Maalinta/Bisha/Sanadka	
	Interview start time Waqtiga uu wareydiga bilaawday.		
	Interview end time Waqtiga uu wareysiga dhamaaday		
	Enter participant code (See checklist)		
1	Select the survey site (Doora goobta sahanka)	Hargeisa Hargeisa Mogadishu Mogadishu Bossaso Bossaso	
2	Select key population category (Doora nooca dadka)	Trucker Babuurey Port worker Shaqaalaha dakkadda Military officer Sarkaal Ciidan ah. Police Officer Sarkaal boolis ah.	
3	How old are you (completed years) (Meqa sano ayaad jirta? (sanaddada aad dhameysatay)	____ Years ____ Sano	
4	What is your highest level of education? (Heerka u sareeya tacliin ee aad gaadhay?)	Primary Dugsi Hoose Secondary Dugsi Sare University/College Jaamacad/Kuliyad None Midna	
5	What is your nationality (Multi select)	 Somalia Somaaliya Djibouti Djibouti Ethiopia Ethiopia Other (specify) _____ Meel kale (cadeey) _____	
6	Where were you born? (Halkeed ku dhalatay?)	Puntland Puntland Somaliland Somaliland South Central Somalia Konfurta Somaaliya Djibouti Djibouti Ethiopia Ethiopia Other (specify) _____ Meel kale (cadeey) _____	
7 a	How long have you lived in this town? (Mudda intee la eg ayaad magaaladaan ku noleed?)	Less than 7 days Wax ka yar 7 maalin 7 days - 1 month 7 maalin – Hal bil 2 - 3 months 2 - 3 bilood 4 -6 months 4 -6 bilood 7-11 months 7-11 bilood 1-2 years 1-2 sano More than 2 years Wax ka badan 2 sano	
7 b	After how long do you visit your family? (Mudda intee kadib ayaad rerkaaga booqataa?)	Daily aalin waliba Once in a week Usbuuciba hal mar More than once in a week In kabadan hal jeer usbuuciba Twice in a month Bishiba laba jeer Once in a month Bishiba hal jeer 2 – 3 months 2 – 3 bishiba	

More than 3 months

In kabadan 3 jeer bishiba

	(Side ayuu qofka ku ogaanaya in uu ku dhacay cudurada lagu kala qaado galmada?) HA AKHRININ JAWAABAH (Multi select)	Anal discharge Burning pain on urination Genital or anal sores/ulcers Genital warts Pain on ejaculation Painful genital blisters Would not have any symptoms Other (specify): Don't know Decline to answer	Dhecaan ka yimaada xaartada kaadi olol Kaadi mareenka/xaarta oo bararta Kadi mareenka oo cuncunta Kaadi dhiig misaanka oo qofka ka yaraada Wax calaamad ah ma qabaaya Waxyaaba kale(Cadey): Ma aqaani Jawaab ka bixini maayo	
16	Have you been tested for sexually transmitted infections in the past three months ? (Ma lagaa baaray cudurada lagu kala qaado galmada sadaxdi bilood ee la soo dhaafay?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	
17	In the last 12 months , has a doctor or a medical professional told you that you had a sexually transmitted infection? (12ki bilood ee la soo dhaafay, dhaqtar ama qof leh xirfad caafimaad ma kuu sheegay in aad qabtid cudur lagu kala qaaday galmada?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	
18	Sometimes men experience an abnormal discharge from their penis. In the last 12 months , have you had an abnormal discharge from your penis? (Mararka qaar ragga dhacaan ka yimaadaa kaadi mareenka, 12ki bilood ee ugu dambaysay wax dhacaan ah makaa yimadeen kaadi mareenka?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	SKIP TO QN 23 SKIP TO QN 23 SKIP TO QN 23
19	When did you last have abnormal discharge from your penis? (Gormaa ugu dambesay in uu dhacaan kaa yimaado kaadi mareenka?)	[]/[] (month/year)	[] / [] (Bisha/Sanadka)	
20	Did you seek treatment for this penile discharge? (Wax daweyn ah maraadsatay marki uu dhacankaan kaa yimaaday?)	Yes No 8 Don't know 9 Decline to answer	Haa Maya 8 Ma aqaani 9 Jawaab ka bixini maayo	SKIP TO QN 22
21	Why did you NOT seek treatment? DO NOT READ ANSWERS (Maxaad daweyn u doonani weyday ? HA AQRININ JAWAABAH) (Multi select)	Didn't know where to go for treatment Embarrassed or afraid to seek treatment Could not afford treatment Unable to get transportation Didn't think I needed it Other (specify): Don't know Decline to answer	Ma aqaanin goobta aan daweynta u aadi laha Waan ka xishooday ama ka cabsaday in aan daawo doonto Waan awoodi waaye waxaan awoodi waaye baabur raaca Ma u maleynin in aan ubaahanahay Waxyaaba kale (Cadeey): Ma aqaani Jawaab ka bixini maayo	
22	What treatment(s) did you receive? READ ANSWERS (Daawo (yin) nooce ah ayaad heshay? AQRI JAWAABAH) (Multi select)	Injections Tablets Cream Other (specify): Don't know Decline to answer	cirbada kaniini Bomaato Mid kale(cadeey): Ma aqaani Jawaab ka bixini maayo	
23	Sometimes men have a sore or ulcer on or near their penis or anus. In the last 12 months , have you had a sore or ulcer on or near your penis or anus?	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	SKIP TO QN 28 SKIP TO QN 28 SKIP TO QN 28

	(Mararka qaar waxaa barara ama alaso uga soo baxda kaadi mareynka ama aga gaarkiisa ama xaartada. 12ki bilood ee ugu dambesay maku bararay ama aalso makaaga soo baxday kaadi mareynka ama aga garkiisa ama xaartada?)		
24	When did you last have a sore or ulcer on or near your penis or anus? (Gormaay ahayd marki ugu dambesay oo kaadi mareynka ku bararay ama aalso kaaga soo baxday ama aga gaarkiisa ama xaartada?)	[]/[]/[]/[] (month /year) Don't know Decline to answer	[]/[]/[]/[] (bisha /sanadka) ma aqaani Jawaab ka bixini maayo
25	Did you seek treatment for this sore or ulcer on or near your penis or anus? (Wax daawo ah ma raadsatay bararka ama aalsada kaaga soo baxday kaadi mareynka ama aga garkiisa ama xaartada?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo
26	Why did you NOT seek treatment? DO NOT READ ANSWERS (Maxaad daweeyn u doonani weyday? Ha aqrinin jawaabaha) (Multi select)	Didn't know where to go for treatment Embarrassed or afraid to seek treatment Could not afford treatment Unable to get transportation Didn't think I needed it Other (specify): Don't know Decline to answer	Ma aqaanin goobta aan daweeynta u aadi laha Waan ka xishooday ama ka cabsaday in aan daawo doonto Waan awoodi waaye waxaan awoodi waaye baabur raaca Ma u maleynin in aan ubaahanahay Waxyaaba kale (Cadeey): Ma aqaani Jawaab ka bixini maayo
27	What treatment(s) did you receive? READ ANSWERS (Daawo (yin) nooce ah ayaad heshay? Aqri jawaabaha) (Multi select)	Injectons Tablets Cream Other (specify): Don't know Decline to answer	cirbada kaniini Bomaato Mid kale(cadeey): Ma aqaani Jawaab ka bixini maayo
28	Can the risk of HIV transmission be reduced by having sex with only one uninfected partner who has no other partners? (Halista qaadista HIV-ga mala yareyni kara hadii lala galmoodo hal qof oo aan lahayn cudurka oo aana qabin saxiiba kale?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo
29	Can people reduce their chance of getting HIV and STI by using a condom every time they have sex? (Dadka ma yareen karaan qaditaanka HIV-ga iyo cudurada kale ee la ga qaado galmada hadii ay isticmalaan cinjirka (kondomka) marwaliba oo ay sameyaan galmada?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo
30	Is it possible for a healthy-looking person to have HIV/AIDS? (Ma suura galba qof u'eg wax caafimaad leh in uu HIV/AIDS uu qabo?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo
31	Can people get HIV from mosquito bites? Dadka HIV-ga ma qaadi karaan qaniinja kaneeco?	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo
32	Can people get HIV by sharing food with a person who has HIV/AIDS? (Dadka HIV-ga maku dhici kara hadii cunno la cunaan qof leh cudurka HIV/AIDS-ka?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo
33		Yes	Haa

	Have you heard about special antiretroviral drugs that people infected with HIV/AIDS can get from a doctor or nurse to help them live longer? (Ma maqashay inay jirto daawo ka hortaga fayruuska oo ay ka qaadani karan dhaqtarka ama kalkaaliyayaasha dadka qaba cudurka HIV/AIDS-ka oo ku caawineyso inay mudda dheer noladaan?)	No Don't know	Maya Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
34	Can HIV be transmitted from mother to her baby during pregnancy? (Cudurka HIV-ga ma ku daarani kartaa canugeeda hooyada uurka leh?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	
35	Can HIV be transmitted from mother to her baby during delivery? (Cudurka HIV-ga ma ku daarani kartaa canugeeda marki ay hooyada dhaleyso?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	
36	Can HIV be transmitted from mother to her baby by breastfeeding? (Cudurka HIV-ga ma ku daarani kartaa canugeeda hooyada marki ay nuujineyso?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	
37	Are there any special drugs that a doctor or nurse can give to a woman infected with HIV to reduce the risk of HIV or Syphilis transmission to the baby? (Majirtaa daawo gaar ah oo uu dhaqtarka ama kalkaaliyada ay siiso dumarka qabo cudurka HIV-ga si loo yareeyo halista uu canuga ugu dhaco HIV-ga?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini maayo	
Section 3: Sexual History (Tariikhda Galmada)				
38	Have you ever had vaginal sex with a woman? (Waliga galma toos ah ma la sameeysay haweeney?)	Yes No Decline to answer	Haa Maya Jawaab ka bixini maayo	
39	At what age did you first have vaginal sex? (Meeqa sano ayaad jirtay marki aag sameeysay galma toos ah?)	_____ Years	_____ Sano	
40	Have you ever had anal sex with a woman? (Waliga haweeney gadaal ma uga tagtay?)	Yes No Decline to answer	Haa Maya Jawaab ka bixini maayo	
41	Have you ever given a woman money, a gift (like Khat) or favour in exchange of sexual intercourse? (Waligaa haweeney ma siisay lacag, hadiyad (sida qaad) ama asxaan ma usameysay adiga oo ugu badalanaayo galma?)	Yes No Decline to answer	Haa Maya Jawaab ka bixini maayo	SKIP SECTION 4; GO TO QN 52; SKIP QN 81 SKIP SECTION 4; GO TO QN 52; SKIP QN 81
42	How many different sexual partners in total did you have sexual intercourse with in the past one month? (Meqa qof oo kala duwan ayaad la galmootay Halki bil ee ugu dambesay?)			
43	Where do your group members meet most of their NEW transactional sex clients? (Halkee gruubkaaga kula kulamaan macamishaada ugu badan ee CUSUB ee galmada?)	Beach They call me At my home At client's home Tea Shop Khat shop Hotel/restaurant	Xeebta Way isoo wacaan Gurigeyga Guriga macamiilka Dukaanka shaha Dukaanka qaadka Hodheel/maqaayad	

		Town streets/highway	Shawaariicda magaalada/Wadada	
		Through pimps/Dalals	Asxaabta ayaa keento/dalaal	
		Other (Specify)	Siyaaba kale (cadeey)	
44	Where do your group members most often engage in transactional sex? (Halkeed badanaa ku sameysaan ganacsiga galmada?)	At my home I share with my family	Gurigeyga, waxaan la wadaaga rerkeyga	
		At my home I share with other women exchanging sex	Gurigeyga waxaan la wadaaga haween kale oo ka ganacsada galmada.	
		The client's house	Guriga macamiilka	
		Car/Vehicle	Gaari/babuur	
		Tea Shop	Dukaanka shaha	
		Khat Shop	Dukaanka qaadka	
		Hotel/restaurant	Hodheel/maqaayad	
		Other (specify) _____	Meela kale (cadeey) _____	
		Decline to answer	Jawaab ka bixini maayo	
Section 4: Sexual History: Paying Clients (Taariikhda galmada: macamiisha lacagta bixisa)				
<i>Think about your most recent sexual partner who you exchanged sexual intercourse for money, a gift or favour with</i> <i>Kafikir asxaabta galmada ee ugu dambeeye kuwaas oo aad galmada ugu badalatay lacag, hadiyad ama asxaan</i>				
45	Did you use a condom the last time you had sexual intercourse with a client? (Ma isticmaashay cinjir (Kondhom) marki ugu dambeysay oo aad macamiil galma la sameysay?)	Yes	Haa	
		No	Maya	SKIP TO QN 48
		Don't know	Ma aqaani	SKIP TO QN 49
		Decline to answer	Jawaab ka bixini maayo	SKIP TO QN 49
46	What type of condom did you use? [Cinjir (kondhom) nocee ah ayaad isticmaashay?]	Male condom	Cinjirka raga	
		Female condom	Cinjirka haweenka	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
47	The last time you had sexual intercourse with a client, who suggested condom use that time? (Marki ugu dambeysay oo aad galma la sameysid macamiil, yaa soo jeediye in la isticmaalo cinjir?)	Myself	Aniga	
		My client	Macamiilka	
		Joint Decision	Talo wada jir ah	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
48	Why didn't you and your client use a condom that time? (Maxaa adiga iyo macamiilka aad u isticmaali waydeen cinjirka markaasi?) (Multi select)	We did not have one with us	Ma aana haysanin	
		They are too expensive	Aadbay qaali uyihiin	
		Do not know where to buy one	Ma aqaani goobta laga iibsado	
		Woman objected	Macamiilka ayaa diiday	
		I don't like them	Ma jecli	
		Didn't think it was necessary	Ma umaleynin in loo baahanyahay.	
		Condoms transmit HIV	Cinjirka ayaa gudbiya HIV-ga	
		Didn't think of it	Maku fikirin	
		Other (specify) _____	Waxyaaba kale (cadeey) _____	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
49	How frequently did you use condoms with your clients over the last 30 days (1 month)? (Qaab iskuxig nooce ah ayaad cinjir (Kondhom) u isticmaashay 30ki maalin (Bishi) oo ugu dambeysay?)	Every time	Waqti kasta	
		Almost every time	Ugu badnaan waqti kasta	
		Sometimes	Mararka qaar	
		Never	Waligey ma isticmaalin	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
50	On the last day you had sex with a female sex worker, how many women did you have sex with? (Maalinti ugu dambeysay ood la galmootay haweney jirkeeda ka ganacsata, meqa dumar ah ayaad la galmootay?)	_____ Number of clients	macamiil	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo.	

51	The last time you had sexual intercourse with a woman, how much money did you pay? (Marki ugu dambesay oo aad galma la sameysay macamiil, meqa lacag ah ayaad bixisay?)	Somalia shilling _____ Somaliland shilling _____ US Dollars _____ Other currency and amount to be specified _____ Don't remember _____ Decline to answer _____	Shillin Somaali _____ Shillin Somaaliland _____ Dollarka mareykanka _____ Lacaga kale, qiimaha ha la cadeeya _____ Ma xasuusto _____ Jawaab ka bixini maayo _____	
Section 5: Sexual History: Non-transactional (Tariikhda Galmada: Midda lacag la'aanta ah)				
<i>Think about your most recent sexual partner who you did NOT exchange sexual intercourse for money, a gift or favour with.</i>				
Kafikir asxaabtaada galmada ee ugudambesay kuwaas oo aadan wax lacag ah, hadiyad ama asxaan aadan ugu badalanin galmada				
52	How many times did you have sexual intercourse with this person over the last 30 days (1 month)? (Meqa jeer ayaad qofkaan la yeelatay galmo 30ki maalin (Bishi) oo ugu dambesay?)	Number of times _____ Don't Know _____ Decline to answer _____	Inta jeer _____ Ma aqaani _____ Jawaab ka bixini maayo _____	
53	The last time you had sexual intercourse with this NON-PAYING/ TRANSACTIONAL partner, did you and your partner use a condom? (Marki ugu dambesay oo aad la galmootid saxiibtan GANACSIGA LACAGAN LA'AANTA AH, adiga iyo saxiibtaa miyaad isticmasheen cinjir (kondhom)?)	Yes _____ No _____ Don't Know _____	Haa _____ Maya _____ Ma aqaani _____	SKIP TO QN 55 SKIP TO QN 56
54	Who suggested condom use that time? (Yaa soo jeediye in la isticmaalo cinjirka?)	Myself _____ My partner _____ Joint Decision _____ Don't Know _____ Decline to answer _____	Aniga _____ Saxiibtey _____ Talo wada jir ah. _____ Ma aqaani _____ Jawaab ka bixini maayo _____	
55	Why didn't you and your partner use a condom that time? (Maxaa adiga iyo saxiibtaa u isticmali weyseen cinjirka markaas ayada ah?) (Multi select)	We did not have one with us _____ Too expensive _____ Do not know where to buy one _____ Partner objected _____ Don't like them _____ Used other contraceptive _____ Didn't think it was necessary _____ Condoms transmit HIV _____ Didn't think of it _____ Other (specify) _____ Don't know _____ Decline to answer _____	Ma aana haysanin _____ Waa qaali _____ Ma aqaani goobta laga iibsado _____ Macamiilka ayaa diiday _____ Ma jecli _____ Waxaan isticmaalay ka hortage kale _____ Ma umaleynin in loo baahanyahay. _____ Cinjirka ayaa gudbiya HIV-ga _____ Maku fikirin _____ Waxyaaba kale (cadeey) _____ Ma aqaani _____ Jawaab ka bixini maayo _____	
Section 6: Male condom (Cinjirka Ragga)				
56	Had you ever heard of a male condom before today? (Show picture or sample of male condom) (Waliga ma maqashay cinjirka raga wixi manta ka horeye?)	Yes _____ No _____	Haa _____ Maya _____	SKIP TO QN 66
57	Have you and any sexual partner ever used a male condom? (Miyaad isticmasheen cinjirka ragga adiga iyo mid kamid ah lamanayashaada?)	Yes _____ No _____	Haa _____ Maya _____	
58	Do you know of any place or person where you can obtain male condoms? (Miyaad ogtahay meel ama qof aad ka heli kartid cinjirka ragga?)	Yes _____ No _____	Haa _____ Maya _____	SKIP TO QN 60
59	Which places or persons do you know where you can obtain male condoms?	Shop _____ Pharmacy _____ Private hospital or Clinic _____	Dukaan _____ Firmishia _____ Isbitaal goni loo leeyahay ama kiliinik. _____	

	(Halkee ama qofkee aad ogtahay oo aad ka heli karta cinjirka ragga?) (Multi select)	Public Hospital	Isbitaalka dad weynaha	
		MCH Centre	Xarunta MCH-ka	
		Local NGO	Hay'ad maxali ah	
		Friend	Saaxib	
		Other sex worker(s)	Other sex worker(s) kuwa kale oo ka ganacsada jirkooda.	
		Client(s)	Macamiisha	
		Other	Kuwa kale.	
60	Where would you ideally like to be able to obtain male condoms?	Shop	Dukaan	
	(Halkee baad aad u jeceshahay in aad ka heshid cinjirka ragga?) (Multi select)	Pharmacy	Firmishia	
		Private hospital or Clinic	Isbitaal goni loo leeyahay ama kiliinik.	
		Public Hospital	Isbitaalka dad weynaha	
		MCH Centre	Xarunta MCH-ka	
		Local NGO		

		Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
Section 7: Female condom (Cinjirka Hawenka)				
66	Had you ever heard of a female condom before today? (<i>Show picture or sample of female condom</i>) (Wixi maanta ka horeeye, waliga ma maqashay cinjirka dumarka?)	Yes	Haa	SKIP TO QN 70
		No	Maya	
67	Have you and any sexual partner ever used a female condom? (Miyaa adiga iyo lamaanahaga galmada waligiin isticmasheen cinjirka dumarka?)	Yes	Haa	
		No	Maya	
68	Do you know of any place or person where you can obtain female condoms? (Miyaaad ogtahay meel ama qof aad ka heli kartid cinjirka dumarka?)	Yes	Haa	SKIP TO QN 70
		No	Maya	
69	Which places or persons do you know where you can obtain female condoms? (Halkee ama qofkee aad ogtahay oo aad ka heli karta cinjirka dumarka?) (Multi select)	Shop	Dukaan	
		Pharmacy	Firmishia	
		Private hospital or Clinic	Isbitaal goni loo leeyahay ama kiliinik.	
		Public Hospital	Isbitaalka dad weynaha	
		MCH Center	Xarunta MCH-ka	
		Local NGO	Hay'ad maxali ah	
		Friend	Saaxib	
		Other sex worker(s)	Kuwa kale oo ka ganacsada jirkooda.	
		Client(s)	Macamiisha	
		Other _____	Kuwa kale. _____	
Section 8: Population size estimation (Qiyaasta tirada dadka)				
70	How many members of your group do you know who engage in sex with female sex workers in this town? (Meeqa xubno oo ka tirsan gruubkaaga oo aad garanaysa in ay la sexdaan dumarka jirkooda ka ganacsada eek u nool magaaladaan?)	[] (number of persons)	[] (Cadadka dadka)	
		Don't know	Ma aqaani	SKIP TO QN 72
		Decline to answer	Jawaab ka bixini mayo	SKIP TO QN 72
71	How many of such men do you think are aged age 18 and over live in this town? (Meeqa ka tirsan raggaas oo da'dooda jirtaa 18 iyo wixi ka weyn?)	[] (number of persons)	[] (Cadadka dadka)	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
72	Have you been to one of the government MCH centers, VCT centers or TB centers in the last 12 months for HIV testing? (Miyaaad aaday mid ka mid ah xarumaha MCH-yada dowlada, xarumaha VCT-da ama xarumaha TB-da 12ki bilood ee ugu dambesay si aad isaga baartid HIV-ga?)	Yes	Haa	
		No	Maya	SKIP TO QN 75
		88 Don't remember	88 Maxasuusto	SKIP TO QN 75
73	Please name the government MCH centers, VCT centers or TB centers that you most recently visited for HIV testing, in the last 12 months. (Fadlan magacaaw xarunta MCH-ga dowlada, xarunta VCT-da ama xarunta TB-da oo aad mardahw booqatay si aad isaga baartid HIV-ga.)	Clinic: _____ Date : _____ Don't know Decline to answer	Kiliinika: _____ tariikhda : _____ ma aqaani Jawaab ka bixini maayo	
74	When did you last visit this clinic for HIV testing? Month and Year (Gorma ahayd marki ugu dambesay oo aad booqatid kiliinikan si aad isaga baartid HIV-ga? Bisha iyo sanadka)	____/____ Month Year Don't know Decline to answer	____/____ bisha Sanadka ma aqaani Jawaab ka bixini maayo	
Section 9: HIV testing history (Tariikhda baritaanka HIV-ga)				
75	Do you know where you can go if you wish to receive a confidential HIV test?	Yes	Haa	
		No	Maya	SKIP TO QN 77
		Don't Know	Ma aqaani	SKIP TO QN 77

	(Ma garaneysa goob aad tagi kartid hadii aad rabtid inaad heshid baritaan HIV oo kalsooni kudheehantahay?)			SKIP TO QN 77
76	Please name all places you know where one can get tested for HIV. DO NOT READ ANSWERS (Fadlan magacaw dhamaan meelaha aad garaneysid oo aad kaheli kartid baritaanka HIV-ga Ha AKHRININ JAWAABAHA) (Multi select)	Decline to answer	Jawaab ka bixini maayo	
		Government hospital/clinic/health centre	Isbitaalka/kiliinika/xarunta caafimaad ee ay dowlada leedahay	
		Private facility/clinic	isbitalka gaarka loo leeyahay/kiliinika	
		Mobile counselling and testing outreach	Goobaha la-talinta iyo goobaha bixiya baritaanada.	
		Government VCT centres	Xarumaha VCT-da ee dowlada	
		Government TB centres	Xarumaha TB-da ee dowlada	
		Pharmacy	Firmishiyaha	
		MCH centre	Xarumaha MCH-yada	
		An NGO (specify):	Hay'ad (cadeey):	
		Other (specify):	kuwa kale (cadeey):	
		Don't know	ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
77	Do you know your HIV status from an HIV test? (Miyaad ka ogaataay xaladaada HIV-ga goob lagu baaro HIV-ga?)	No, I have never been tested	Maya, waligey laima baarin	SKIP TO QN 82
		Yes, I have been tested	Haa, waa laibaaray.	
78	When were you last tested? (Gormaa lagu baaray marki ugu dambesay?)	Less than 6 months	Wax ka yar 6 bilood	
		6-12 months	6-12 bilood	
		More than 12 months	Wax ka badan 12 bilood	
79	What was the result of your last test? (Maxay ahayd natiijada baaritankagi ugu dambeye?)	Positive	Waan qaba	
		Negative	Ma qabi	
		Indeterminate	Dhexdhaxaad	
80	Did you voluntarily have the HIV test, or were you required to have the test? READ: By voluntary, I mean that you wanted to be tested for HIV (Miyaad iska u raadsatay baritaanka HIV-ga, ama waxay ahayd mid loo bahanay? AKHRI: Iskaa, waxaan kala jeeda in aad adiga iskaa baritaanka u aaday.)	Voluntary	Iskey	
		Required	Waa loo bahnaaye	
		Other (specify) _____	Waxyaaba kale (cadeey) _____	
		Decline to answer	Jawaab ka bixini maayo	
81	At any time during your most recent HIV counselling/testing, did you reveal to the health provider that you are engaged in transactional sex? (Marka ka mid ah baritaanadaadi/wada tashigaadi ugu dambeye, miyaad shaaca ka qaaday in aad ku howlantahay ganacsiga galmada?)	Yes	Haa	
		No	Maya	
		Decline to answer	Maya	
82	Why have you never sought an HIV test? (Maxaad waligaa baritaanka HIV-ga u aadi wayday?)	Fear of or concern about stigma by staff or neighbours.	Cabsi ama walaac khuseeya faquuqa shaqaalaha ama dariska	
		Fear of or concern about or experienced violence.	Cabsi ama walaac khuseeya ama ku aadan rabsho aan horay u arkay.	
		I don't know where to go for HIV test	Ma aqaani goobta aan u aadaayo baritaanka HIV-ga	
		Fear of or concern about or experienced police harassment or arrest	Cabsi ama walaac khuseeya ama ku aadan dhibateyn boolis ama xabsi aan horay u arkay.	
		I don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	

Section 10: Stigma and discrimination (Faquuqa iyo Takoorka)			
83	In the past 12 months , have you been refused health care because someone believed you are engaged in transactional sex? (12ki billod oo ugu dambesay, miyaa la guu diiday daryeel cafimaad waayo qof ayaa aaminsanaa inaad ku howlantahay ganacsiga galmada?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
84	In the past 12 months , have you been refused employment because someone believed you are engaged in transactional sex? (12ki billod oo ugu dambesay, miyaa la guu diiday Shaqo waayo qof ayaa aaminsanaa inaad ku howlantahay ganacsiga galmada?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
85	In the past 12 months , have you been refused to attend prayers at the mosque because someone believed you are engaged in transactional sex? (12ki billod oo ugu dambesay, miyaa la guu diiday inaad ku tukatid masaajidka waayo qof ayaa aaminsanaa inaad ku howlantahay ganacsiga galmada?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
86	In the past 12 months , have you been refused housing because someone believed are engaged in transactional sex? (12ki billod oo ugu dambesay, miyaa la guu diiday guri waayo qof ayaa aaminsanaa inaad ku howlantahay ganacsiga galmada?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
87	In the past 12 months , have you been refused police assistance because someone believed you are engaged in transactional sex? (12ki billod oo ugu dambesay, miyaa la guu diiday tageero boolis waayo qof ayaa aaminsanaa inaad ku howlantahay ganacsiga galmada?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
88	In the past 12 months , have you had verbal insults directed at you because someone believed you are engaged in transactional sex? (12ki billod oo ugu dambesay, miyaa af lagaaddo lagu geesatay waayo qof ayaa aaminsanaa inaad ku howlantahay ganacsiga galmada?)	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini maayo
89	Who was the person who last directed a verbal insult at you? DO NOT READ ANSWERS (Yawaaye qofki ugu dambeye ee af lagaaddo kuu geestay? HA AKHRININ JAWAABAHA)	Do not know the person	Ma aqaani qofkaas
		Social acquaintance	Qof aan saxiib nahay
		Family/relative	rerka/qaraabada
		Police	booliska
		Client	macamiilka
		Other sex worker	kuwa kale ee jirkooda ka ganacsada
		Pimp	Mas'uulka goobta ganacsi
		Non-paying partner or boyfriend	lamaanaha aan lacagta bixin/saxiibkey
		Other (specify)	qof kale (cadeey
		Don't know	ma aqaani
Decline to answer		Jawaab ka bixini maayo	
Section 11: Physical and Sexual violence (Jirka Dilka iyo Dhibateynta Galmada)			
90	In the past 12 months , have you seen/heard of a woman being hit, kicked, or beaten because someone believed she sells sex to men?	Yes	Haa
		No	Maya
		Don't know	Ma aqaani
		Decline to answer	Jawaab ka bixini mayo

	(12ki bilod ee ugu dambeesay, ma aragtay/maqashay haweney wax lagu dhuftay, la laaday ama la dilay waayo qof ayaa aaminsanaa inay jirkeeda ragga ka iibiso?)		
91	Who was the person who last hit, kicked, or beat the female sex worker? DO NOT READ ANSWERS (Yawaaye qofka wax ku dhuftay, laaday, ama dilay haweneyda jirkeeda ka ganacsata? HA AKHRININ JAWAABAHA)	Do not know the person Social acquaintance Family/relative Police Client Other sex worker Pimp Non-paying partner or boyfriend Other (specify) Don't know Decline to answer	Ma aqaani qofkaas Qof aan saxiib nahay rerka/qaraabada booliska macamiil kuwa kale ee jirkooda ka ganacsada Mas'uulka goobta ganacsi lamaanaha aan lacagta bixin/saxiibkey qof kale (cadeey) ma aqaani jawaab ka bixini mayo
92	In the past 12 months, have you seen/heard of a woman being forced to have sex with a man by sexually assaulting or raping her? (12ki bilood ee ugu dambeesay, ma aragtay/maqashay haweney lagu qasbay inay nin la seexato isaaga oo jirdilaayo ama xogaayo?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini mayo SKIP TO QN 94 SKIP TO QN 94 SKIP TO QN 94
93	Who was the person who last forced her to have sex with them? DO NOT READ ANSWERS (Yawaaye qofki ugu dambeeye oo si qasab ah iyaga kula seexdo? HA AKHRININ JAWAABAHA)	Do not know the person Social acquaintance Family/relative Police Client Other sex worker Pimp Non-paying partner or boyfriend Other (specify) Don't know Decline to answer	Ma aqaani qofkaas Qof aan saxiib nahay rerka/qaraabada booliska macamiil kuwa kale ee jirkooda ka ganacsada Mas'uulka goobta ganacsi lamaanaha aan lacagta bixin/saxiibkey qof kale (cadeey) ma aqaani jawaab ka bixini mayo
94	Did she seek medical treatment after this happened? (Miyay doonatay wax daaweyn ah kadib marki ay tani dhacday?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini mayo
95	Did she report this incident to the police? (Miyay wargalisay dhacdadaani booliska?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini mayo
Section 12: Program coverage (Gunaanadka Barnaamijka)			
96	Are you aware of any Local NGO here that deliver non-medical assistance or advice to members of your group? (Ma ogtahay hay'ad maxali ah oo bixisa tageero aan daawo ahayn ama talooyin siisa haweenka dhibateysan?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini mayo
97	During the last 12 months, have you attended any meetings to discuss STI or HIV/AIDS? (12ki bilood oo ugu dambeesay, ma ka qayb gashay shir looga hadlaayo cudurada lagu kala qaada galmada ama HIV/AIDS-ka?)	Yes No Don't know Decline to answer	Haa Maya Ma aqaani Jawaab ka bixini mayo SKIP TO QN 99 SKIP TO QN 99 SKIP TO QN 99
98	Which organization(s) sponsored this meeting? (Hay'adee (hey'adahee) maal galisay shirkaan? DIWAANGALI DHAMAAN WIXI LASHEEGO)		

		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
99	In the last 12 months , did you receive any of these items/services from an outreach worker? READ ANSWERS (12ki bilood ee ugu dambeesay, miyaad ka heshay alabtaan/adeegaan shaqaalaha gargaarka? AKHRI JAWAABAHA) (Multi select)	Condoms	Cinjiirro	SKIP TO QN 101
		Referral to STI screening and treatment	In laguu gudbiyo goob lagu baaro oona lagu daweeyo cuduradda laga kala qaado galmada	
		Referral to HIV counselling and testing	In laguu gudbiyo goob lagaala taliyo ama lagu daweeyo HIV-ga	
		Pamphlets containing general information on STI/HIV/AIDS prevention or treatment	Qoraalo kashekeeyo maclumaadka guud ee kahor tagga iyo daweeynta STI/HIV/AIDS-ka	SKIP TO QN 101
		Lubricants	Bomaatooyin	
		None	waxna	SKIP TO QN 102
		Other (specify):	waxyaaaba kale (cadeey):	
		Don't know	ma aqaani	SKIP TO QN 102
		Decline to answer	Jawaab ka bixini mayo	SKIP TO QN 102
100	Did you go to the referred site to receive medical care? (Miyaad aaday goobta laguu gudbiye si aad uheshid daryeel cafimaad?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
101	Which organization gave these items? RECORD ALL MENTIONED (Hay'adee bixisay alabaatn? DIWANGALI DHAMAAN WIXI LA SHEEGAY)			
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
Section 13: Alcohol and drug use (khamriga iyo Isticmaalka Daroogada)				
102	During the past 3 months , how often have you had a drink containing alcohol? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad u cabtay sharaab khamri kujuro? HA AKHRININ JAWAABAHA)	Never	Waligey macabin.	
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
103	During the past 3 months , how often have you chewed khat? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad cuntay qaad? HA AKHRININ JAWAABAHA)	Never	Waligey macabin.	
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
104	During the past 3 months , how often have you smoked marijuana or hashish? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad darooga/xashiish dhuuqday? HA AKHRININ JAWAABAHA)	Never	Waligey macabin.	
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
105	During the past 3 months , how often have you smoked cigarette? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad sigaar dhuuqday? HA AKHRININ JAWAABAHA)	Never	Waligey macabin.	
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	

		Decline to answer	Jawaab ka bixini maayo	
106	During the past 3 months , how often have you smoked Shisha? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, qaab isku xigasha nooce ah ayaad shiishad dhuuqday? HA AKHRININ JAWAABAH)	Never	Waligey macabin.	
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini maayo	
107	During the past 3 months , have you had sex with a client after having taken a drink containing alcohol, chewed khat, smoked marijuana/hashish or cigarette? DO NOT READ ANSWERS (3di bilood ee ugu dambeesay, miyaad la galmootay macamiil kadib marki cabtay sharaab khamri uu kujuro, qaad cuntay, dhuuqday darooga/xashiish ama sigaar?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
108	Some people have tried injecting drugs using a syringe or needle. In the past 3 months , have you injected drugs? (Dadka qaarkood waxay isku dayeen inay isku duraan darooga iyaga oo isticmalaayo cirbad, 3di bilood ee ugu dambeesay miyaad iskudurtay darooga? HA AKHRININ JAWAABAH)	Never	Waligey macabin.	END OF SURVEY
		Monthly or less	Bil waliba ama ka yar	
		2-4 times a month	2-4 jeer bishiba	
		2-3 times a week	2-3 jeer usbuuciba	
		4 or more times a week	4 jeer ama kabadan usbuuciba	
		Don't know	Ma aqaani	END OF SURVEY
		Decline to answer	Jawaab ka bixini maayo	END OF SURVEY
109	What drug do you normally inject? RECORD ALL MENTIONED (Darooga nocee ah ayaad sida caadada ah isku durtaa?) (Multi select)	Heroin	Heroin	
		Cocaine	Kokaine	
		Speedball (heroin plus cocaine)	Speedball (heroin iyo kokaine oo iskujur ah)	
		Methamphetamine	Methamphetamine-da	
		Other (specify):	Kuwa kale (Cadeey):	
		Don't know	Ma aqaani	
		Decline to answer	Jawaab ka bixini mayo	
110	The last time you injected drugs, did you use a sterile needle and syringe? (Marki ugu dambeesay oo aad is durtay, ma isticmaashaycirbad la nadiifiye?)	Yes	Haa	
		No	Maya	
		Don't know	Ma aqaani	

No.	Questions	Coding of answers
	For Participant: Please answer the following statements	
1	How old are you? (If participant responds <18 years, inform them that they are ineligible)	_____ years
2	Have you participated in this study before? (Explain participation in previous research, in previous years, does not exclude participation)	% 1. Yes → Ineligible % 2. No
3	What is your profession?	% 1. Trucker % 2. Uniformed personnel % 3. Port Workers % 4. None of the above → Ineligible
4	Do you agree to participate in a face-to-face interview and undertake HIV and syphilis testing?	% 1. Yes % 2. No → Move to question 5
5	What are the reasons for NOT agreeing to participate in a face-to-face interview?	% 1. Too busy % 2. Fear of being stigmatized for participation % 3. Not interested % 4. Incentive is not worth the time % 5. Not willing to undergo HIV and Syphilis testing % 6. Other: _____
	For Screener: Please answer "Yes" on "No" to the following statements	
6	Participant is under the influence of alcohol, drugs, or other substance.	% 1. Yes % 2. No
7	Participant has provided verbal informed consent	% 1. Yes % 2. No
8	Participant was recruited from a selected site	% 1. Yes % 2. No
9	Eligible to participate in the survey	% 1. Yes % 2. No

* Eligible = answers to questions 6-8 must match answers in bold.

No.	Questions	Coding of answers
	For Participant: Please answer the following statements	
1	How old are you? (If participant responds <18 years, inform them that they are ineligible)	_____ years
2	Have you participated in this study (current IBBS round) before? (Explain participation in previous research, in previous years, does not exclude participation)	% 1. Yes → Ineligible % 2. No
3	Have you had vaginal or anal sex with a man in the last 12 months in exchange for money, goods or favour?	% 1. Yes % 2. No → Ineligible
4	Does the person have a valid referral coupon?	% 1. Yes % 2. No → Ineligible
5	Do you agree to participate in a face-to-face structured survey?	% 1. Yes % 2. No → Move to question 7
6	I would like to know the main reason that you decided to participate in this study	% 1. Interested in HIV and sexual health issues % 2. Want to be tested for HIV % 3. Interested in issues relating to FSW % 4. My friend wanted me to participate % 5. Someone forced me to participate % 5. Incentive/gift for participating % 6. Other: _____
7	What are the reasons for NOT agreeing to participate in a face-to-face structured survey?	% 1. Too busy % 2. Fear of being stigmatized for participation % 3. Not interested % 4. Incentive is not worth the time % 5. Not willing to undergo HIV and Syphilis testing % 6. Other: _____
	For Screener: Please answer "Yes" on "No" to the following statements	
8	Participant is under the influence of alcohol, drugs, or other substance.	% 1. Yes % 2. No
9	Participant has provided verbal informed consent	% 1. Yes % 2. No
10	Participant was recruited from a selected site	% 1. Yes % 2. No
11	Eligible to participate in the survey	% 1. Yes % 2. No

* Eligible = answers to questions 6-8 must match answers in bold.

Somalia Key Population IBBS Survey Employee confidentiality agreement

- I recognize that in carrying out my assigned duties as a staff member on the **Somalia Key Population IBBS survey**, I may obtain access to private information about persons in this survey that was provided under an assurance of confidentiality.
- I understand that I am prohibited from disclosing or otherwise releasing any personally identifying information, either directly or indirectly, about any individual in the survey. Should I be responsible for any breach of confidentiality, I understand that civil and/or criminal penalties may be brought against me.
- I acknowledge that my responsibility to ensure the privacy of protected health information contained in any electronic records, paper documents, or verbal communications to which I may gain access shall not expire, even after my employment or affiliation with this survey has terminated.
- By my signature, I acknowledge that I have read, understand, and agree to comply with the terms and conditions of this confidentiality agreement.

Employee name (printed) _____

Employee signature _____

Date _____

Supervisor name (printed) _____

Supervisor signature _____

Date _____

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Date	Coupon / Lab code	Age	QC Y/N	HIV Rapid test								Syphilis rapid test		Comments	
				Test 1 SD Bioline		Test 2: Abon		Test 3: Stat-Pack		Final Result		SD Bioline			
				P	N	P	N	P	N	P	N	I	P	N	

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Instructions: To be completed by Coupon Manager before giving primary incentive. Form only completed one time per respondent, on first visit.

Coupon number		
RDS number		
Date		
Number	Question	Answer
1.	How many women do you know (they know your name, and you know theirs), who have had sex in the last <u>12</u> months in exchange for money, gifts or favour?	
	a. Are above the age of 18 ?	
	b. Live and work (exchange sex) in this town?	
	c. You have seen them in the past 1 month ?	
2.	How many truck drivers do you know (they know your name, and you know theirs), who have received sex in the last <u>12</u> months in exchange for money, gifts or favour?	
	d. Are above the age of 18 ?	
	e. Live and work (exchange sex) in this town?	
	f. You have seen them in the past 1 month ?	
3.	How many Police or Military officers do you know (they know your name, and you know theirs), who have received sex in the last <u>12</u> months in exchange for money, gifts or favour?	
	g. Are above the age of 18 ?	
	h. Live and work (exchange sex) in this town?	
	i. You have seen them in the past 1 month ?	
4.	How many Port workers do you know (they know your name, and you know theirs), who have received sex in the last <u>12</u> months in exchange for money, gifts or favour?	

	j. Are above the age of 18 ?	
	k. Live and work (exchange sex) in this town?	
	l. You have seen them in the past 1 month ?	

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Title of survey: Integrated HIV and Sexually Transmitted Infections (STI) bio-behavioural survey (IBBS) amongst key population

Principal investigators: [IOM, UNICEF, MOH, AIDS Commission]

This paper tells you about the survey. An interviewer and a nurse counsellor wasalso talk about the survey with you today. We want you to ask **ANY** question about **ANY** part of the survey that you do not understand.

You can choose if you want to be in the survey or not. If you say yes, you can also later choose to say no at any time you want to. You do not have to do all the survey.

Why do we do this survey?

Many adults have HIV and other diseases from sex. This survey is to find out what adults do that can make them get HIV and other diseases from sex. In this survey, we waslearn about types of sex partners' men and women have, the way people act to people that have HIV, and the use of alcohol and drugs. We wasalso know how many key populations have HIV. This survey washelp the ministry of health, AIDS Commission and its partners know more about HIV. Then they can make programmess that can help prevent HIV. These programmes teach people to prevent infection or transmission of HIV and STI. They give counselling and testing for HIV. They help people with HIV live a healthy life. You were invited to do the survey because you may be at risk for HIV. Only the interviewer who asks you the questions wasknow the answer you give. Your name or identity wasnot be asked at any time.

What washappen if I choose to do this survey?

If you do this survey, only one visit is required. However, you may be required to come for the second visit if your blood sample is taken for further testing. This visit wastake about 90 minutes. At this visit, you will

- Get a survey code. This way nobody can know who you are. We have this code because we do not want to know your name or any information that can make someone find out that it was you who did this study.
 - Take a survey with a trained interviewer. The interviewer wasask questions like your age and habits.
- The interviewer wasask about alcohol and drugs, sex and sex partners, HIV and diseases from sex, and health care.
- Get information about HIV prevention, HIV testing, and HIV treatment
 - Have a trained counsellor take blood from a fingerprick. The blood wasbe used to do a rapid HIV and Syphilis test. If need arises, some blood may be drain from your vein if a further test is required.
 - Receive the test results with a trained counsellor who washelp you make a plan that is best for you, and talk about treatment options and medical referrals if needed
 - Get a gift for being in the survey today.

Truckers, Uniformed & Port workers: You wasbe offered USD 3 for your time taken and effort to participate in this survey today.

FSW Only: You wasbe offered USD 4 for your time taken and effort to participate in this survey today. You wasalso be given USD 2 for every successful eligible FSW you recruit (up to a maximum of 3 eligible FSW)

What risks can I expect from being in the survey?

There may be some risk or discomfort from doing this survey.

- The most important is that someone might find out you took the survey. If this happens, someone in your community might treat you badly. But the study is secret and we do all we can to keep it private. If you know the interviewer, you may ask for another one so that your privacy is protected.
- The survey includes personal questions about sexual activity and other private things. This can make you feel embarrassed. If any question makes you feel uncomfortable, you can refuse to answer it. You can terminate the interview at any time.
- The fingerprick may hurt. The spot my bleed, bruise or get infected. You may feel faint, but this is very rare. Only trained counsellors wasdo the fingerprick, so that these things might not happen.
- If you test positive for HIV you may feel anxious or depressed. The counsellor working with you can help you with these feelings. You may also be referred to local counsellors or support groups to help with these feelings.

Are there any benefits from taking part in this survey?

Yes. If you choose to be in this survey, you can receive

- Free on-site testing for HIV and Syphilis, and the opportunity to learn your test results
- Referral to clinics that can give you medical care and treatment as needed
- Free educational information on HIV and STIs
- There is also a benefit to your community because we wasknow more about those at risk for HIV.

This can help plan better education, prevention, and medical programmes.

What are the alternatives for being in the survey?

You can choose not to participate in the survey. This wasnot impact your access to services.

Does it cost me for me to be in the survey?

It does not cost anything to be in this survey.

WasI get anything for taking part in the survey?

Truckers, Uniformed & Port workers: You wasbe offered USD 3 for your time taken and effort to participate in this survey today.

FSW Only: You wasbe offered USD 4 for your time taken and effort to participate in this survey today. You wasalso be given USD 2 for every successful eligible FSW you recruit (up to a maximum of 3 eligible FSW)

Wasmy medical and other information be kept confidential?

To protect your identity

- We do not ask for your name. We do not write it on any survey documents or lab sample.
- Only your survey ID number was be on your survey, survey records, and lab sample
- All the information you give was be kept in a cabinet. It was be locked at all times.
- Your test result was not be known to anyone except you and the counsellor

What if I want to stop being in the survey?

Your participation is entirely voluntary. You can stop being in the survey at any time.

Who can answer my questions about the survey?

You can ask the survey staff any questions that you have at any time. You may also contact the people in charge of this survey. Name: _____ Phone: _____

If you have any questions about your rights as a survey participant, about ethical matters, or wish to complain you can call Ministry of Health Ethics Review Committee], who reviewed and approved this survey.

Interviewer: Answer the participant's questions about the survey before proceeding to the informed consent authorization.

INFORMED CONSENT AUTHORIZATION

Interviewer: Ask participant to document response to each question by checking the appropriate box.

Participants may consent or decline each part of the survey.

Interviewer: Ask participant to document response to each question by checking the appropriate box.

A. Do you agree to participate in part or all of the survey or do you decline participation?

- ☐ 1. YES, agree to participate in part or all of the survey. (Go to Question B)
- ☐ 2. NO, decline to participate. [if NO participant **not eligible** to participate].

If declined:

We're interested in knowing why people do not want to do this survey. Would you mind telling me which of the following best describes the reason you do not want to do this survey?

- ☐ I don't have time
- ☐ I don't want to talk about these topics
- ☐ Some other reason; Specify _____
- ☐ I would rather not say why

B. Do you agree or decline to complete the survey questionnaire?

- ☐ 1. YES, agree. (Go to Question C)
- ☐ 2. NO, decline. [if NO participant not eligible to participate].

C. Do you agree for us to draw a sample of blood from finger prick and if required, some blood drawn from the vein and send for additional testing for confirmation?

- ☐ 1. YES, agree.
- ☐ 2. NO, decline.

D. Do you agree to rapid HIV testing to receive your results today?

- ☐ 1. YES, agree.
- ☐ 2. NO, decline.

D. Do you agree to Syphilis testing to receive your results today?

- ☐ 1. YES, agree.
- ☐ 2. NO, decline.

If you have read this document or had the document read to you, have been given the chance to ask any questions, and agree to participate in the above procedures (as marked), please sign below.

- I have been informed by the interviewer about the nature, conduct, benefits and risks of this survey
- I have also received, read and understood the above written information regarding the survey
- I am aware that the results of the survey including personal details regarding sex, age, HIV status was be anonymously processed into a survey report
- I may, at any stage during the interview, without prejudice, withdraw my consent and participation in the survey
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the survey

I have explained to the participant the study purpose and procedures and we have discussed all the risks that are involved. I have answered questions to the best of my ability that the participant had.

Name of person obtaining consent _____

Signature of person obtaining consent _____

Date ____/____/____ Time ____/____

Copy to:

- ☐ Investigator's file

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Somali Federal Republic
Ministry of Health & Human Services
Office of Director General

المجتمع ورعاية الصحة وزارة
مكتب المدير العام

Ref: MOH&HS/DGO/0197/Mar/2017

22/Mar/2017/ Mogadishu

To whom it may concern

cal clearance

to your application dated 07-March-2017 for ethical approval for
TEGRATED HIV AND SEXUALLY TRANSMITTED INFECTIONS (STIs)
IRAL SURVEY (IBBS) AMONGST KEY POPULATION IN SOMALIA" and
r request from the Authority to provide ethical clearance".

iew process, and based on the recommendation of the Research
ttee, I am pleased to inform you that you have being authorized to
tudy.

in of the study you are expected to submit one hard copy and one
he study report to our research section within one month

i Hashi Ali
tor, Ministry of Health & Human Service



Subject: Et

In reference
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Best Regar

Dr. Abdulla
General Di

Tel: +252

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Puntland Government of
Somalia

Ministry of Health

Ministry of Health

Office of the Director General

MoH/PL/DGO/C19/2017

28th March, 2017

To: IOM Somalia.

RE: STUDY APPROVAL

This is in reference to your request for approval of the study titled **"Integrated HIV and Sexually Transmitted Infections (STIs) Bio-behavioral Surveillance (IBBS) survey amongst key population in Somalia dated on 6th March, 2017"**

Following the review of the proposal submitted, I am pleased to inform you that the Ministry of Health in Puntland has **Approved** the above mentioned study to be implemented in Bossaso.

Upon completion of the study, you are requested to submit a copy of the report to the Ministry of Health, Puntland. Please do not hesitate to contact us in case you need further support.

Yours Sincerely,

Dr. Abdirizak Hersi Hassan
Director General MOH Puntland.





REF/PAC/PL/016/2017

5th April, 2017

To: IOM Somalia

RE: APPROVAL OF THE IBBS SURVEY

Reference is made to your request for approval of the study titled "Integrated HIV and Sexually Transmitted Infections (STIs) Bio-behavioral Surveillance (IBBS) survey amongst key population in Somalia dated on 6th March, 2017"

Following the review of the IBBS research protocol submitted, I am pleased to confirm you that the Puntland AIDS Commission (PAC) has approved the aforementioned study. You are requested to submit a copy of the report to the Puntland AIDS Commission soon after completion of the survey. Please do not hesitate to contact us in case you need further support.

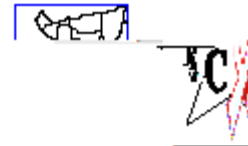
Yours Sincerely,

Dr. Abdurahman Saeed

Executive Director, Puntland AIDS Commission

[illegible]

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to: SCAC/SEC/19/17

Date: 21/03/2017

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Programme Manager,
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To:
Abdika
Health
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PROVAL OF THE IBBS SURVEILLANCE

RE: AI

nce is made to your request for approval of the study titled "integrated HIV and
ly Transmitted Infections (STIs) bio-behavioural surveillance (IBBS) among key
tions in Somalia".

Refere
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ing the review of the proposal submitted and seen the importance of this surveillance
HIV & AIDS response activities in SC Somalia, I am pleased to inform you that the
Central AIDS Commission (SCAC) has **approved** the aforementioned surveillance.

Followi
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re requested to submit a copy of the report to the South-Central Somalia AIDS
ission (SCAC) soon after completion of the surveillance.

You a
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do not hesitate to contact us in case you need further support.

Please

Yours Sincerely,

Ahmed Mohammed Jimale,
Executive Director,
South-Central Somalia AIDS Commission (SCAC)



