
Report of PLACE Assessments in Almaty, Kazakhstan, Central Asia

2002 and 2003



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Executive Summary

Why was PLACE conducted in Almaty, Kazakhstan?

There is limited HIV surveillance in Kazakhstan. In 2001, available surveillance data suggested that the HIV epidemic was concentrated among urban injection drug users (IDUs). Models of the epidemic predicted that it could spread from IDUs to the general population via heterosexual transmission. The PLACE (Priorities for Local AIDS Control Efforts) protocol was implemented in Almaty in 2002 to determine whether there was any evidence of overlap in the injecting drug user and sexual networks and to identify where HIV prevention efforts should focus to minimize HIV transmission. A follow-up assessment was planned for 2003 to determine to what extent AIDS prevention programs had successfully reached target sites and whether gaps remained in program coverage. This report summarizes the findings of these two assessments.

Unfortunately, the interim period between assessments was not sufficient to implement the range of prevention activities anticipated. Consequently, the “follow-up” assessment in 2003 was essentially a repeat of the 2002 assessment, although some improvements were made to the protocol and additional objectives added. Funding for these assessments was provided by USAID through the MEASURE *Evaluation* project.

What were the specific aims of the PLACE protocol?

The specific aims of PLACE 2002 and PLACE 2003 were to identify areas within the city and specific sites within these areas where HIV transmission is likely to occur and to examine the change in these over time. There were several additional secondary objectives of the 2003 study, including an assessment of the reliability of the method to monitor, in absence of an intervention, the characteristics of sites where people meet new sexual partners, commercial sex workers solicit clients, and injection drug users socialize as well as the characteristics of people who socialize at these sites. Secondly, the assessment included additional questions provided by local intervention groups to help focus and monitor prevention programs. Finally, the assessment sought to collect more complete information to estimate the size of most at-risk populations in Almaty.

Sexual and IDU networks in Almaty are extensive and diffuse but stable. There was significant overlap between youth, sex workers, clients, and IDUs socializing at sites.

Two PLACE assessments were conducted in Almaty, Kazakhstan one year apart. With a couple of notable exceptions, such as increased condom availability at sites and decreased needle sharing among IDUs, the characteristics of the sites and the people socializing at them did not change from 2002 to 2003.

Over 850 unique sites in 2002 and over 1,000 unique sites in 2003 were identified by 2200 key informants as places where people meet new sexual partners, commercial sex workers solicit clients, and/or injection drug users socialize. There was significant overlap among youth, injection drug users, and commercial sex workers and clients socializing at the sites. Individuals socializing at approximately 60% of the sites met new sexual partners while at the sites and injection drug users socialized at over half of the sites. In fact, almost a third of the sites had both individuals who met new

sexual partners and injection drug users socializing there. Approximately 15% of sites had individuals who met new sexual partners, at least some youth, commercial sex workers soliciting clients, and IDUs socializing at the site. Sites with overlapping, high-risk populations serve as a bridge between the sexual and drug use networks and can potentially facilitate the spread of the epidemic currently concentrated among the IDU population to an epidemic with widespread heterosexual transmission.

The rate of new partnership formation remained high, particularly among youth. A high proportion of men visited commercial sex workers.

In 2002 and 2003, 2,100 individuals socializing at over 250 sites were interviewed. Each year, this sample included approximately 1,200 youth, 200 commercial sex workers and 300 clients, and 200 injection drug users. Approximately 40% of men and one-third of women socializing at the sites reported at least one new partner during the past four weeks. Among youth, the proportion was even higher with almost half of male youth and 40% of female youth reporting at least one new partner in the past four weeks. Over three-quarters of men who had a regular partner during the past 12 months also had at least one new partner during this same time period. The proportion of women with both a regular and new partner during the past 12 months was lower than that among men but over half of women had both a new and regular partner. Approximately a quarter of men each year had given money in exchange for sex during the past three months.

Condom availability increased and use was high, but not consistent, with new partners.

The proportion of sites where condoms were always available during the past 12 months increased from 29% in 2002 to 43% in 2003. Similarly, the proportion of interviewers who saw condoms at the site on the day of the interview increased from 18% in 2002 to 38% in 2003. Reported condom use with new partners remained high among all sub-populations in 2002 and 2003. Among patrons with at least one new partner in the past four weeks, approximately 80% of men and 90% of women reported using a condom with the last new partner in the past four weeks. However, condom use is self-reported and could potentially be over-reported. The proportion who reported always using a condom with new partners in the past four weeks was lower indicating that condom use with new partners was not consistent.

Perception of drug use within the units is mixed. High risk behaviors by IDUs decreased between 2002 and 2003.

Key informants and socializing individuals thought that injection drug use increased in the area from 2002 to 2003 while site representatives thought that it had decreased during the same time period. The proportion of socializing individuals who thought that injecting drug use was very common in the unit almost tripled between 2002 and 2003 but the proportion who thought that injection drug users socialized at the site or who had personally ever injected drugs remained constant.

High risk behaviors among IDUs decreased from 2002 to 2003. Among male IDUs who had injected drugs within the past six months, the proportion who had shared a syringe at last injection, who shared a syringe in the past four weeks, who took drugs from a common reservoir in the past four weeks, and who used a ready made drug solution without boiling in the past four weeks, all decreased substantially between 2002 and 2003. Similarly, the main social context in which male IDUs in Almaty took drugs changed from always taking drugs with the same group to taking drugs individually.

Program implications of the assessment:

Interventions need to be focused on sites where people meet new partners, youth socialize, commercial sex workers solicit clients, and injection drug users socialize while maintaining a strong general population prevention program.

The PLACE method provided significant insight into the sexual and injection drug use networks in Almaty. These networks were extensive and diffuse and there was significant overlap between high-risk populations socializing at the sites. Priority sites for intervention should include sites where people meet new sexual partners, youth socialize, commercial sex workers solicit clients, and injection drug users socialize, and in particular, where these high-risk populations overlap. These overlap sites should be targeted with a site-based prevention program to reduce the likelihood of transmission across different physical modes of transmission and across different risk population subgroups. Characteristics of the individuals socializing at these priority sites can be used to develop and tailor prevention programs and for indicators to monitor the intervention.

Summary of Indicators from Assessment

Results from PLACE Assessments in Almaty, Kazakhstan, 2002 and 2003:		
Partners: USAID/CAR , MEASURE <i>Evaluation</i> Project at UNC, Center for the Study of Public Opinion, Almaty		
Characteristics		
Population	1.5 million	
Scope of Assessment		
	2002	2003
City-wide assessment	Yes	Yes
Identification of areas or “units” of city and social sites within “units” where people meet new partners and/or drug injectors socialize	Yes	Yes
Mapping of sites	Yes	Yes
Characterization of sexual and injecting networks at sites	Yes	Yes
Characterization of overlaps of sexual and injecting networks	Yes	Yes
Identification of gaps in prevention programs	Yes	Yes
Step 1 Results from Focus Groups/In-Depth Interviews to Identify Units of the City Where People Meet New Sexual Partners and Where IDUs can be Found		
	2002	2003
Number of Focus Group Discussions held	8	0
Number of In-Depth interviews held with police and IDU	20	0
Number of units identified by Focus Groups/In-Depth Interviews	15	0
Number of units identified by Contextual Information	0	20
Step 2 Results from Key Informant Interviews Within Areas to Identify Specific Sites Where People Meet Sexual Partners or Where Drug Injectors Can be Found		
	2002	2003
Days of key informant interviewing	6	11
Number of interviewers	20	20
Number of key informant interviews	1200	1000
Number of refusals for key informant interviews	--	267
Number of key informant reports	4189	4438
Number of sites reported in areas where KI interviewed	1656	--
Number of sites reported in other units	2533	--
Number of unique sites reported in all units	848	1015
<u>Percent of Key Informants who:</u>		
Believe injecting drug use occurs in area	75%	83%
Has seen syringes lying around in last four weeks in area	54%	47%
Report sex workers solicit customers in area	44%	61%
<u>Percent of sites reported where Key Informants believe:</u>		
People meet new sexual partners	61%	47%
IDUs can be found	30%	42%
Syringes can be found	29%	42%
Sex workers solicit customers	51%	69%

Step 3 Results from Visits to Sites Identified by Key Informants in Step 2		
Characteristics of Sites and Patrons as Reported by a Site Representative at the Site and Interviewer Observation		
	2002	2003
Total Number of Unique Sites Named by Key Informants	857	1015
Number of Refusals, Sites not Found, Sites Closed, Duplicate Sites	6	68
Number of Sites Excluded	413	524
<i>Note: Criteria for excluding sites for site verification were based on number of times the site was named by key informants, location, and type of site.</i>		
Number of Sites Visited, Verified, Characterized	N=439	N=423
<u>% of sites where site representative reports that:</u>		
People meet new sexual partners at site	64.7	55.1
Injection drug users can be found at site	50.3	53.2
People meet new sexual partners <u>and</u> IDUs are at site	33.3	28.1
People meet new sexual partners <u>or</u> IDUs are at site	81.3	80.1
<u>Type of site (By observation):</u>		
• Bar, Café, Restaurant	25.3	21.8
• Night Club, Disco, Casino	6.6	6.2
• Sauna	2.1	2.1
• Hotel	3.9	5.9
• Billiards, Game Club, Computer Club	1.8	1.0
• Dormitory, Private Apartment, Flat	7.5	2.6
• Basement, Roof, Stairwells, Unused Abandoned Building	2.5	1.7
• School, College, Technical	7.5	6.4
• Street, Waste, Yard	23.9	35.7
<u>Activities Onsite (By interview):</u>		
• Beer	87.7	85.6
• Hard Alcohol	73.6	66.9
• Computer Games	16.6	13.5
• Eating	70.4	52.7
• Dancing	33.3	27.4
• Striptease	4.8	4.7
<u>Sexual Partnerships Formed Onsite (By interview):</u>		
• Men meet women	63.1	54.4
• Women meet men	62.4	53.4
• Men meet men	4.8	5.2
• Someone facilitates partnership formation	8.7	12.3
• Sex workers solicit	26.9	27.4
<u>Percent of sites with Patrons who are (By interview):</u>		
• Male students	77.7	71.2
• Female students	77.7	68.6
• Men under age 18	60.8	55.3
• Women under age 18	62.9	58.2
• Male IDUs	44.2	46.1
• Female IDUs	28.2	31.9
<u>Perception of how common IDU is in area (By interview):</u>		
• Very common	25.5	14.2
• Somewhat common	26.4	34.0
• Not very common	38.0	44.2
• Does not occur	9.6	7.6
• Percent who have seen used syringes lying inside or outside sites	43.5	46.6
<u>Condoms and AIDS Prevention (mostly by interview):</u>		
• % where condoms never available past 12 months	64.7	32.9
• % where condoms seen on site (observation)	18.5	38.3
• % where condoms available within 10 minutes	87.7	73.8
• % where sites willing to sell condoms	41.9	51.5
• % that ever had HIV/AIDS prevention programs	10.7	5.9
• % willing to have AIDS prevention program	55.8	43.0

Step 4 Results from Interviews with People Socializing at Sites Where People Meet New Sexual Partners and Injection Drug Users Socialize - Characteristics of People at Sites		
	2002 (%)	2003 (%)
Number of sites where interviews conducted	109	145
% of verified sites where individual interviews conducted	24.8	34.3
<u>Number of men interviewed</u>	1202	1237
<u>Percent of Men (age 18 and older) Socializing at Sites Who:</u>		
• Are 18-24	49.2	51.6
• Are married or living in union	35.4	32.3
• Employed fulltime	55.2	65.7
• Are students	30.3	26.8
• Visit the site every day	31.7	34.6
• Believe people meet new sexual partners at site	71.5	70.3
• Have ever attracted a new sexual partner at the site	26.9	27.2
- Of those, used a condom with most recent partner from site	79.5	72.4
• Have a condom with them that was seen by interviewer	8.2	8.5
<u>Rate of Partnerships:</u>		
• Had a new sexual partner in the past four weeks	42.7	40.5
- Of those, used a condom with most recent new partner	77.8	79.6
• Had a new sexual partner in the past 12 months	71.0	78.4
• Have a regular, long-term partner	74.3	71.5
• Have had sex with a man in the past four weeks	0.9	0.9
• Given money or gifts in exchange for sex in the past 3 months	24.1	29.9
<u>Percent of Men Socializing at Sites Who:</u>		
• Believe drug use is very common in area	13.5	34.4
• Believe that IDUs socialize at site of interview	56.3	59.7
• Have ever injected drugs	16.6	17.1
-Of those who injected drugs in the past six months		
- Shared a needle the last time he injected	26.7	11.8
<u>Number of women interviewed</u>	898	863
<u>Percent of Women (age 18 and older) Socializing at Sites Who:</u>		
• Are 18-24	57.8	60.5
• Are married or living in union	30.0	24.9
• Employed fulltime	43.1	43.3
• Are students	30.1	32.3
• Visit the site every day	29.4	35.9
• Believe people meet new sexual partners at site	73.8	71.6
• Have ever attracted a new sexual partner at the site	30.0	33.8
- Of those, used a condom with most recent partner from site	86.0	85.8
• Have a condom with them that was seen by interviewer	8.7	9.3
<u>Rate of Partnerships:</u>		
• Had a new sexual partner in the past four weeks	32.1	36.7
- Of those, used a condom with most recent new partner	90.5	89.1
• Had a new sexual partner in the past 12 months	47.7	42.2
• Have a regular, long-term partner	67.6	69.0
• Received money or gifts in for sex in the past 3 months	20.5	27.7
<u>Percent of Women Socializing at Sites Who:</u>		
• Believe drug use is very common in area	13.4	37.5
• Believe that IDUs socialize at site of interview	54.8	62.9
• Have ever injected drugs	3.5	6.3
-Of those who injected drugs in the past six months		
- Shared a needle the last time she injected	25.9	8.6

Background and Objectives

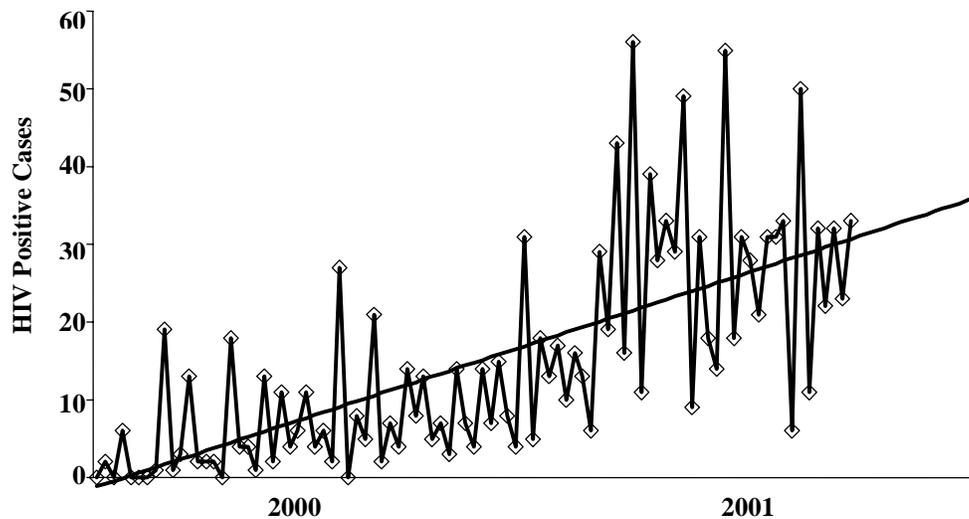
This report compares the results from the 2002 and 2003 PLACE assessments in Almaty, Kazakhstan. A comparison of the 2002 results from Almaty with the results from Karaganda, Osh, and Tashkent are available in a separate report as are the comparisons of the 2002 and 2003 assessments for each of these cities.

A. Background and Objectives

Status of HIV/AIDS epidemic in Kazakhstan

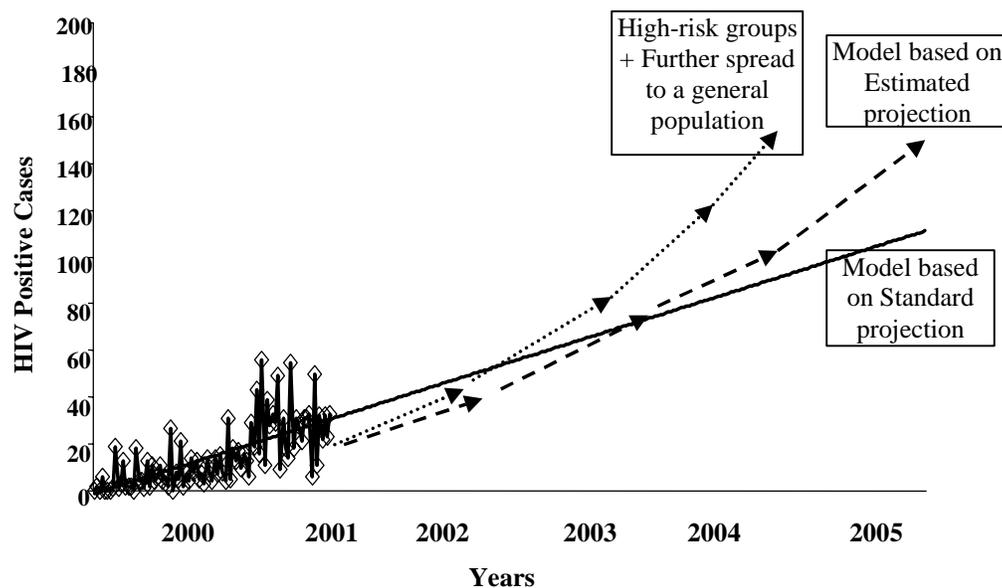
Kazakhstan, compared to other parts of the world, has a relatively low prevalence of HIV infection. The spread of HIV was sporadic until 1996 when HIV among injection drug users (IDUs) began to emerge (1, 2). The epidemic is now characterized by rapid transmission of the HIV virus with the number of registered cases doubling each year since 2000 (2). By January 2002, 2,230 cumulative cases of HIV had been officially reported (3). However, Kazakhstan does not have a functioning sentinel surveillance system and USAID, in its regional strategy document, estimated that the actual number of cases was 10 times higher. The low prevalence of infection, however, may mask high incidence of infection among some sub-populations in particular geographic areas of the region. The USAID CAR Regional Strategy suggests that incidence may be increasing (Figure 1).

Figure 1. Weekly reported incidence of HIV cases in Kazakhstan, Government statistics 2000-2001.



HIV incidence would increase to 3% and approximately 450,000 people would be infected with HIV by the end of 2005. According to the regional strategy: “Given a similar pattern of HIV infection in the other four Central Asian countries, unless urgent measures are taken to prevent the further spread of the epidemic, the number of people living with HIV/AIDS in Central Asia (total population of 55 million) could reach 1.65 million by the year 2005.” (3)

Figure 2. Estimated and projected HIV/AIDS incidence rates in Kazakhstan, 2000-2005.



MEASURE *Evaluation* did not critically review these projections. However, they are useful figures for understanding the urgency of the USAID regional strategy and the role of the PLACE assessments in identifying where interventions should be focused.

B. Role of PLACE Assessments in USAID Regional Strategy

In December 2001, MEASURE *Evaluation* met with the Central Asia Regional Office of USAID to negotiate a scope of work for implementing PLACE assessments to support the Regional AIDS prevention strategy. MEASURE *Evaluation* agreed to provide technical assistance to the region for focusing, informing, and monitoring AIDS prevention programs using the PLACE method. USAID wants a comprehensive and integrated approach to HIV/AIDS prevention in Central Asia during the period when window of intervention opportunity may be closing rapidly. USAID target populations for intervention include “vulnerable” youth aged 15 to 25 years and people engaging in high risk behaviors such as IDUs and commercial sex workers (CSWs) and their clients.

Between December 2001 and April 2002 a strategy for implementing PLACE assessments was developed based on discussions with the CAR Regional Office. Key features of this strategy include:

- Initial implementation of the assessment in Almaty, Kazakhstan and subsequently in an additional three cities along the narcotic trade routes from Afghanistan to Eastern Europe.

Almaty was selected to serve as the pilot city for the region during which the protocol, indicators, and training materials were fully adapted to the pattern of injection drug use and sexual partnerships in the region. In addition, the Almaty assessment served as hands-on experience for a

team of trainers from Karaganda, Osh, and Tashkent, who carried the method to their cities for assessments in 2002 and 2003.

- Re-assessment in 2003.

The strategy covered 18 months of activities. There is a strong commitment to building local capacity for implementing the assessments. The assessments occurred in cities where USAID is supporting harm reduction and condom promotion programs according to a time frame that allows the assessments to provide data for monitoring programs.

C. Objectives of PLACE in the USAID Regional Strategy

Overall, the role of the PLACE method in the Region is to focus, inform, and monitor AIDS prevention activities. The method was considered appropriate because the epidemic is geographically clustered and a site-based approach for prevention programming is reasonable. Specific objectives of the PLACE assessments include:

- To describe sexual and injection drug use networks in cities with highest incidence of HIV infection, specifically:
 - to identify and map geographic areas within each city where the networks operate and sites within these areas where injection drug users and people with high rates of new partner acquisition can be accessed;
 - to describe the sociodemographic and behavioral characteristics of members of the networks, their knowledge of AIDS transmission routes and protective behaviors, and their exposure to interventions;
 - to estimate the extent of youth participation in networks.
- Within each city, to identify specific priority sites for condom promotion and harm reduction programs so that educational messages, condoms, and clean needles are accessible to sexual and injection drug use networks, with a particular focus on youth
- To provide site-based indicators for each city of the extent to which:
 - injection drug users have access to harm reduction programs;
 - people who have many new sexual partners have access to and use condoms;
 - there is overlap between the IDU and sex networks.

The assessment was divided into four phases:

- (1) a preparation phase that occurred before the first PLACE assessment was fielded;
- (2) a pilot phase during which the first assessment was conducted under heavy scrutiny;
- (3) a roll-out phase where the method was implemented in several cities; and
- (4) 2003 assessments that occurred in May-August 2003

Preparation Phase Activities January – April 2002

- MEASURE *Evaluation* staff discussed how the PLACE protocol could be adapted to provide maximum information to condom social marketing and youth programs with Population Services International (PSI/Washington) and the Mission.
- PLACE data collection forms were revised based on information from PSI and Soros Foundation. Final questionnaires and protocol were ready by February 27, 2002. The process for obtaining ethical review of the protocol in Kazakhstan in general and in Almaty in particular was determined and there were initial efforts to identify maps.
- The PLACE protocol was submitted to UNC Institutional Review Board for ethics review in March, 2002, and field work members and a local field work coordinator were identified.

Pilot Phase: Implementation of PLACE Protocol in Almaty, Kazakhstan May-June 2002

- Implementation of PLACE protocol in Almaty (May 2002)
- Protocol revised for other cities

Roll-Out Phase for 2002 Assessments (May-November 2002)

- Workshop for cities interested in implementing PLACE protocol (May, 2002)
- Follow-up email to detail timeframes, budgets, and sub-agreements
- Implementation of PLACE protocol in other cities
- Preliminary results and tables provided (November 2002)
- Feedback session for 2002 Assessment Results held in Almaty with local intervention groups (June 2003)
- Final report for 2002 Assessments available (Spring 2004)

2003 Assessments (June-October 2003)

- Implementation in Almaty, Karaganda, Osh and Tashkent (June-October 2003)

D. Overview of the PLACE Protocol

Methods for monitoring and evaluating AIDS prevention efforts are urgently needed. Because resources for interventions are limited, there is an immediate need to focus interventions where they are most cost-effective. Identifying geographic areas where HIV incidence is highest has proven challenging because of the difficulty of identifying these areas using low-tech approaches that can be locally implemented. Population-based sero-surveys to identify empirically areas with high HIV incidence are rarely conducted due to cost, feasibility, loss to follow-up, and ethical concerns. The PLACE (Priorities for Local AIDS Control Efforts) method is a monitoring tool to identify high transmission areas and the specific sites within these areas where AIDS prevention programs should be focused.

The PLACE approach acknowledges that contextual factors are often associated with areas where HIV incidence is high. These include:

- Poverty and unemployment
- Drug abuse
- Crime
- Lack of health care services
- Alcohol consumption
- High population mobility
- Urbanization and rapid growth
- High male to female ratio.

Consequently, the first step in the PLACE method is to use available epidemiologic and contextual information to identify areas in a city or health district likely to have a higher incidence of HIV infection (Figure 3). Subsequent steps use rapid field methods to identify and characterize sites within these areas where people with many new sexual partners and/or where injecting drug users can be reached for prevention interventions. Characteristics of the people who socialize at these sites are obtained to confirm whether interventions at these sites would reach people with a high rate of new partner acquisition and/or people who inject drugs. Finally, the data are used to inform interventions in the area.

The method focuses on places where new sexual partnerships are formed and places where injection drug users can be reached because the pattern of new sexual and needle sharing partnerships in a community shapes its HIV epidemic. This method was developed at the University of North Carolina at Chapel Hill and pilot tested in 1999 in Cape Town, South Africa in collaboration with the University of Cape Town. USAID has supported development of the method through the MEASURE *Evaluation* Project.

Figure 3. The Five Steps of the PLACE Protocol.

Step	Objective
1	To identify areas in the city where HIV incidence is likely to be high
2	Within these areas, to identify specific sites where people meet new sexual partners and where IDUs socialize
3	To visit, map, and characterize these sites
4	To describe the characteristics of people socializing at sites
5	To use findings to inform interventions

Step 1: Identifying Areas for Assessment in Almaty

A. Objectives

The objective of the first step of the PLACE method is to identify areas of Almaty where HIV incidence is likely to be high and to determine which of these areas will be fully assessed in subsequent steps of the method.

B. Methods

The USAID regional strategy includes improving HIV surveillance. However, at the time that these assessments were conducted, HIV surveillance data were not available to identify particular areas in Almaty where HIV incidence was highest. Consequently, several approaches were taken to identify areas for assessment within Almaty.

1. 2002 Assessment

In Almaty, very little information was available about where new sexual partnerships are formed or where injecting drug users socialize. Consequently, two approaches were used to identify areas of the city, defined based on 71 “police units”, to be included in the assessment. The first approach used focus group discussions and in-depth interviews to identify units and for the second approach, units were randomly selected for inclusion in the study.

a. Focus groups and in-depth interviews to identify units

For the 2002 study, eight focus group discussions with people knowledgeable about sexual networks and injecting drug use in the city were held to identify high incidence areas in Almaty. These focus group discussions were composed of a wide range of people including commercial sex workers, drug injectors, physicians, taxi drivers, and youth. In-depth interviews were also conducted with police officers and others. The goal of these focus group discussions and in-depth interviews was to identify priority areas for intervention within the city including:

- areas where people go to meet new sexual partners;
- areas where sex workers solicit clients; and
- areas where injecting drug users can be found.

Areas were defined according to a set of geographic units. The geographic units were based on administrative divisions of the city that were well-known to participants so that they could readily identify areas and discuss differences between areas. Focus groups were asked to identify which of the 71 units had areas where people meet new sexual partners, where sex workers solicit clients, and/or where injecting drug users could be found. The 15 units most frequently mentioned in the focus groups and in-depth interviews were selected for implementation of the PLACE protocol.

b. Random selection of units

Because of the uncertainty about the validity of the focus group/in-depth interview method to identify the most important risk areas in the city, 15 additional units were selected randomly. The inclusion of random units in the study provided the opportunity to assess the extent to which the units selected by the focus groups had more sites where people meet new sexual partners, injection drug users socialize, or commercial sex workers solicit clients than the other units. To validate the extent to which the focus group method identified areas more likely to have a higher rate of HIV incidence, the characteristics of the units identified by focus groups were compared to the characteristics of the randomly selected units.

2. 2003 Assessment

For the 2003 study, an additional approach based on contextual characterization of the units was used to identify high-risk units of the city. Focus groups were not repeated. There were 75 units in the city, 71 units with defined borders and four units without borders.

a. Selection of units based on contextual characterization

To identify high-risk areas of the city, units were ranked based on certain contextual criteria used to characterize them. These criteria were based on contextual factors including population density of the unit, traffic and number of busy roads in the unit, crime, number of cafes and bars (entertainment), and poverty. Population of the units, traffic, crime, and number of cafes and restaurants were estimated by the Center for Study of Public Opinion (CIOM) staff using a map of the city. Poverty was estimated using the average price per square meter of property in the unit. Each unit was assigned a score: high, medium, or low, for each of these criteria. The overall score for each unit was calculated by summing the individual scores for each criterion. The units were then sorted by overall score and the twenty units with the highest scores were selected for inclusion of the study.

b. Random selection of units

The same fifteen random units from the 2002 study were also included in the 2003 study to provide a comparison group for the 2002 and follow-up assessments and to allow for estimation of the size of risk populations within the city.

C. Coordination

The MEASURE *Evaluation* Project provided technical assistance for the 2002 and 2003 assessments including questionnaire and protocol development and funding through USAID/Central Asia. The director of the Center for the Study of Public Opinion in Almaty, Kazakhstan served as the local principal investigator. A workshop was held in Almaty in June 2003 to disseminate the results of the 2002 study back to USAID, PSI, Soros Foundation, UNAIDS, the City AIDS Center, and other organizations currently or planning to implement interventions in Almaty.

D. Training and Instrument Adaptation

The PLACE protocol was adapted to local needs and circumstances. The questionnaires were modified to target four groups of people including a representative sample of individuals socializing at the sites, commercial sex workers and their clients, injection drug users socializing at the sites, and youth. The study instruments were translated into Russian and back-translated into English. Interviewers were selected based on their social skills, knowledge of the layout of the areas, willingness to visit sites during evening and weekend hours, and their capacity to interview professional people as well as street youth, sex workers, and injection drug users.

Comments by local intervention groups from the results feedback session for the 2002 study about questionnaire improvement and inclusion of additional questions useful for intervention groups were incorporated into the questionnaires for the 2003 study. These additional questions will enable local intervention groups to monitor program coverage.

One day of interviewer training was performed prior to each new phase of the study and included presentations on the rationale, objective, and methods for the study. Training also included instructions regarding how to ask questions, record responses, and handle problems in the field, discussions on ethics, and a thorough review and discussion of each question to be asked of interviewees.

The Institutional Review Board at the University of North Carolina at Chapel Hill's School of Public Health approved the study protocol and served as oversight body.

E. Results

2002 Assessment

Fifteen units were selected through focus group discussions and in-depth interviews and fifteen units were selected randomly. There were five overlapping units included in both the focus group and randomly selected samples resulting in a total of twenty-five units selected as assessment areas for the 2002 study.

2003 Assessment

Twenty units were selected based on contextual factors used to characterize the units. The fifteen random units from the 2002 assessment were also included in the 2003 assessment. There were six overlapping units included in both the contextual sample and the random sample of units resulting in a total of twenty-nine units selected as assessment areas for the 2003 study.

Twenty units overlapped between the 2002 and 2003 assessments, fifteen units included in the random sample and five units selected for the special sample in both 2002 and 2003. Of the 34 units included in either or both phases of the study, five units were included in only the 2002 study and nine units were included in only the 2003 study.

Step 2: Where Do People Meet New Sexual Partners and/or Injection Drug Users Socialize? Findings from Key Informant Interviews

A. Objectives

The objective of the key informant interviews is to identify sites within the priority areas where

- People meet new sexual partners
- Injection drug users (IDUs) socialize
- Sex workers solicit clients

A sexual network site is defined as a place or event in an area where people with high rates of partner acquisition meet to form new sexual partnerships. A site can be a bar, brothel, disco, street corner, or alley. New partnerships are the focus because individuals with high rates of new partner acquisition are more likely to transmit infection and because newly acquired infection is more infectious. HIV can also be transmitted through a network of injection drug users who share needles. Thus, sites where IDUs socialize and can be reached for prevention are also a focus of this method. Identification of all sites in a study area, not just traditional ‘hot spots’ is encouraged.

B. Methods to Identify Sites

Key informant interviewing is the primary method to identify all sites where residents of the study area meet new sexual partners and where injection drug users socialize. The local principal investigator and field coordinator decided on a target number of key informant interviews and developed a strategy to identify key informants. Individuals such as taxi drivers, market vendors, bar managers, unemployed youth, and police were approached for an interview at a time that seemed mutually convenient. Only people that were below the age of 18 were ineligible to be interviewed as key informants.

Potential key informants were approached by the interviewers who explained the purpose of the study and requested verbal informed consent. After recording basic demographic information about the key informant such as age, residence, and type of key informant, interviewers asked if injection drug use and commercial sex work was common in the area where the interview was being performed. Finally, the key informants were asked to name sites where people meet new sexual partners in the area, where IDUs socialize, and where sex workers solicit clients. Information collected about each site included its name, type of site, geographic code and specific address, and whether people meet new partners and/or IDUs or used syringes can be found at the site. During the 2002 study, key informants were asked to prioritize sites based on activities at the site such as people meeting new sexual partners, commercial sex work, and injection drug use. During the 2003 study, rather than prioritizing sites based on activities at the site, location of the site relative to the location of the key informant interview was recorded. Key informants were asked whether the site was a ten minute walk or further from the site of the interview.

Key informant interviews were continued until the target number of interviews had been achieved. A target of 1200 interviews was set for the 2002 study and 1000 key informant interviews for the 2003 study. The number of interviews was divided evenly among the units of the city included in the study.

C. Results

Key informant interviews were completed in six days during the 2002 study and ten days during the 2003 study. The target number of interviews was reached in both studies. During the 2002 study there were 4189 site reports yielding 848 unique sites (Table 1). During the 2003 study there were 4438 sites yielding 1015 unique sites. An average 3.5 sites were named per key informant during the 2002 study and an average of 4.4 sites were named per key informant during the 2003 study.

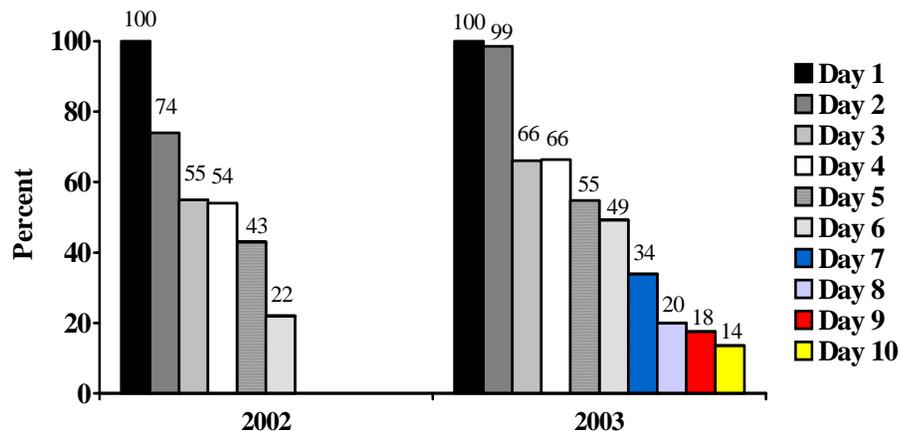
Table 1. Summary of key informant field work

	2002	2003
Days of key informant interviewing	6	10
Number of interviewers	20	20
Total key informant interviews	1200	1000
Number of refusals for interviews	*	267
Number of key informant reports	4189	4438
Number of sites reported inside interview unit (2002) / within a 10 minute walk of location of interview (2003)	1656	1212
Number of sites reported outside unit (2002) / further than a 10 minute walk (2003)	2533	3226
Number of unique sites reported	848	1015

* Incomplete recording of refusals in 2002

Key informant interviews were conducted until the target number of interviews was achieved. Even though the number of people interviewed remained constant each day, the number of new sites reported each day decreased throughout the interviewing period (Figure 4). On the last day of interviews, less than a fourth of the sites reported were new sites during the 2002 study and less than 15% were new during the 2003 study.

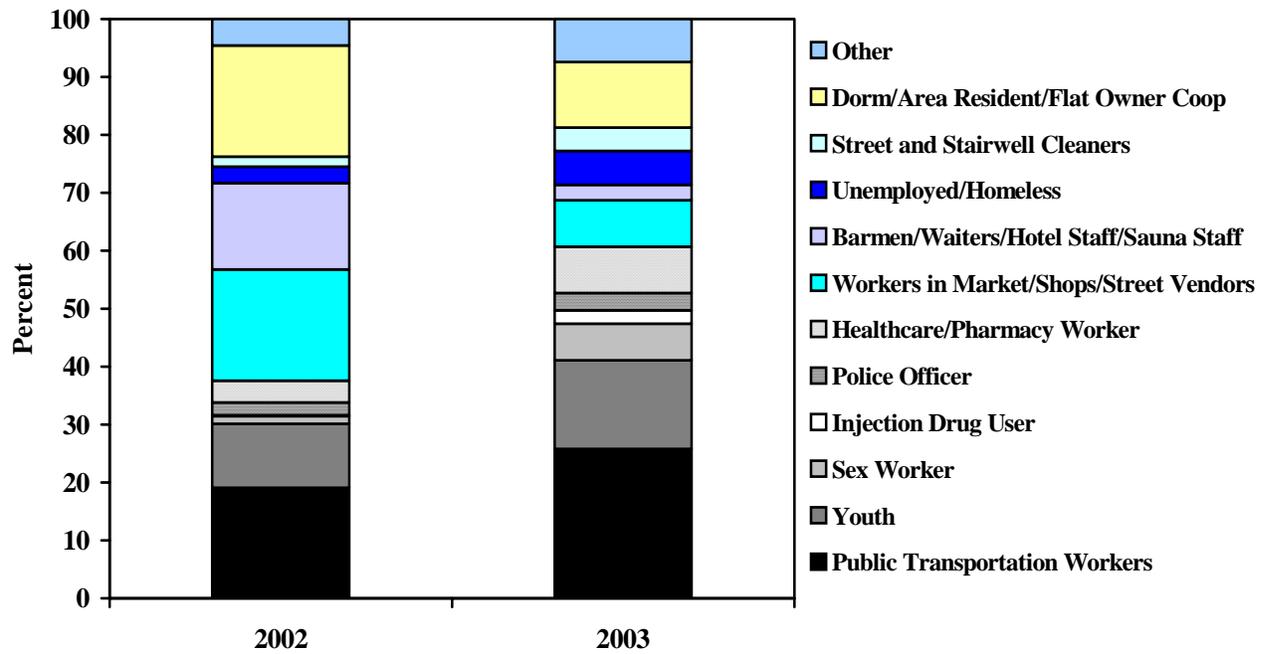
Figure 4. Proportion of sites reported during each day of key informant interviews that were reported for the first time.



Characteristics of Key Informants

Half (51%) of the key informants interviewed in 2002 and 60% interviewed during the 2003 study were men. Individuals of all ages were interviewed.

Figure 5. Distribution of key informants by type.



Taxi drivers, youth, and residents of the area were the most numerous types of key informants in both the 2002 and 2003 studies but a wide variety of individuals were interviewed during each study (Figure 5).

Most Productive Key Informants

Commercial sex workers, police officers, and youth were the most productive key informants during the 2002 study. On average, these individuals named over four sites where either people meet new sexual partners, commercial sex workers solicit clients, injection drug users socialize, and/or used syringes can be found. During the 2003 study, taxi drivers, commercial sex workers and clients, IDUs, and police officers were the most productive key informants. On average, these individuals named over five sites where the activities of interest occur.

During the 2002 study, the most productive key informants for naming sites inside the interview unit were individuals who lived and worked within the area. These individuals included police officers, flat owners coop personnel, and street and stairwell cleaners. Transportation workers, including taxi drivers and public transportation drivers, commercial sex workers, and youth were some of the most productive key informants for naming sites outside the interview unit. On average, key informants named more sites outside the unit in which they were interviewed than inside (1.4 vs. 2.1, respectively).

For the 2003 study, key informants were asked to distinguish between sites that were within a ten minute walk of the place of interview and sites that were further away. As in the 2002 study, individuals who lived and worked in the area were the most productive key informants for naming sites within a ten minute walk of the place of the interview. These individuals include flat owners coop personnel, street and stairwell cleaners, street vendors and sellers and workers in the market, and IDUs. The most productive key informants for naming sites further than a ten minute walk from the place of interview include taxi and public transportation drivers, sex workers and clients, and police officers. On average, key informants named more sites further than a ten minute walk from where they were interviewed than within a ten minute walk (1.2 vs. 3.2, respectively).

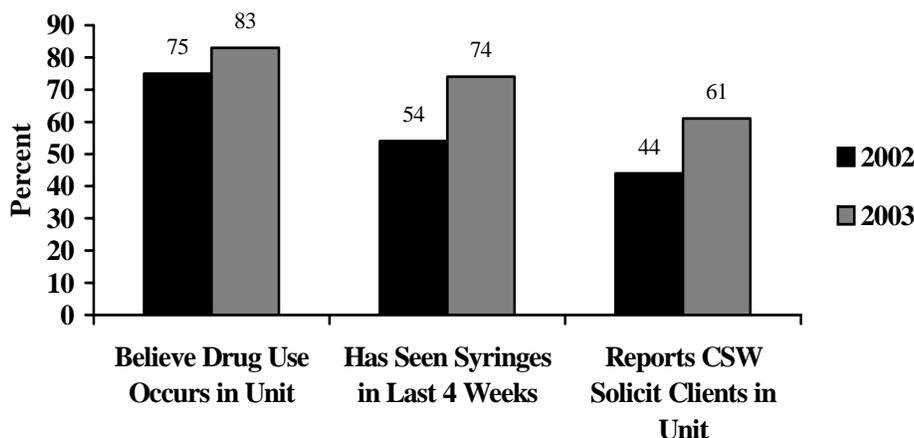
Key Informant Opinion of Drug Use and Sex Work in the Unit

Key informants from the 2003 study were slightly more likely than key informants in the 2002 study to believe that injection drug use and commercial sex work occurred in the unit of interview. However, both injection drug use and commercial sex work within the interview unit were frequently reported by key informants at in 2002 and 2003.

The majority of informants in both years reported that injection drug use occurred in the unit in which they were interviewed (Figure 6). Approximately half of key informants during both the 2002 and 2003 studies reported seeing syringes lying around in the area.

The proportion of key informants who believed that commercial sex work occurred in the unit of interview was 44% in the 2002 study and 61% in the 2003 study. Key informants were much more likely to report drug use within the unit than commercial sex work.

Figure 6. Proportion of key informants who reported injection drug use and commercial sex work within unit of interview.

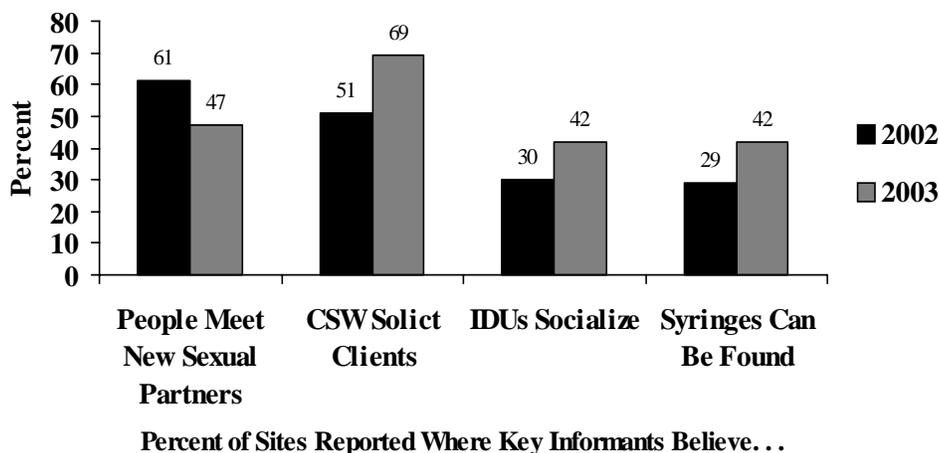


Sites Where People Meet Sexual Partners and Injection Drug Users Socialize

Key informants classified each site that they reported according to whether: (1) people meet new sexual partners at the site, (2) IDUs socialize at the site, (3) syringes are lying on the ground near the site, and/or (4) commercial sex workers solicit clients at the site. Key informants during both the 2002 and 2003 studies named more sites where people meet new sexual partners, commercial sex workers solicit customers than sites where IDUs socialize, and/or syringes can be found lying on the ground

(Figure 7). Compared to 2002 key informants, key informants during the 2003 study named a smaller percentage of sites where people meet new sexual partners and a higher percentage of sites where commercial sex work occurs, IDUs socialize, and syringes are lying on the ground.

Figure 7. Proportion of sites named by key informants that were identified as high-risk sites.



Commercial sex workers, barmen and waiters, public transportation drivers, and youth in 2002 and commercial sex workers and clients, NGO staff, and police officers at follow-up were some of the most productive key informants for identifying sites where people meet new sexual partners. Commercial sex workers and clients and police officers were the most productive key informants during both the 2002 and 2003 studies for identifying sites where commercial sex workers solicit clients. The most productive key informants for identifying where IDUs socialize include flat owners coop personnel and homeless during the 2002 assessment and IDUs, clients of CSWs, police officers, and flat owners coop personnel during the 2003 assessment. Street and stairwell cleaners, homeless, unemployed, and flat owners coop personnel were the most productive key informants in 2002 for identifying sites where syringes were lying on the ground and IDUs, clients of CSWs, homeless, flat owners coop personnel, and police officers were most productive for identifying these types of sites during the 2003 study.

Comparison of Focus Group and Randomly Selected Units in 2002

During the 2002 study, key informant interviews were conducted in 25 units. Fifteen units were identified by focus groups and fifteen were randomly selected from the list of 71 units. The fifteen randomly selected units included five units identified by the focus groups. In the fifteen focus group units, an average of 173.9 site reports per unit were recorded including an average of 75.3 sites reports for sites located within the interview unit itself. Slightly fewer total site reports per unit and significantly fewer reports for sites within the interview unit were reported in the fifteen randomly selected sites. In these fifteen randomly selected units, an average of 164.4 sites were named by key informants in each unit but only an average of 48.0 sites were located in the randomly selected interview unit.

Comparison of Contextually Selected and Randomly Selected Units in 2003

During the 2003 study, key informant interviews were conducted in 29 units. Twenty units were identified using contextual criteria. The fifteen units that were randomly selected in 2002 from a list of

71 units were also included in the 2003 study. The fifteen randomly selected units included six units identified using the contextual criteria. In the twenty contextually selected units, an average of 125.1 site reports per unit were recorded including an average of 43.3 sites reports for sites located within a ten minute walk of the location of the interview. On average, a fewer number of total site reports per unit but a similar number of site reports per unit for sites within a ten minute walk were reported in the fifteen randomly selected sites compared to the contextually selected units. In these fifteen randomly selected units, an average of 93.9 sites were named by key informants in each unit but only an average of 41.6 sites were within a ten minute walk of the location of the interview.

Comparison of Units in the 2002 and 2003 Studies

During the 2002 study, key informants named 857 unique sites, an average of 34.3 unique sites per unit. During the 2003 study, 1,015 unique sites were named by key informants, an average of 35 sites per unit. There were 341 unique sites named by key informants during both the 2002 and 2003 assessments, 516 unique sites named only during 2002, and 674 sites named only during 2003 for a total of 1,531 unique sites named during both the 2002 and 2003 assessments.

There were twenty units in common between the 2002 and 2003 studies, fifteen random units and five other units. A total of 766 unique sites were reported in these 20 units, 200 of which were reported during both years, 293 which were reported in 2002 only and 273 which were reported only in 2003. There was no difference in the average number of sites per unit named in 2002, 24.7, and in 2003, 23.7.

Comparison of Random Units in the 2002 and 2003

The same fifteen random units were included in the 2002 and 2003 studies. Similar number of sites was reported by key informant in these units both years, 333 unique sites in 2002 and 337 in 2003. Of these sites, 139 sites were named both years, 198 were named in 2003 only and 194 were named in 2002 only for a total of 531 unique sites reported in the random units. Random units yielded approximately the same average numbers of sites per unit in 2002 and 2003.

Step 3: What Are the Characteristics of Sites Where People Meet New Sexual Partners and/or Injection Drug Users Socialize? Findings from Interviews at Sites

A. Objectives

The objectives of Step 3 are to verify the existence of sites reported by key informants and describe the characteristics of these sites and of the people who socialize at them.

B. Methods

In this phase of the fieldwork, interviewers visited sites reported by key informants and interviewed a site representative who was knowledgeable about the site (such as the site manager or owner) to obtain characteristics of the site important for AIDS prevention. The questions did not require knowledge of the business operations at the site. If no one was available for interview during the first visit, the site was re-visited. The criteria for identifying a suitable respondent were broad to prevent deductive disclosure of identity and to limit the number of re-visits. Verbal consent for an anonymous interview was obtained for each completed interview. Respondents were asked about the following:

- Name of the site and number of years in operation
- Types of activities occurring on site
- Estimated number of clients at peak times
- Patron characteristics including age, gender, residence, and employment status
- Whether people meet new sexual partners at the site
- Whether CSWs solicit customers at the site
- Whether IDUs socialize at the site or used syringes can be found
- Extent of AIDS/STD prevention activities onsite including condoms and posters
- Willingness to sell condoms.

Teams of two to three interviewers were assigned to each unit of the city and given a list of sites in the unit. The criteria for determining which sites to verify were developed. Exclusion criteria were developed due to the vast number of sites reported which made it not feasible to visit every site named by key informants. In addition, we expected that little benefit would be gained by visiting sites such as stairwells and rooftops mentioned by very few people. These sites are unlikely candidates for outreach efforts.

In 2002, all sites mentioned five or more times by key informants, regardless of type or location, were visited. Sites named fewer than five times by key informants were also verified unless they were a flat, basement, roof, or stairwell. Sites mentioned less than five times located outside the study units were excluded.

Similar criteria were used to select sites to verify during the 2003 study. However, because there were more sites named during the 2003 study, additional exclusion criteria were developed. All sites mentioned five or more times by key informants, regardless of type or location, were visited. Sites

named fewer than five times by key informants were also verified if they were located in one of the twenty-nine study units and were not a flat, basement, roof, stairwell, or classified as site type “other”. Sites classified as other that were named more than three times and located in one of the twenty-nine study units were also verified. Finally, sites that were identified as overlap sites during the 2002 study that were not named by key informants during the 2003 assessment or did not satisfy the above selection criteria for verification were added to the list of sites for verification. Overlap sites were defined in 2002 as sites where people meet new sexual partners, commercial sex workers solicit clients, injection drug users socialize, and at least some youth are present. These overlap sites were included in 2003 so that the activities and behaviors at these sites can be monitored over time.

Maps of sites were produced for both the 2002 and 2003 assessments. All verified sites were identified using coordinates obtained by a Global Positioning System (GPS) unit.

B. Results

During the 2002 study, site verification was completed in six days by eighteen interviewers (Table 2). During the 2003 study, 18 interviewers completed site verification in 10 days.

Many sites reported by key informants were not verified because they did not meet the criteria for being visited, e.g., only one person mentioned the site and it was a stairwell or roof. Approximately half of the sites named during the 2002 and 2003 studies (48% and 56% respectively) were excluded from site verification. An additional 35 priority sites from the 2002 assessment were also selected for verification in 2003.

Table 2. Summary of site verification field work

	2002	2003
Days of Site Verification	6	10
Number of Interviewers	18	18
Outcome of Site Verification Visits		
Number of Sites Selected for Site Verification	445	491
Site Found and Person Interviewed	439	423
Site Found and Person Refused Interview	6	13
Site Not Found: Insufficient or Incorrect Address	**	20
Site Temporarily Closed	**	6
Site Permanently Closed	**	11
Duplicate Site	**	18
Sites Excluded from Verification	412	524
Total	857	1,015

**Incomplete recording of information about sites that were closed, not found, or duplicates in 2002

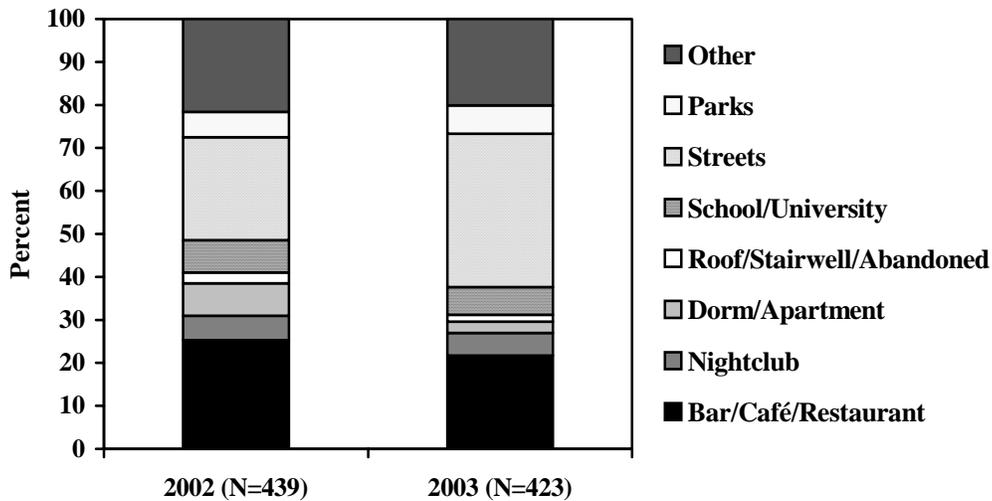
During the 2002 study, approximately 1% of site representatives declined an interview. During the 2003 assessment, 3% of site representative declined an interview. Additionally, 4% of sites selected for site verification could not be found due to an insufficient or incorrect address, 1% of sites were temporarily closed, 2% were permanently closed, and 4% of sites were duplicates of sites already verified. At total of 423 sites were verified during the 2003 study, 86% of sites that were selected for verification.

The remainder of this section of the report describes the sites that were visited and verified.

Site Types and Non-Sex Activities at Sites

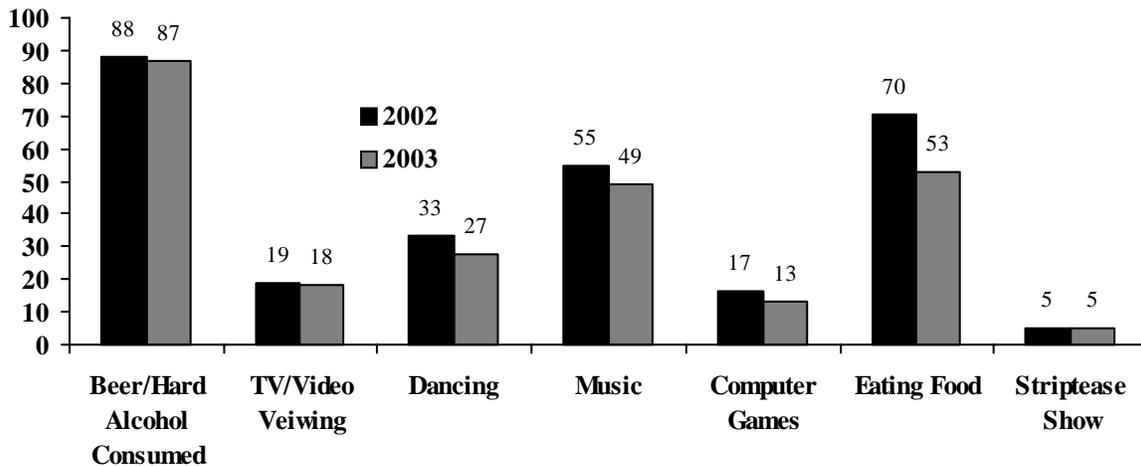
The most common types of sites named as places where people meet new sexual partners and/or IDUs socialize were bars, cafés, and restaurants and sections of streets and street corners (Figure 8). Approximately 56% of sites in 2002 and 68% of sites in 2003 had been in operation for more than two years including almost one fifth in 2002 and one quarter in 2003 that had been in operation for over ten years. Most sites reported being busy every night of the week with Friday and Saturday as their busiest nights. Winter was the least busy season.

Figure 8. Type of site.



The sites visited for site verification interviews during the 2002 and 2003 assessments had similar distributions of onsite activities (Figure 9). Beer and/or hard alcohol were consumed at the majority of sites. Other popular activities at these sites include eating food and listening to music. Approximately one third of the sites had dancing.

Figure 9. On-site activities.



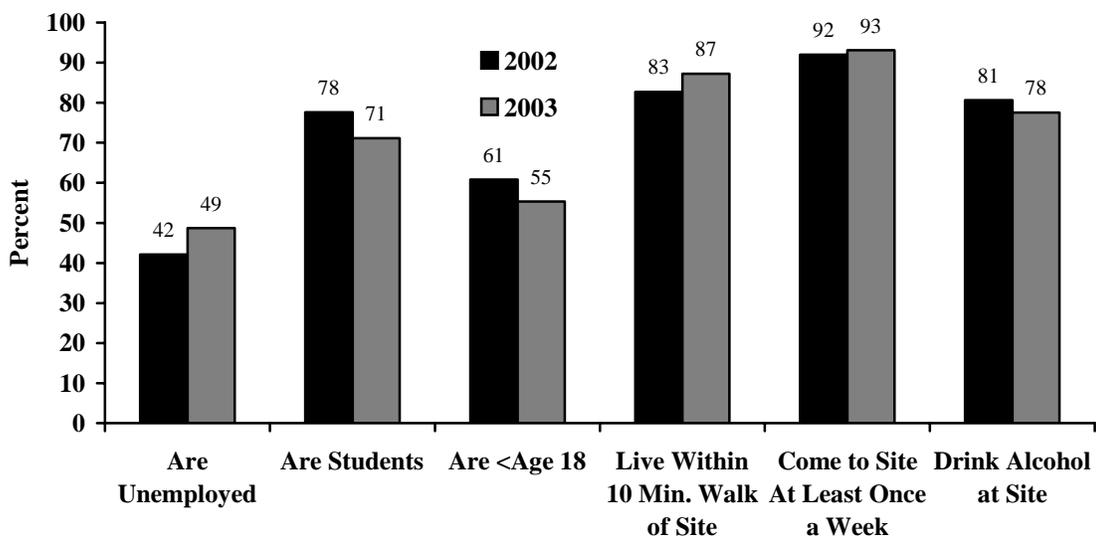
Characteristics of Site Patrons

A high proportion of sites during both 2002 and 2003 have at least some patrons who live within a ten minute walk of the sites, visit the site at least once a week, are students, and drink alcohol while at the site (Figure 10). Men and women who visit the sites have similar characteristics.

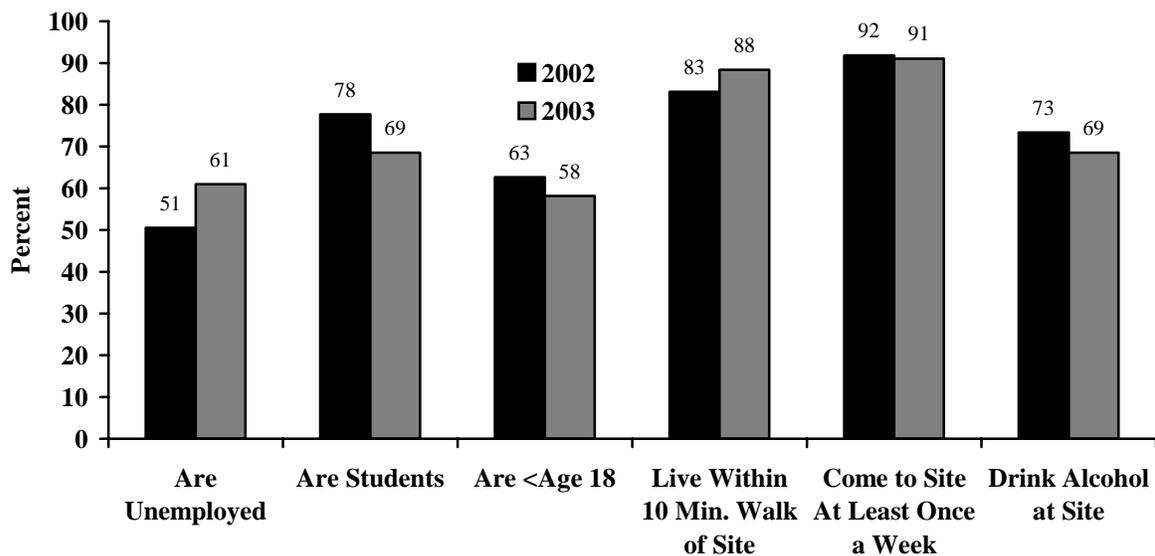
During the 2003 study, site representatives were asked about how patrons came to the sites. Approximately three quarters of sites had at least some patrons who came to the site by private car or taxi and approximately two thirds had at least some patrons who came by public transportation.

Figure 10. Characteristics of site patrons.

Proportion of sites with at least some male patrons who...



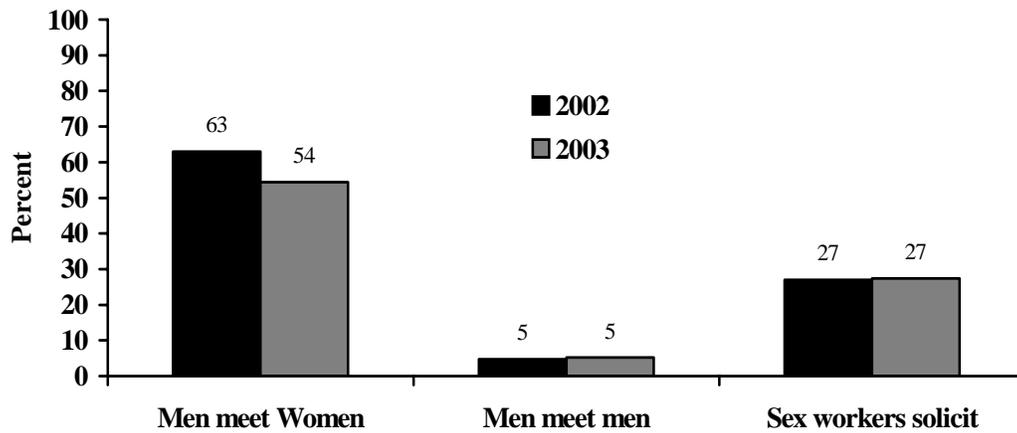
Proportion of sites with at least some female patrons who...



Sexual Partnerships

A knowledgeable person at each site was asked whether men and women meet new sexual partners at the site. The responses were often in the affirmative. The proportion of sites where men meet new female sexual partners was 63% in 2002 and 54% in 2003 (Figure 11). Gay partnerships were reported infrequently at approximately 5% of sites. Commercial sex workers solicited customers at approximately 27% of sites and at approximately 10% of sites, someone at the site help facilitate partnerships. During the 2003 assessment, site staff was reported to meet new sexual partners at 12% of sites.

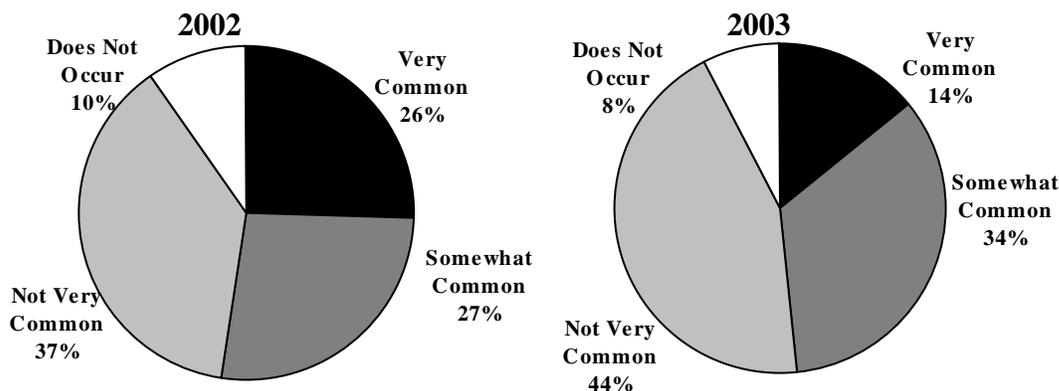
Figure 11. Sexual partnership formation and IDUs socializing at sites.



Injection Drug Use

Approximately half of the respondents during both the 2002 and 2003 assessments thought that injection drug use in the area was very common or somewhat common (Figure 12). Less than 10% of respondents thought that injection does not occur in the area.

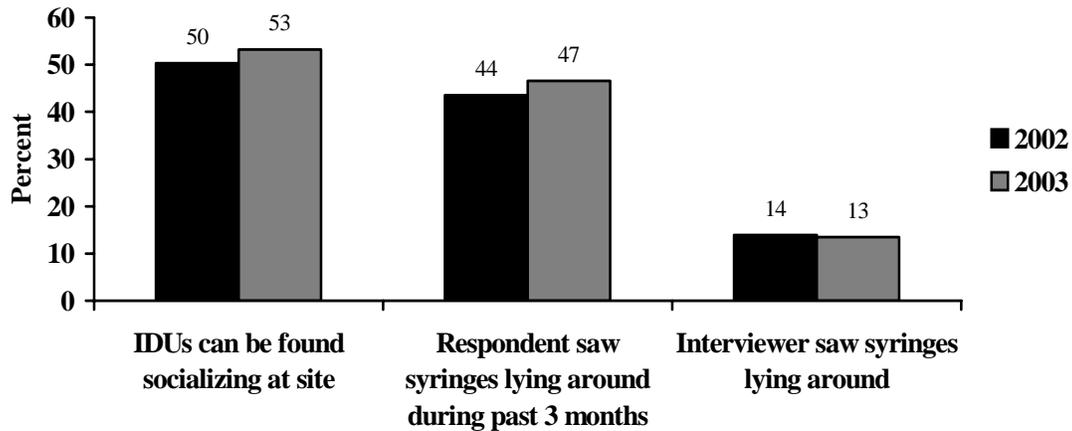
Figure 12. Perception of injection drug use in area.



This perception that drug use was common in the area was also apparent in other site characteristics related to injection drug use. Approximately half of respondents during the 2002 and 2003 assessments reported that injection drug users could be found at their site (Figure 13). Furthermore, of those who replied that IDUs could be found socializing at their site, the majority responded that the site

had been a place where drug injectors could be found for at least one year prior to the interview and often longer. Evidence of injection drug use in or around the sites was visible. Respondents who reported seeing used syringes lying around inside or outside the site in the past three months was approximately 44%. Interviewers also reported similar evidence of injection drug use. Used syringes were observed by interviewers at approximately 14% sites during both the 2002 and 2003 assessments.

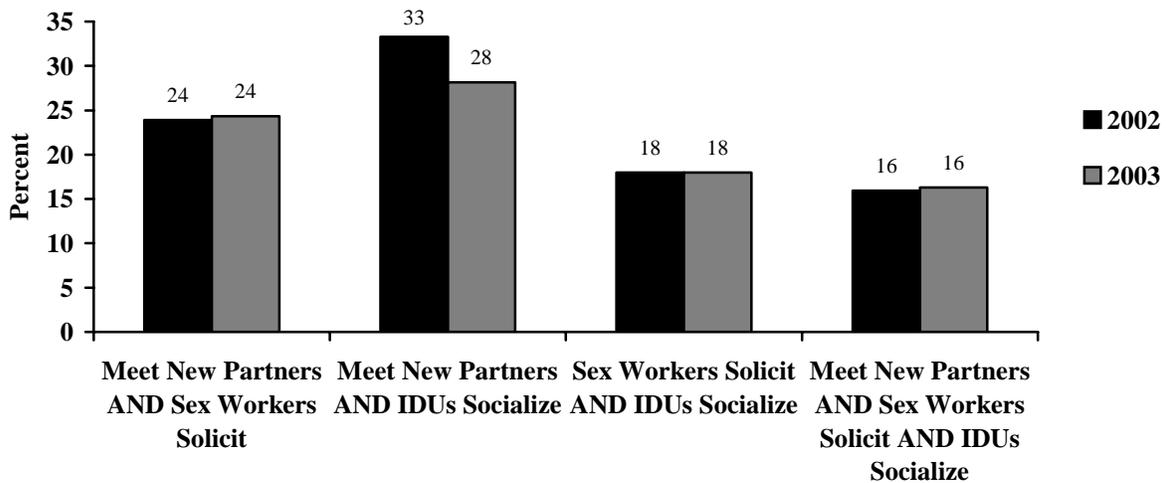
Figure 13. Injection drug use around sites.



Overlap of High-Risk Populations at Sites

Site respondents reported considerable overlap between high-risk groups during both the 2002 and 2003 assessments (Figure 14). The greatest overlap between high-risk populations occurred at sites where people meet new sexual partners and injection drug users socialize. Approximately 30% of site respondents reported that people meet new sexual partners and drug injectors socialize at the site. At approximately 15% of sites, respondents reported that people meet new sexual partners at the site *and* commercial sex workers solicit clients *and* IDUs social at the site.

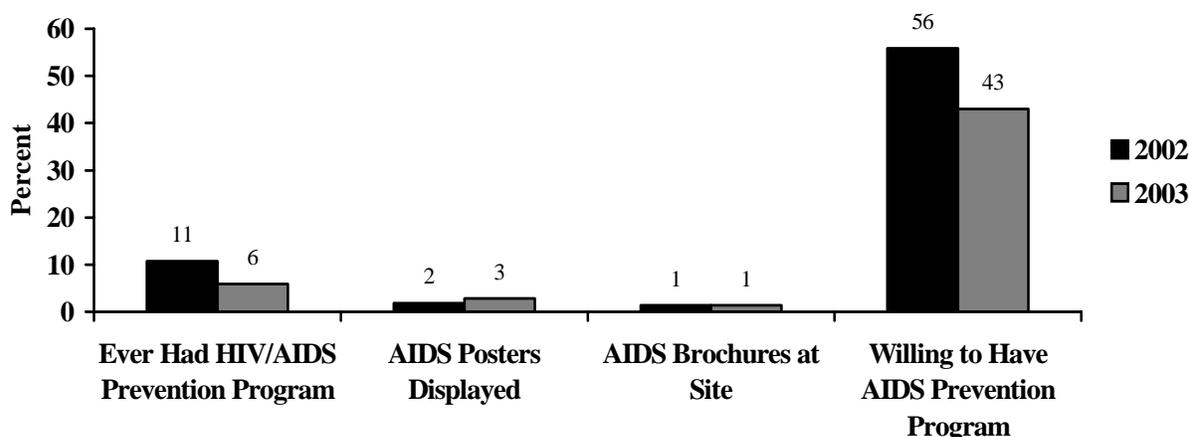
Figure 14. Overlap of high-risk populations at sites.



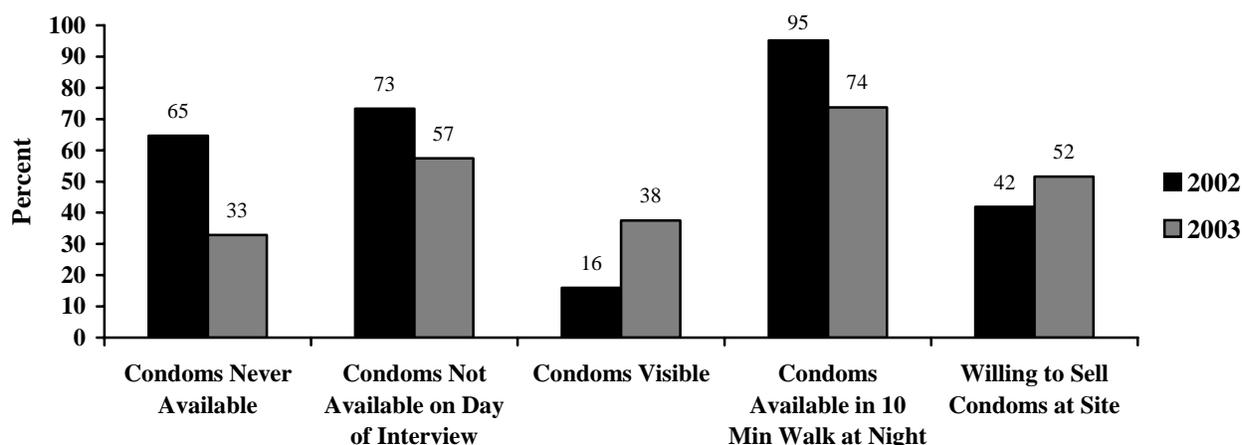
AIDS Prevention Activities

Site-based AIDS prevention activities were rare (Figure 15). The proportion of sites that ever had an HIV/AIDS prevention activity at the site was 11% in 2002 and 6% in 2003 assessment. During the 2003 assessment, sites respondents were asked about the type of prevention activities at the site. Approximately 2% of sites had lectures and seminars, pamphlets and leaflets, and/or posters. Distribution of condoms and syringes occurred at less than 1% of sites. During the 2002 and 2003 assessments, AIDS posters were displayed at approximately 2% of sites and AIDS brochures were available at only 1% of sites. During the 2002 assessment, approximately 56% of site respondents said that they were willing to have an AIDS prevention program at the site. During the 2003 assessment, a person who had authority to talk to intervention groups on behalf of the site, such as a manager or owner, was identified at each site and asked if he or she was willing to talk to a person from a local AIDS prevention program about including the site in a new AIDS prevention program in the area. Such a person was identified at 165 of the verified sites and 43% of these individuals were willing to talk to local intervention groups about having an AIDS prevention program at the site.

Figure 15. AIDS educational activities at the sites.



Condom availability increased significantly between the 2002 and 2003 assessments (Figure 16). During the 2002 study, over 60% of sites never had condoms available in the last 12 months, over three quarters of sites did not have condoms available on the day of the site verification interview, and over 80% of sites did not have condoms visible at the site. However, at 88% of sites, it was possible for someone to find a condom within ten minutes of leaving the site at night. During the 2003 assessment, condoms were much more likely to have been available at sites during the past 12 months, to be available on the day of the interview, and to be visible compared to the 2002 assessment. Condoms were always available in the past 12 months at 43% of sites included in the 2003 study compared to only 29% of sites in the 2002 study. Interviewers asked to see and saw a condom at over twice as many sites during the 2003 assessment compared to the 2002 assessment (38% vs. 18% respectively). Multiple brands of condoms were often available. The brands most often available at study sites during the 2003 study were Durex (24%), Favorite (17%), and Desire (14%). The proportion of site representatives willing to sell condoms at their site increased from 42% at the 2002 assessment to 52% at the 2003 assessment.

Figure 16. Condom availability at sites.

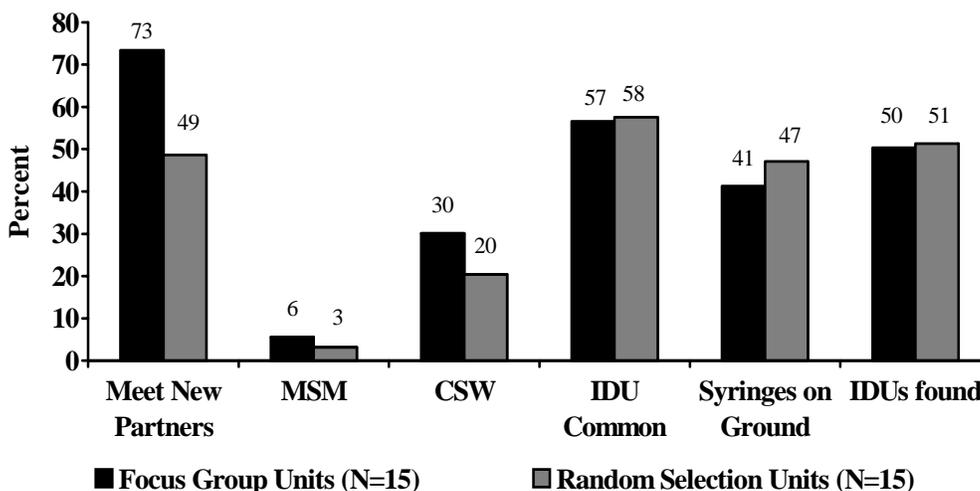
Comparison of Sites in Focus Group Units and Randomly Selected Units in 2002

The characteristics of sites in the units selected by focus groups and the sites in units selected randomly were compared. There were fifteen focus group units and fifteen randomly selected units with five overlapping units that were in both samples. There were 252 sites verified in the focus group units and 191 verified sites in the randomly selected units. Focus group units contained a higher proportion of sites where people meet new sexual partners and where commercial sex workers solicit clients compared to sites in the random units whereas the proportion of sites where injection drug users socialize is not that different (Figure 17). In the fifteen focus group units, 73% of site respondents reported that men and women meet new partners at the site compared to only 49% of sites in the randomly selected units.

Similarly, 6% of sites in the focus group units reported that men meet male partners at the sites and 30% reported that commercial sex workers solicit clients compared to 3% and 20% respectively in randomly selected units.

Injection drug use behavior, however, did not vary much between focus group and random units. In the focus group units, 57% of site verification respondents reported that injection drug use was very or somewhat common in the area compared to 58% in the random units. Similarly, in the focus group units, 41% of site verification respondents reported seeing used syringes lying around inside or outside the site in the last three months and 50% reported that injection drug users can be found at the site compared to 47% and 51%, respectively in the fifteen randomly selected units.

Based on these results, it was decided that the focus groups were more effective in identifying units with individuals with high-risk behaviors than if these units were randomly selected.

Figure 17. Comparison of sites in focus group and randomly selected units, 2002.

Comparison of Contextually Selected and Randomly Selected Units

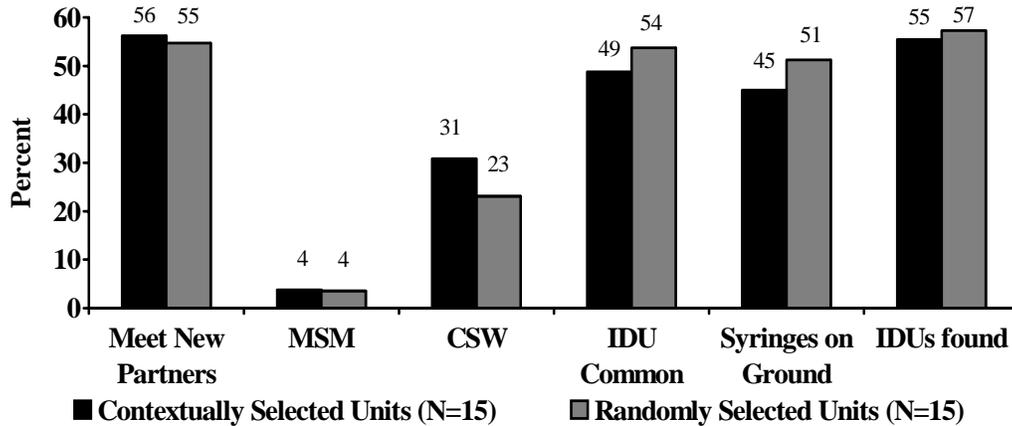
The characteristics of sites in the units selected using contextual criteria and the sites in units selected randomly were compared. There were twenty contextually selected units and fifteen randomly selected units with six overlapping units that were included in both samples. There were 240 sites verified in the focus group units and 199 verified sites in the randomly selected units. Contextually selected units contained a higher proportion of sites where commercial sex workers solicit clients compared to the random units. Approximately 30% of sites in contextually selected units reported that commercial sex workers solicit clients at the sites compared to 23% of sites in randomly selected units. However, the proportion of sites where people meet new sexual partners or injection drug users socialize is not that different (Figure 18). Approximately 56% of sites in the contextually selected units and 54% of sites in randomly selected units reported that men and women meet new partners at the site. In both the contextually and randomly selected units, 4% of sites reported that men meet male partners at the sites.

Similarly, injection drug use behavior did not vary much between sites in contextually and randomly selected units. In the contextually selected units, 49% of site verification respondents reported that injection drug use was very or somewhat common in the unit, 45% reported seeing used syringes lying around inside or outside the site in the last three months, and 55% reported that injection drug users can be found at the site compared to 54%, 51%, and 57%, respectively in the randomly selected units.

Comparison of 2002 and 2003 Assessments

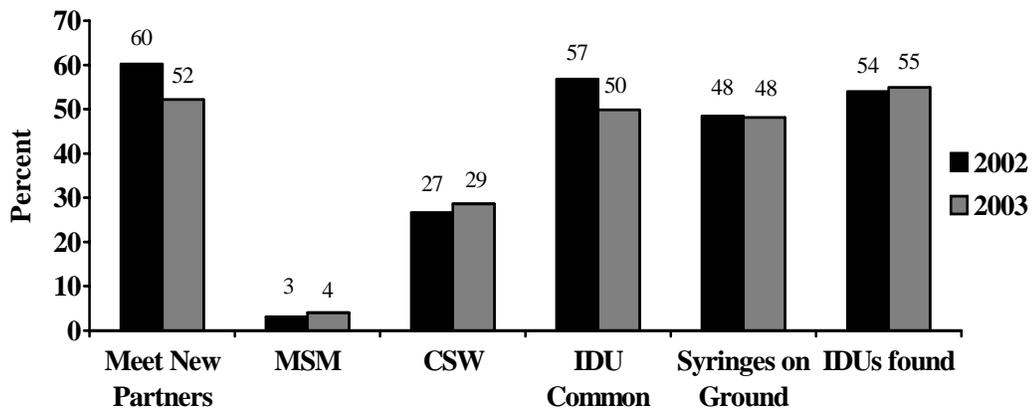
Twenty units were selected in common for the 2002 and 2003 studies. The same fifteen random units were included in both assessments. Seven units identified by focus groups during the 2002 study were also selected using the contextual criteria during the 2003 study. Two of these units overlapped with the random units resulting in twenty units in common between the 2002 and 2003 studies.

Figure 18. Comparison of sites in contextually and randomly selected units, 2003.



There were 289 sites verified in these units in the 2002 study and 297 were verified sites in these units during the 2003 study. In 2002, the proportion of sites where people meet new sexual partners and the proportion of respondents who that the injection drug use was very or somewhat common was slightly higher than during the 2002 assessment (60% vs. 52% and 57% vs. 50%, respectively) (Figure 19). The proportion of sites were men meet male partners, commercial sex workers solicit clients, used syringes can be found, and injection drug users socialize is similar during both the 2002 and 2003 assessments. Men meet male sexual partners at approximately 3% of sites in these units. Commercial sex workers solicit clients at slightly over one quarter of the sites. Used syringes can be found on the ground at 48% of sites and IDUs can be found at almost 55% of sites in these units.

Figure 19. Comparison of sites in units included in both 2002 and 2003 studies.



There were 178 sites where site verification interviews were performed in 2002 and 2003. There was no difference in the reported behaviors at these sites from 2002 to 2003 except an increase in commercial sex work, which increased from 63% in 2002 to 78% in 2003.

Step 4: What Are the Characteristics of People Who Socialize at Sites Where People Meet New Sexual Partners and/or Injection Drug Users Socialize? Findings from Interviews with People Socializing at Sites

A. Objective

The objective of this step is to describe the characteristics and behaviors of individuals socializing at the sites. The sampling strategy was designed to provide estimates of a representative sample of people socializing at sites. In addition, because of the importance of describing the characteristics of injecting drug users, additional samples of injection drug users were interviewed as necessary to achieve a sufficient number of such respondents.

B. Methods

A sample of verified sites was selected and a sample of individuals socializing at these sites was interviewed. This step is the only one in which self-reported information was gathered from interviewees.

1. Selecting sites where socializing individuals were interviewed

A sample of sites was selected at which to perform interviews with socializing individuals. The objective of the sampling strategy was to obtain a sufficiently precise estimate of the proportion of individuals socializing at the sites who reported meeting a new sexual partner at the site or who inject drugs. The final selection of sites could only occur after the key informant interviews and site visits were conducted. The resulting list of reported sites was compiled into a sampling frame.

A four step process was used to select sites for individual interviews.

- First, a target number of interviews to be performed was selected such that it exceeded the minimum requirement to obtain precise estimates of the key variables and assured that 200 IDUs and 200 commercial sex workers would be interviewed in the process. For both the 2002 and 2003 assessments, a target number of 2,100 interviews was selected.
- Next, a strategy for selecting the number of people to be interviewed at each site was determined according to site size. Ten people were interviewed at small sites (<20 men socializing at a busy day (2002) or busy time (2003)), 20 people at medium-sized sites (20 to 49 men socializing at a busy day (2002) or busy time (2003)), and 30 people at large sites (50 or more men socializing at a busy day (2002) or busy time (2003)).
- Next, a random sample of sites was selected for individual interviews from the list of verified sites.

- Finally, the list of randomly selected sites was reviewed and a supplemental list of sites was identified from the list of those not selected. The supplemental sites were those sites mentioned by 15 or more key informants that were not included in the random sample. These sites were considered important potential intervention sites.

This process permits estimates of a representative sample of the entire population of people who socialize at sites as well as estimates of the characteristics of people socializing at the sites that may be the most important to reach in an intervention program.

In 2002, only sites located in the units identified by focus groups and in-depth interviews were eligible for individual interviews. Sites in the random units were excluded based on the analysis of data from the key informant and site verification interviews showing that these units did not include as many sites as those identified by focus groups and in-depth interviews. In 2003, verified sites located in all units were eligible for individual interviews.

2. Sampling individuals at selected sites

Interviewers visited sites in teams of two at peak times, which most often was during the evening or night. When sites were deemed unsafe at their peak times (such as certain bars or streets), interviewers completed the field work earlier in the day to maintain safe working conditions. To identify systematically potential respondents, interviewers followed three principles: 1) they did not ask more than one individual in each group socializing together; 2) they numbered the individuals at a site and identified potential interviewees using intervals; and, 3) they made sure to interview individuals at different locations within a site. When approaching an individual, the interviewer explained the purpose of the study and the types of questions that would be asked and requested verbal informed consent before proceeding with the interview. It was often necessary to request that the respondent move to a different location at the site, away from their peers and others at the site, to preserve privacy and encourage truthful responses. There was no quota for the numbers of interviews to be performed with men and women.

When the target number of interviews with IDUs was not met by randomly approaching individuals at sites as described above, this target group was sought by re-visiting sites where IDUs had previously been found.

C. Results

Interviews with socializing individuals occurred at approximately a quarter of verified sites in 2002 and a third of verified sites in 2003 (Table 3). The target number of interviews was achieved each year but oversampling of IDUs was necessary in 2002.

Table 3. Summary of individuals interviews field work

	2002		2003	
Number of Sites Visited for Individual Interviews	109		145	
Percent of Verified Sites Visited for Individual Interviews	24.8%		34.3%	
Number of Days of Interviews	19		16	
Number of Interviewers	21		17	
Number Interviewed	M	F	M	F
Number of People Approached for Interview	*	*	1707	1278
Number of Refusals	*	*	470	415
Completed Interviews				
Representative Sample	1109	889	1237	863
Youth	607	559	719	564
CSW and Clients	282	187	370	239
IDUs	236	27	170	35

*Incomplete recording of refusals in 2002

The results for the four populations of interest are reported separately. The representative sample includes the random sample individuals interviewed at each site, that is, all interviewed individuals except for the IDUs who were oversampled at a later date. This sample is representative of the socializing population at sites where individual interviews were performed. However, not all sites were verified. The results of three sub populations, youth, CSWs and clients, and IDUs, are also presented separately. The youth population is a representative sample of all individuals aged 25 years and younger socializing at the sites. CSWs were defined as women who had received money in exchange for sex during the past three months. Clients of CSWs were defined as men who had given money in exchange for sex during the past three months. The IDU population included all individuals who reported injecting drugs during the past six months who were interviewed as part of the representative sample plus, in 2002, those individuals who were oversampled to achieve the target numbers of interviews in this population.

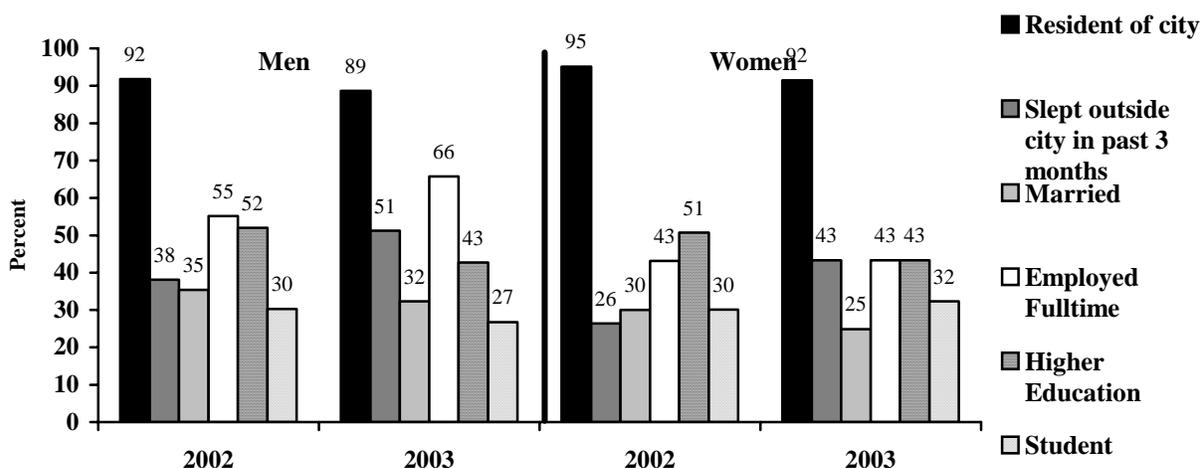
Part 1: Representative Sample of People Socializing at the Sites

Sociodemographic Characteristics

Slightly over half of the individuals interviewed in the representative sample each year were male. Sociodemographic characteristics of men and women socializing at sites did not change substantially between 2002 and 2003. On average, male and female patrons were approximately the same age. In 2002 the average age of men in the representative sample was 27 years and in 2003, 26 years. For women, the average age was 26 years in 2002 and 25 in 2003.

There were no differences in residence and educational attainment for men and women. Approximately 90% of men and women interviewed were residents of the city and about 40% had lived in the city all of their life (Figure 20). Many patrons lived near the site where they were interviewed with 37% of men and 40% of women living within a 10 minute walk of the site. Between 43% and 52% of the socializing population had at least some high education and almost one third were students.

Figure 20. Sociodemographic characteristics of individuals socializing at sites.



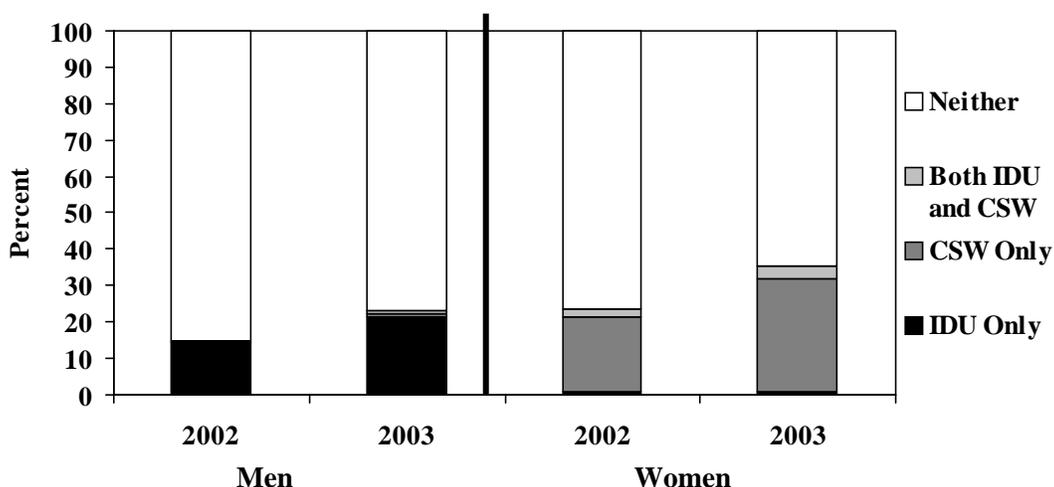
Men socializing at the sites were more likely than women to be married, employed, and to have spent at least one night outside the city in the past three months. Approximately one third of men socializing at sites were married compared to 25% to 30% of women. Men were also more likely than women to be employed with 55% in 2002 and 66% in 2003 employed fulltime compared to 43% of women in 2002 and 2003 who were employed fulltime. Similarly, men were more likely than women to have spent at least one night outside of the city in the past three months.

Between 2002 and 2003, the largest difference between socializing individuals were that patrons in 2003 were more likely to have spent a night outside the city and to be employed fulltime compared to individuals interviewed in 2002.

Interviewer Opinion of Respondent

Before beginning each interview, the interviewer recorded his/her opinion about whether the respondent was a Commercial Sex Worker (CSW) or an IDU. Interviewers were more likely to identify men as potential IDUs than women with 15% of male respondents in 2002 and 22% in 2003 who were believed to be an IDUs (Figure 21). Among women, 20% in 2002 and 30% in 2003 were believed to be a CSW. Less than 5% of respondents were thought to be both a CSW and an IDU and the majority of respondents were thought to be neither a CSW nor an IDU. The interviewer opinion of the respondent agreed closely with the self-reported data provided by the respondent later in the interview.

Figure 21. Interviewer opinion of respondent.

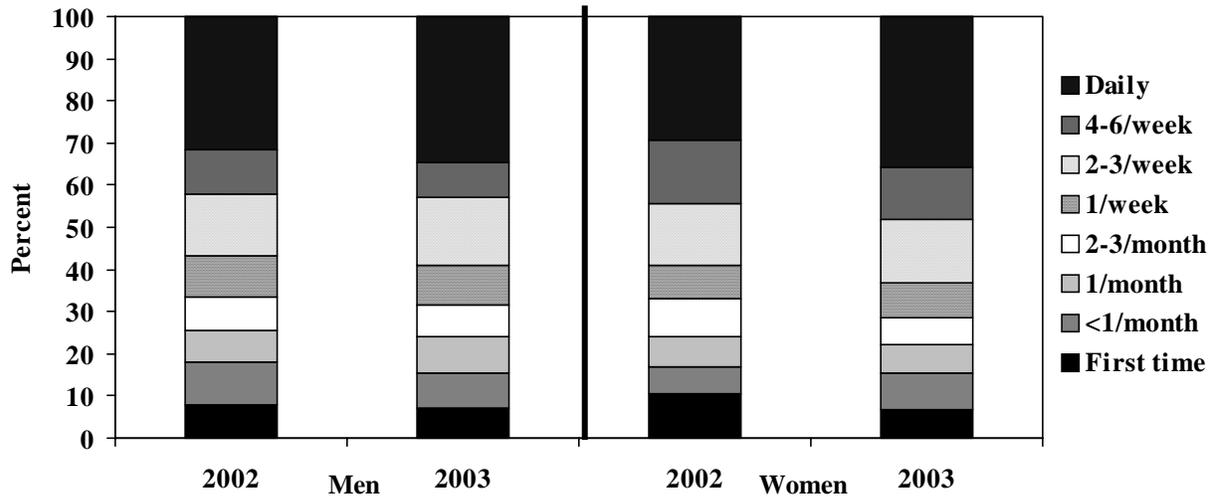


Site Visitation

Many people visit the site regularly. The frequency of attendance at sites did not vary significantly by gender or by year (Figure 22). Approximately a third of respondents visited daily the site at which they were interviewed. On average, men visited the site 3.6 times during the past seven days and women 3.8 times during the same time period. Over two thirds of respondents first visited the site where they were interviewed over one year ago indicating that these sites have well established, loyal patronage.

Almost half of those interviewed walked to the site while approximately a quarter came to the site by car and the remaining quarter came to the site via public transportation.

Figure 22. Frequency of attendance at sites by gender and year.



Reason for Site Visit

The majority of socializing individuals (74% of men and 68% of women) came to the site on the day of the interview to socialize with friends. Almost a quarter of men and 18% of women reported that they came to the site to drink alcohol. Women were twice as likely as men to report coming to the site to meet a new sexual partner (27% vs. 13%).

New Partnership Formation at Sites

Over 70% of socializing individuals believed that people came to the interview site to meet a new sexual partner (Figure 23). Approximately a quarter of the men and a third of the women interviewed reported that they had personally met a new sexual partner at the site. When the individual last attracted a new sexual partner at the site ranged from within the past twenty-four hours to over a year ago. Women were most likely to have attracted their last new sexual partner from the site within the past seven days while men tended to have attracted their last new partner from the site over a longer time period. This higher proportion of women who recently met a new sexual partner at the site is likely due to commercial sex workers who were included as part of the representative sample.

Among individuals who ever met a new sexual partner at the interview site, men were less likely than women to have used a condom with the last new partner they met at the site. Approximately 70% of men reported using a condom with the last new partner they met at the site compared to 86% of women. In 2002, among men who ever met a new sexual partner at the site, a higher proportion reported using a condom with the last new partner at interview sites where condoms were always available during the past year compared to sites where condoms were never available (Figure 24). However, in 2003, the reverse was observed and a higher proportion of men reported using a condom with their last new partner from sites where condoms were never available compared to sites where they were always available.

Figure 23. Partner selection reported by individuals socializing at the sites.

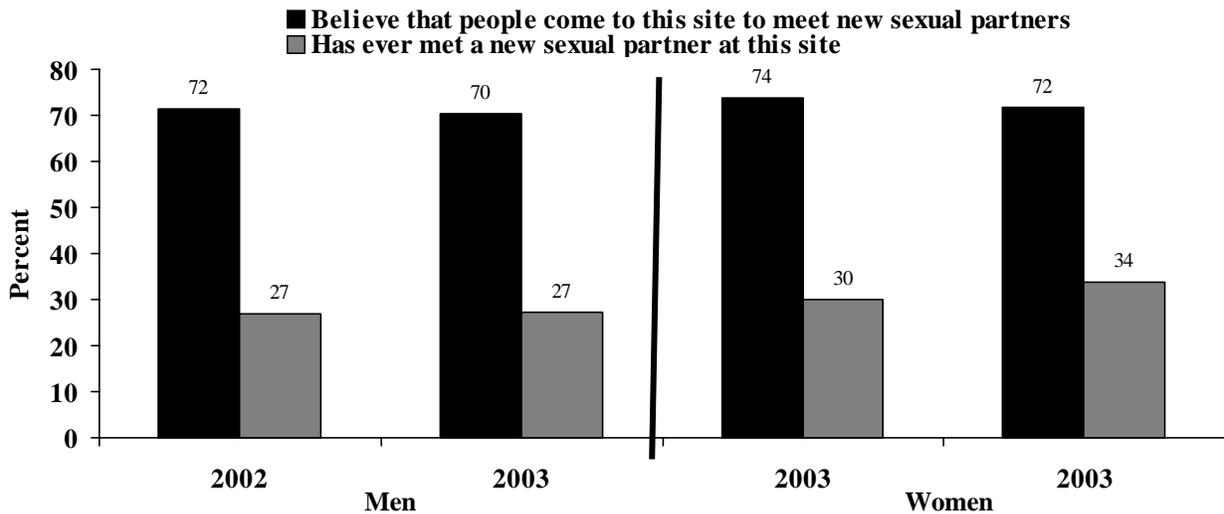
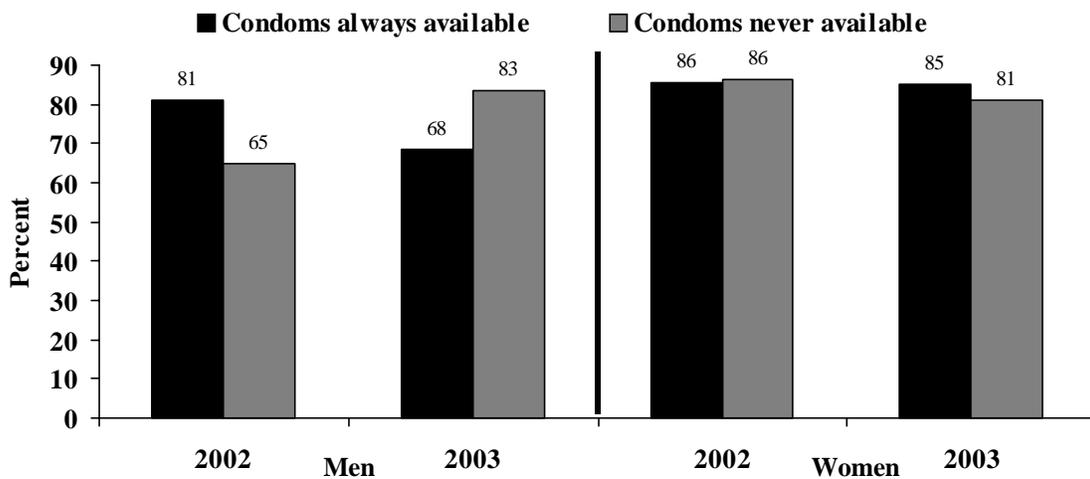


Figure 24. Condom use with last new partner met at site by condom availability at site.



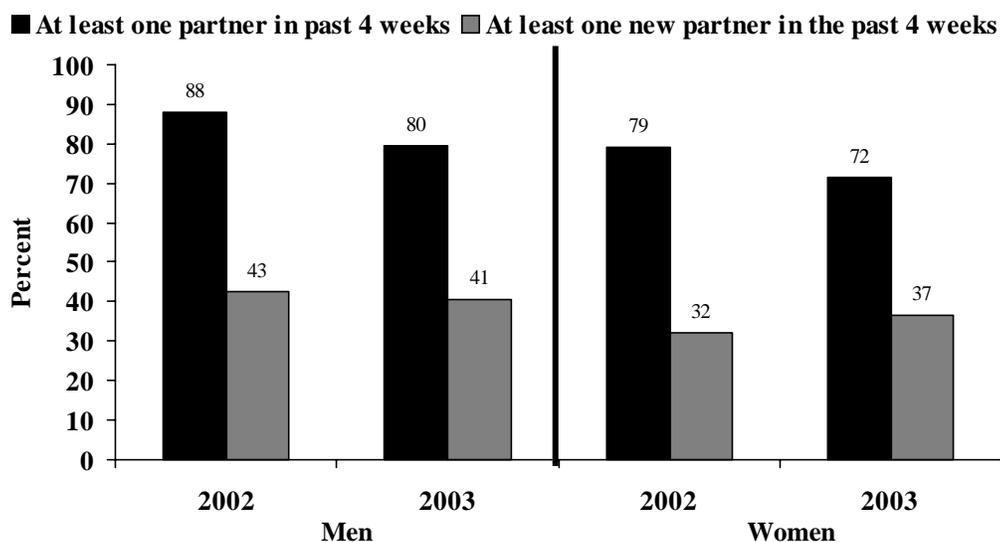
Condom availability at sites did not appear to influence whether women who met a new partner at the site used a condom with the last new partner at the. In 2002 and 2003, similar proportions of women interviewed at sites with condoms always available and at sites with condoms never available used a condom with their last new partner from the site.

Number of Sexual Partners

Partner acquisition rates varied by gender. Men were more likely to report having a new partner in the past four weeks (88% in 2002 and 80% in 2003) compared to women (79% in 2002 and 72% in 2003) (Figure 25). Individuals interviewed in 2002 were slightly less likely to report having a partner in the past four weeks than individuals interviewed in 2003. Women in 2003 were less likely to have a new partner in the past four weeks compared to women in 2002 (72% vs. 79%) but among those with at

least one partner in the past four weeks, women in 2003 were more likely than women in 2002 to report having at least one new partner (51% vs. 41%).

Figure 25. Proportion of individuals socializing at sites with at least one partner during the past four weeks by gender.

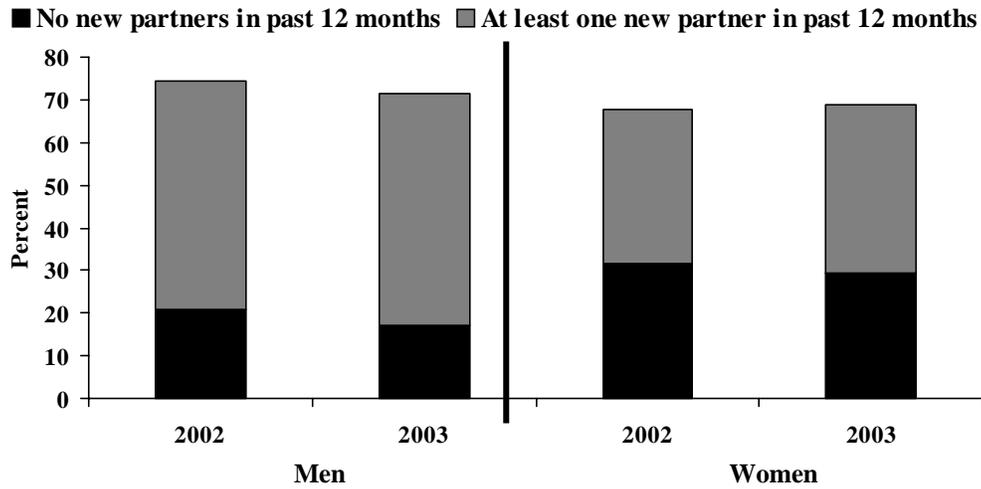


During the previous 12 months, over 95% of men and approximately 87% of women reported at least one sexual partner. While the number of total partners did not differ substantially, the proportion with a new sexual partner during the previous 12 months was greater in 2003 compared to 2002. Among men with at least one partner in the previous 12 months, 82% of men in 2003 had at least one new partner in the past 12 months compared to 73% of men in 2002. Similarly, among women with at least one partner in the previous 12 months, 66% in 2003 had at least one new partner in the past 12 months compared to 55% in 2002.

Regular Sexual Partnerships

Almost three-quarters of men interviewed and approximately two thirds of women reported having a regular long-term sexual partner, that is, someone they had been having sex with at least monthly for a year or more (Figure 26). However, in addition to their long-term regular partner, many individuals also reported at least one new partner during the previous 12 months. Approximately three quarters of men and over half of women who reported a regular long-term partner also reported at least one new partner during the previous 12 months.

Figure 26. Proportion of individuals with a regular, long-term sexual partner.



Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months. Men on average tend to have partners younger than themselves while women are more likely to have older partners. Among men, the average age for the youngest partner was 5.4 years younger and the average for older partners was 1.7 years older. Women were, on average, the same age as their youngest partner but their oldest partner was, on average, 10.5 years older including one third of respondents who had a partner 10 or more years older.

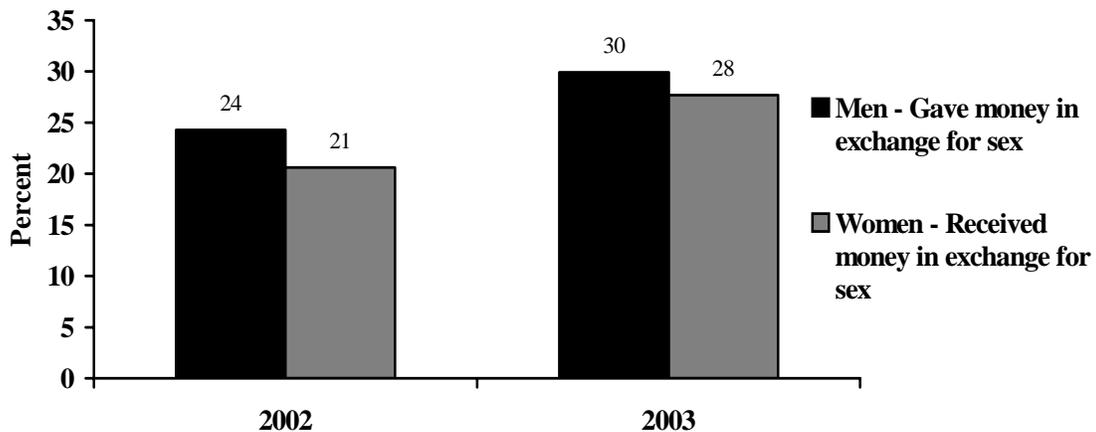
Figure 27. Age difference between respondent and youngest/oldest partner in past 12 months.



Transactional Sex

The proportion of men who reported transactional sex during the past three months increased slightly from 24% in 2002 to 30% in 2003 (Figure 28). Similarly, the proportion of women who had received money in exchange for sex increased from 21% in 2002 to 27% in 2003.

Figure 28. Transactional sex.

Gay Sex

Men rarely reported having sex with another man. Less than 1% of men interviewed reported having sex with another man in the past four weeks.

Self-Reported Condom Use

Condom use was relatively high among individuals socializing at the sites and comparable levels of use were reported in 2002 and 2003. Approximately 85% of men and three quarters of women had ever used a condom. Women were more likely than men to have last used a condom in the past 24 hours with approximately 17% of women doing so compared to 10% of men. However, condom use in the past week was not substantially different between men and women.

Among patrons who had a new partner in the last four weeks, approximately 80% of men and 90% of women reported using a condom with their last new partner in the past four weeks (Figure 29). When asked how often in the past four weeks they used condoms with new sexual partners, the proportions were slightly lower. Among men, 61% reported always using a condom with new sexual partners in the past four weeks, 30% reported that they sometimes used a condom with new partners, and 9% reported that they never did. Among women, 76% reported always using a condom with new sexual partners in the past four weeks, 19% sometimes did, and 5% never used a condom.

Among men who did not use a condom with their last new partner in the past four weeks, the most common reasons for not using one were that they did not like condoms (45%) and they trusted their partner (42%). The most common reason among women for not using a condom with their last new partner in the past four weeks was that they trusted their partner (46%).

Condom use at last sex with a regular partner was lower than use with new partners for both men and women. Among men with a regular partner, slightly over a third reported using a condom at last sex with their regular partner and among women with a regular partner, less than one half reported such use.

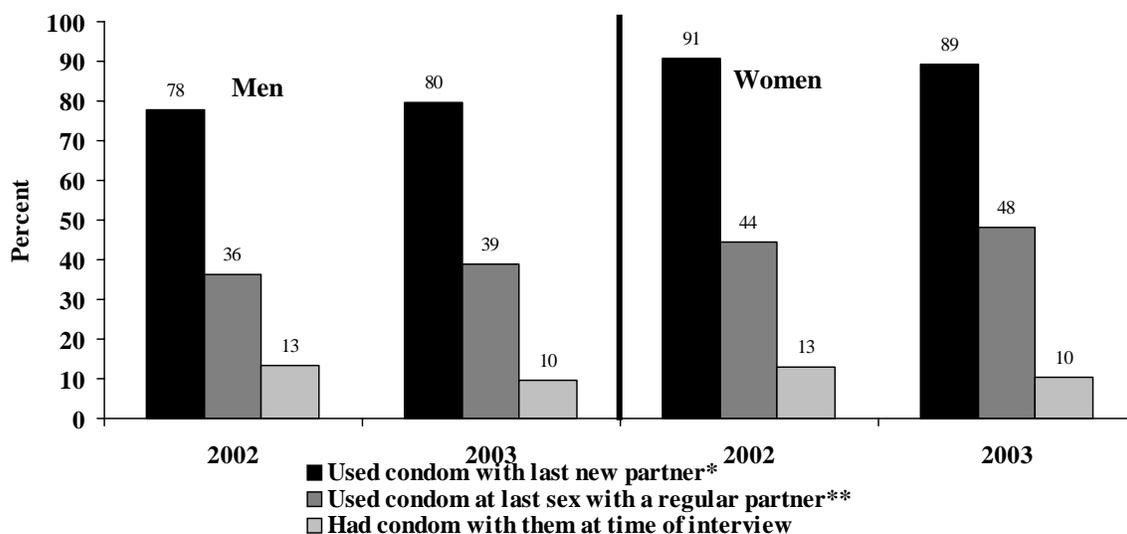
Perceived Condom Effectiveness

Among those who use condoms and had a partner in the past 12 months, 20% reported that they had had a condom break during this time period. Approximately a third of respondents reported that they thought condoms were very effective in preventing STIs including HIV and another third thought that they were somewhat effective. Approximately 20% thought that they were not very effective but only 3% thought that they were not effective at all. Around 10% did not know whether or not they were effective. On average, men thought that a reasonable price for a condom should be 59 tenge and women, 64 tenge.

Condom Availability

Neither men nor women were likely to have a condom with them at the time of interviews with only 10% to 13% reporting having a condom with them. A condom was seen by the interviewer for less than 10% of respondents. Durex was the most commonly seen brand of condom. Among those who had a condom with them, a third of men and half of women had a Durex brand condom.

Figure 29. Condom use by gender.

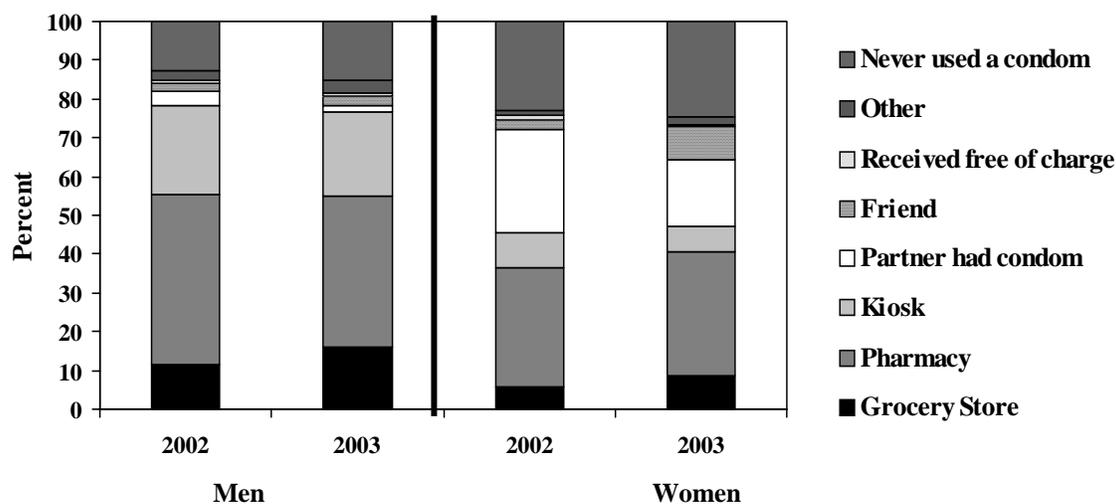


*Among individuals with at least one new partner in past four weeks

**Among individuals with a regular partner

Pharmacies were most frequently named by men and women as the place where they obtained their last condom (Figure 30). Men also frequently reported kiosks and women reported their partner as the source where they obtained their last condom.

Figure 30. Location where last condom used was obtained.



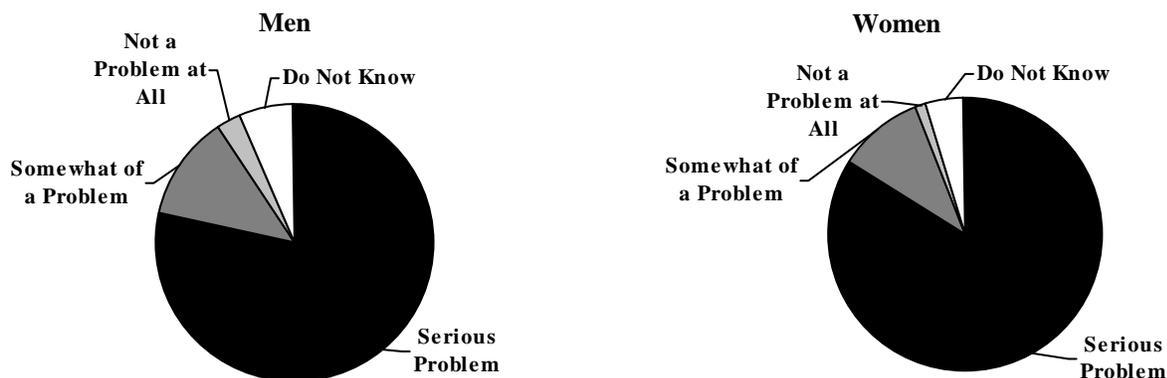
Among those who had ever used a condom, Durex was most commonly reported (27% of men and women) as the last brand of condom used. However, 42% of men and 47% of women did not remember or know the brand of the last condom used.

Exposure to HIV/AIDS Education

In 2002, 16% of men and 23% of women had attended an AIDS education session in the past 12 months. In 2003, individuals socializing at sites were asked if they had heard or seen any information about HIV/AIDS in the past 12 months and approximately 85% responded in the affirmative. Television was the most frequently reported source from which this information was received with over two-thirds of the population having done so. Other commonly reported sources included newspapers, magazines, leaflets, and posters. A quarter to a third of the socializing population also reported hearing or receiving information about HIV/AIDS on the radio, from a friend or relative, from a doctor or health care worker, and/or in school. Women were more likely than men to report having received information from a doctor or health care worker (35% vs. 25% respectively) but the proportions receiving information from the other sources were approximately equal among men and women.

Opinion about HIV/AIDS as a Problem in Almaty

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Almaty. The majority of men (78%) and women (84%) interviewed thought that HIV/AIDS was a serious problem in Almaty (Figure 31). Less than 3% thought that it was not a problem at all in the city.

Figure 31. Opinion of HIV/AIDS as a problem in Almaty.

Knowledge of HIV/AIDS

Individuals socializing at sites were asked about their knowledge of HIV/AIDS transmission and prevention. There was no change in knowledge from 2002 to 2003 or difference in knowledge between men and women. Almost all (>97%) respondents knew that HIV could be transmitted by sexual contact without a condom and by injecting drugs with a shared syringe. Over 80% knew that it could not be spread by a handshake.

Respondents were less sure about HIV transmission through eating from a common dish, swimming in a common pool, or through an insect bite. At least one third of respondents, but often more, responded that HIV could be transmitted via these types of contacts or that they did not know if such transmission could occur. For example, less than half of those interviewed correctly responded that HIV could not be transmitted via an insect bite. The distribution of the number of questions answered correctly by each individual was almost identical by gender and year. The mean number of questions answered correctly for men and women during 2002 and 2003 was 4.4 out of 6.

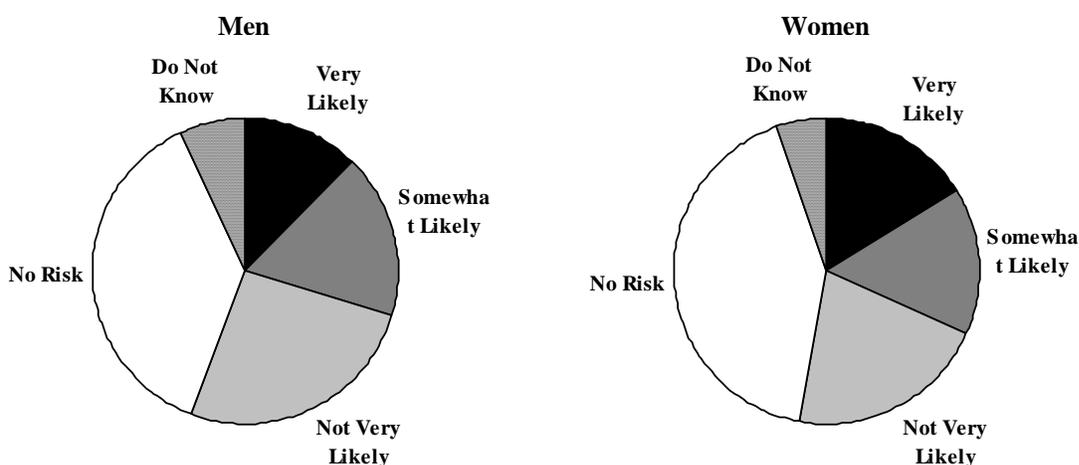
Although the majority of individuals knew that it was possible to become infected with HIV through sexual contact without a condom and by injecting drugs with a shared syringe, fewer people responded that using condoms or avoiding sharing needles were ways that people could avoid or reduce their chances of becoming infected with HIV. Approximately 80% responded that people can avoid or reduce their chances of becoming infected with HIV by using condoms and 40% of men and a third of women responded that avoiding sharing needles will avoid or reduce the chance of becoming infected. The majority of individuals named 2 to 3 ways that a person could avoid or reduce their chance of getting HIV.

Three-quarters of those interviewed in 2002 and approximately 85% of those interviewed in 2003 responded that a person who looks healthy can be infected with HIV. Approximately 10% to 15% responded that they did not know.

Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus. Approximately 12% of men and 16% of women thought that they were very likely to contract the HIV/AIDS virus and 37% of men and 40% of women thought that they were at no risk at all for contracting the virus (Figure 32).

Figure 32. Perception of likelihood of contracting the HIV/AIDS virus.



HIV Testing

The proportion of individuals who had been tested for HIV in the past 12 months decreased slightly from 2002 to 2003. In 2002 51% of men and 56% of women reported being tested for HIV in the past 12 months and in 2003, 41% of men and 46% of women reported being tested. Approximately half of those tested had done so voluntarily while testing among the other half was obligatory.

Among those who were tested for HIV in 2003, 35% of men and 41% of women reported that they had received counseling about the ways of transmission and other HIV/AIDS related information.

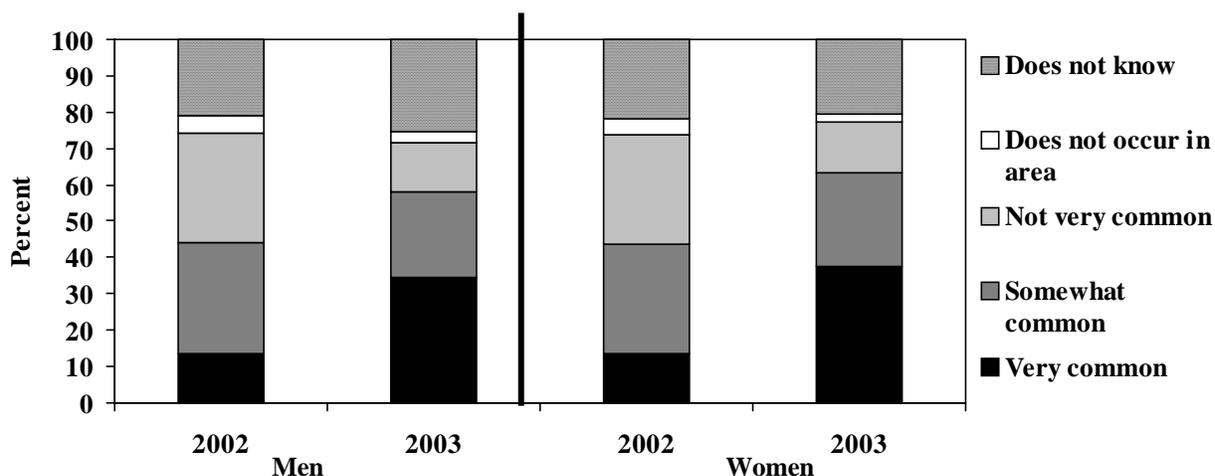
Slightly under half of respondents in 2003 reported that they would be interesting in getting an HIV test voluntarily. In 2003, respondents were also asked if they knew where in Almaty a person could receive an HIV test. The most frequently named place was a hospital or clinic with 43% of men and 47% of women responding as such. The next most frequently name place was the Center of AIDS named by 29% of men and 34% of women followed by a venerological or dermatological center (19% of men and 25% of women). Men were slightly more likely than women report not knowing where a person could get an HIV test (24% vs. 17% respectively).

Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred

Respondents were asked about injecting drug use in the area as well as their own drug use behavior. The respondents' opinion about drug use in the area increased substantially between 2002 and 2003. In 2002, 14% of male respondents thought that injection drug use was very common in the unit of the

city in which they were interviewed and in 2003 this proportion had more than doubled to 34%. Similarly, among women, the proportion who thought that injection drug use was very common in the unit where the interview occurred almost tripled from 13% to 38%. Less than 3% of respondents reported that injection drug use did not occur in the unit and approximately two-fifths did not know whether or not injection drug use occurred in the unit.

Figure 33. Respondents' opinion of injecting drug use in city unit of interview.



Opinion whether Injection Drug Users Socialize at the Site

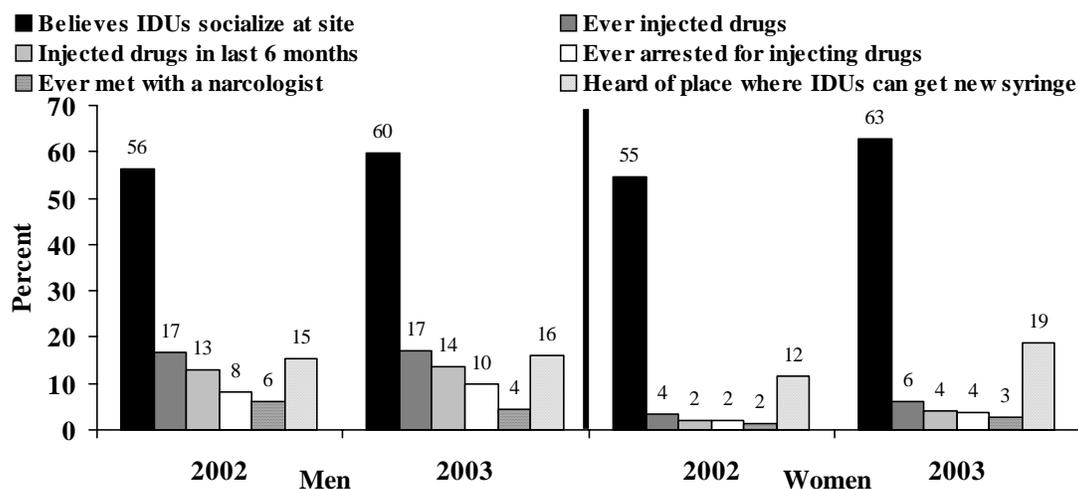
Over half of the men and women interviewed thought that injection drug users socialized at the interview site (Figure 33). Approximately 10% thought that injection drug users did not socialize at the site and about a third reported that they did not know whether or not injection drug users socialized there.

Self-Reported Injection Drug Use

Injection drug use was reported more frequently by men than by women and did not vary substantially between 2002 and 2003. In 2002 and 2003, 17% of men reported that they had ever injected drugs and the proportion of women responded in the affirmative ranged from 4% in 2002 to 6% in 2003. Among those who reported ever injecting drugs, three quarters of men and 56% of women in 2002 and 62% in 2003 reported last injecting drugs in the past six months.

Approximately 9% of men and 3% of women reported ever having been arrested for injecting drugs. Slightly fewer men and women reported having ever met with a narcologist or having ever visited a narcologist dispensary.

Approximately 15% of men had heard of a place in the city where IDUs can get new syringes. The proportion of women who knew of such a place increased slightly from 12% in 2002 to 19% in 2003.

Figure 34. Injecting drug use behavior by individuals socializing at sites.

Contact with Treatment Facilities

In 2002, the majority of men (84%) and women (88%) had ever visited a state medical clinic. Contact with private medical clinics was not as common with 40% of men and 54% of women having ever visited a private clinic. A quarter of men and one third of women had ever been to an emergency clinic. Approximately 15% of men and women had ever visited an infection hospital and 14% of men and 21% of women had ever visited a skin or venerological dispensary. Less than 10% of respondents had ever visited a trust point or TB dispensary, or talked with a private vernerological or narcological doctor, or talked to an outreach or social worker about injection drug use.

Knowledge of STI Symptoms

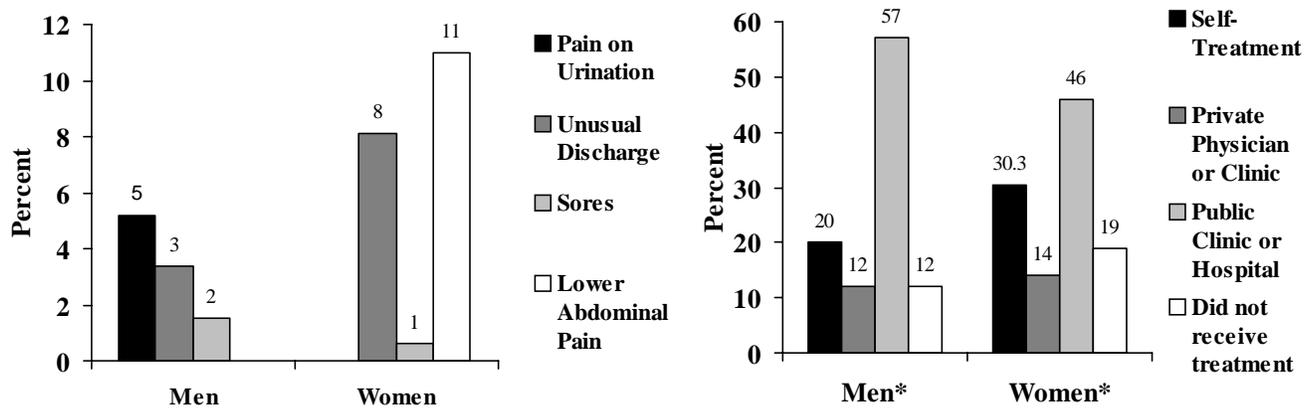
In 2003, 94% of men and women reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate that someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by men were discharge from penis (61%), burning pain on urination (29%), itching in genital area (23%), and genital ulcers or open sores (21%). The most commonly named signs and symptoms by women were discharge from vagina (66%), itching in genital area (40%), genital ulcers or open sores (26%), and lower abdominal pain (24%). Approximately 14% of men and 9% of women did not know any signs or symptoms which indicate that someone has a sexually transmitted disease or infection.

Self-Reported STI Symptoms

In 2003, 7% of men and 15% of women reported that they had experienced STI symptoms in the past four weeks (Figure 35). The most commonly reported symptom among men was pain on urination (5%) and among women, lower abdominal pain (11%). Among those who had symptoms, a public clinic or hospital was the most commonly reported location where treatment was sought by men (57%) and women (46%). Treatment was sought from a private physician by 12% of men and 14% of

women. Two-fifths of men and 30% of women self-treated their symptoms and 12% of men and 19% of women did not seek any treatment for their symptoms.

Figure 35. STI symptoms and treatment.

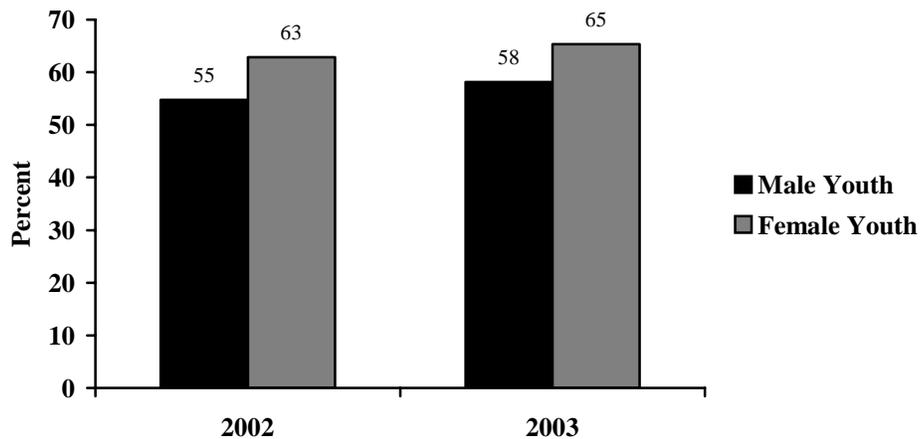


*Among the 7% of men and 15% of women with any symptoms in past 4 weeks.

Part 2: Results from Interviews with Youth

Youth, aged 18 to 25 years, included as part of the representative sample, were also examined as a separate group. Over half of the men and almost three quarters of the women interviewed as part of the representative sample were youth (Figure 36). Women socializing at the sites tended to be younger than male patrons and this difference in age is reflected in the higher proportion of female youth compared to male youth in the representative sample.

Figure 36. Proportion of youth in the representative sample of individuals socializing at the sites.

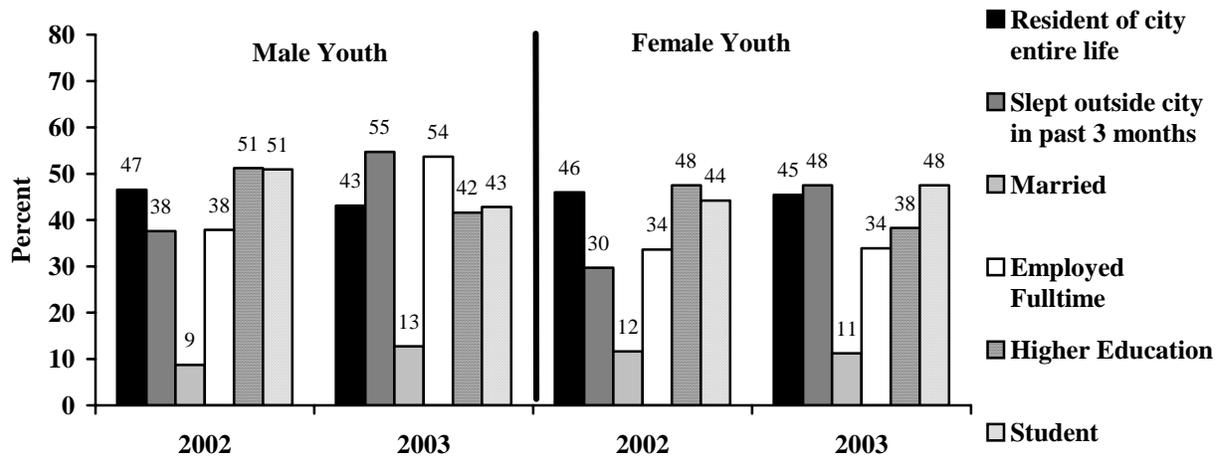


Youth: Sociodemographic Characteristics

Youth were not significantly different from the representative sample of patrons in terms of current residence, years at residence, and nights slept outside the city during the past three months. Youth were less likely to be married or employed full time compared to representative sample and more likely to be students, have lower educational attainment (probably a factor of age and student status), and to be unemployed and looking for work.

Youth in the 2002 sample were similar to the 2003 sample except that youth in 2003 were more likely to report spending at least one night outside of the city in the past three months (55% of male youth and 48% of female youth) than youth in 2002 (38% and 30% respectively) and male youth in 2003 were more likely to be employed (54%) than male youth in 2002 (38%) (Figure 37).

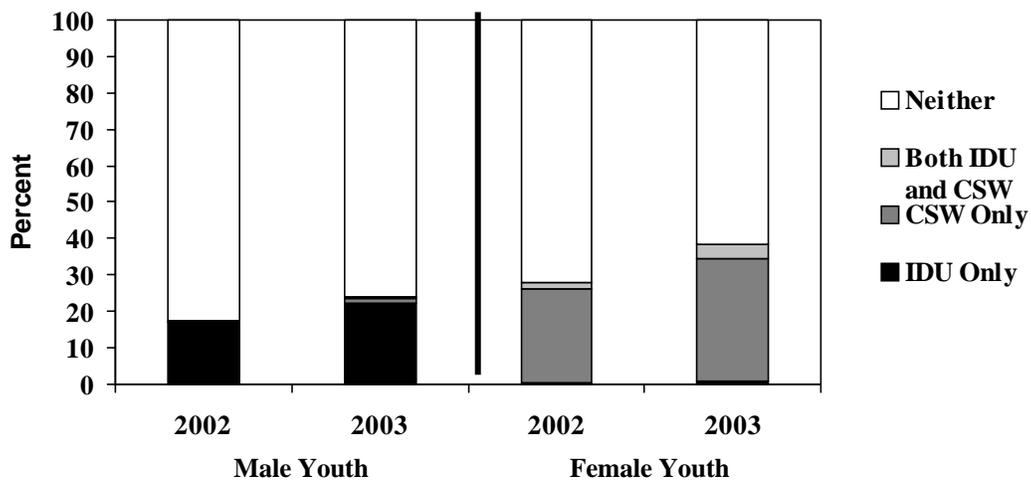
Figure 37. Sociodemographic characteristics of youth socializing at sites.



Youth: Interviewer Opinion of Respondent

Male youth in 2002 were slightly more likely to be identified by the interviewer as an IDU compared to men in the representative sample but there was no difference between male youth and men in the representative sample in 2003. In 2002 and 2003, female youth were slightly more likely to be identified by the interviewer as a CSW than women in the representative sample. Furthermore, female youth were more likely to be identified as a CSW in 2003 (34%) than in 2002 (26%) (Figure 38).

Figure 38. Interviewer opinion of youth socializing at sites.



Youth: Site Visitation

The frequency of attendance at sites by youth is almost identical to the pattern of the representative sample and does not vary by gender. On average, male and female youth visited the site 3.5 times during the past seven days. Roughly one third of the youth visit the sites daily and two thirds first visited the site over one year ago.

Almost half of those interviewed walked to the site while approximately a quarter came to the site by car and the remaining quarter came to the site via public transportation.

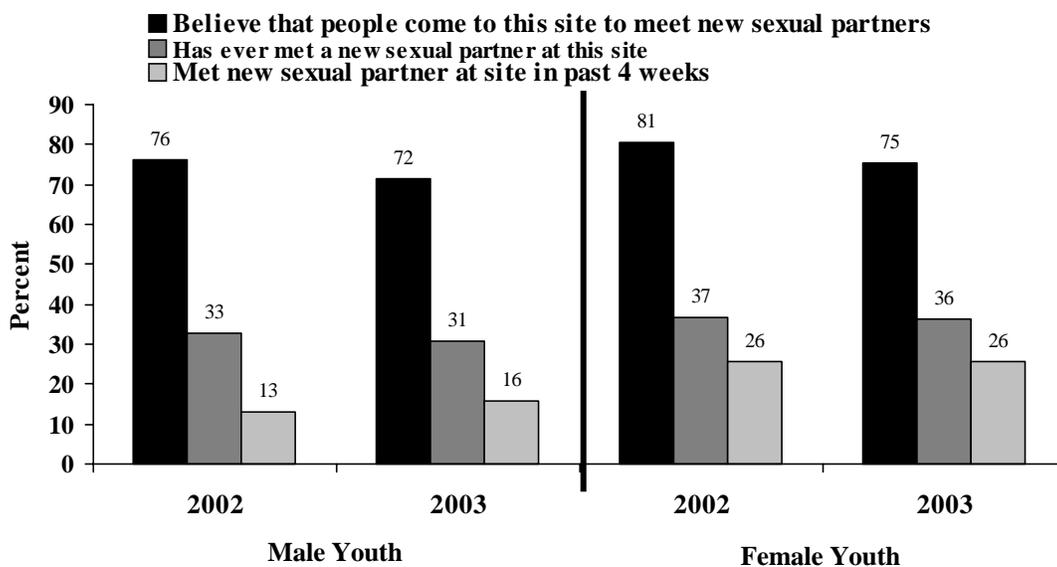
Youth: Reason for Site Visit

Youth visited the sites for the same reasons as individual in the representative sample. The majority of youth came to the site to socialize with friends (80% of male youth and 72% of female youth). Female youth were more likely to report coming to the site to meet a new partner (29%) than to drink alcohol (20%) whereas the reverse was true for male youth (17% and 24%, respectively).

Youth: New Partnership Formation at Sites

There was no difference between 2002 and 2003 in youths' opinions as to whether people met new partners at the sites, whether they had met a new partner at the site, and when they met last met a partner at the site. Approximately three-quarters of youth thought that people came to the site to meet new sexual partners (Figure 39). Female youth were slightly more likely to have met a new partner at the site and were substantially more likely to have recently attracted a new partner at the site than male youth. Among those who had ever attracted a new partner at the site, 70% of female youth had attracted a new partner at the site in the past four weeks compared to 40% of male youth in 2002 and 51% of male youth in 2003 who had done so. This differential in new partnerships at the site by gender was also seen in the representative sample.

Figure 39. Partner selection reported by youth socializing at the sites.

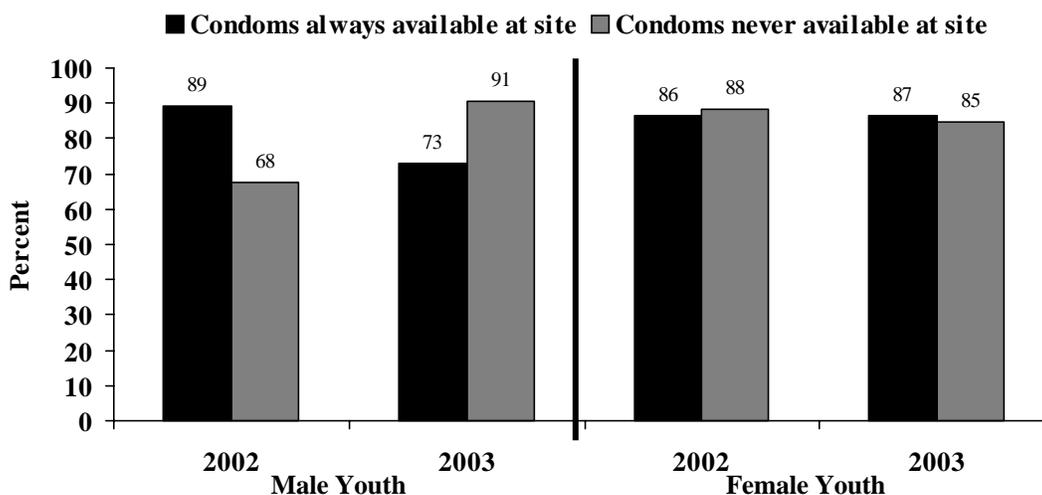


Among youth who had ever met a new sexual partner at the site, male youth were less likely than female youth to use a condom with their last new partner. Three-quarters of male youth reported using a condom with their last new partner from the site compared to almost 90% of female youth.

In 2002, male youth who met a new partner at the site were more likely to have used a condom with their last new partner from the site if condoms were always available at the site compared to with new partners met at sites with condoms never available (Figure 40). However, the reverse was observed in 2003 where a higher proportion of male youth at sites where condoms were never available used a

condom with their last new partner at the site compared to male youth interviewed at sites where they were always available. There was no difference in condom use by condom availability at the site among female youth who met a new partner. This same pattern of condom availability and use by gender was observed in the representative sample.

Figure 40. Condom use with last new partner met a site by condom availability at site.



Youth: Number of Sexual Partners

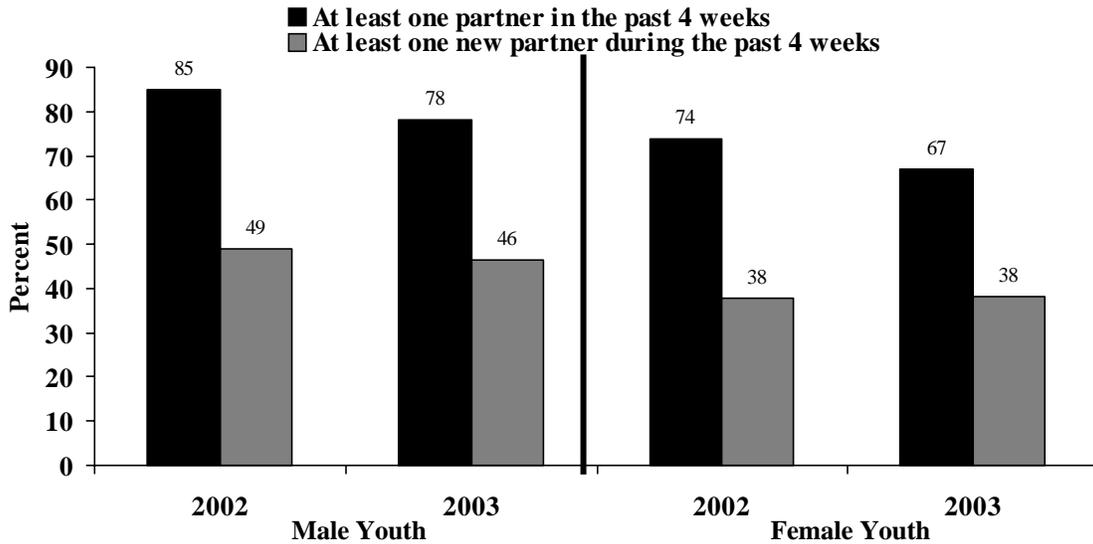
As in the representative sample, youth interviewed in 2003 were slightly less likely than youth interviewed in 2002 to have at least one partner and at least one new partner in the past four weeks (Figure 41). However, male youth interviewed during both years were more likely to have had a new partner in the past four weeks compared to men in the representative sample. Among those with at least one partner in the past four weeks, between 51% and 59% of youth had a new partner during this time period.

The distribution of the total number of partners during the past 12 months was similar among the youth and the representative samples in 2002 and in 2003. However, youth were slightly more likely to have a new partner during the past 12 months than people in the representative sample. Furthermore, youth in 2003 were more likely to report a new partner in the past 12 months than youth in 2002. In 2003, 84% of male youth and 60% of female youth reported a new partner in the past 12 months, compared to 79% of male youth and 54% of female youth in 2002.

Youth: Regular Sexual Partners

Youth were much less likely to have a long-term sexual partner compared to the representative sample. Approximately 60% of youth reported a regular, long-term sexual partner.

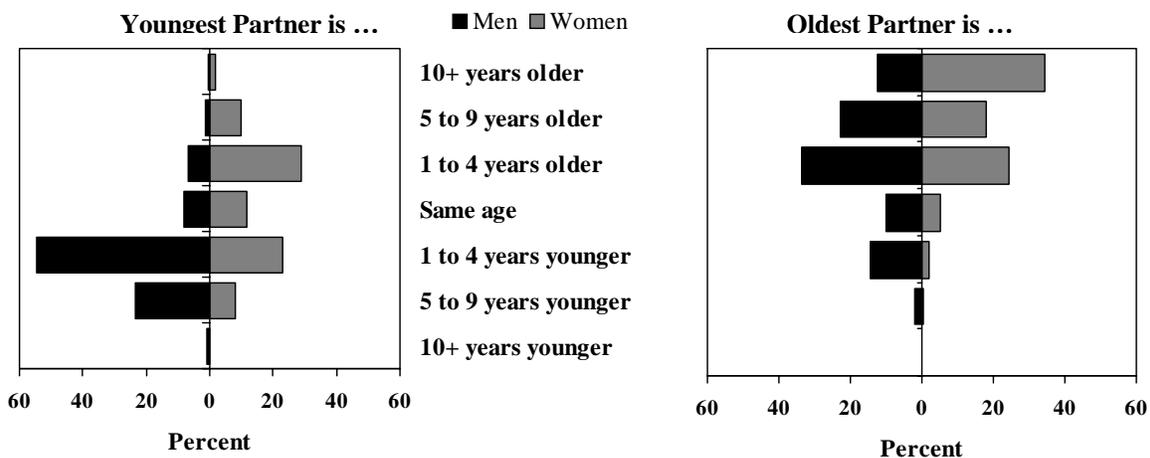
Figure 41. Proportion of youth socializing with at least one sexual partner in past four weeks by gender.



Youth: Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months. The distribution of the age difference for the youngest partner was not as skewed as in the representative population but male youth on average tended to have partners younger than themselves while female youth were more likely to have older partners (Figure 42). Among male youth, the average age of the youngest partner is 2.7 years younger and their oldest partner was an average of 3.8 years older. Among female youth, the average age of both their youngest and oldest partner was slightly older than women in the representative sample. The youngest partner of female youth was, on average, 0.5 years older and their oldest partner was, on average, 11.6 years older with one third of respondents having a partner 10 or more years older.

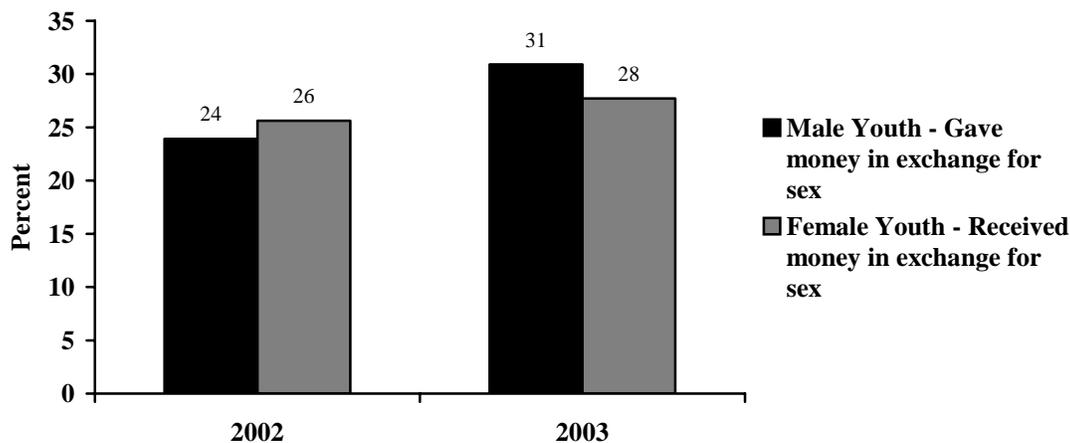
Figure 42. Age difference between respondent and youngest/oldest partner in the past 12 months.



Youth: Transactional Sex

A quarter to a third of youth engaged in transactional sex in the past three months, similar to the proportion of individuals in the representative sample who engaged in such activity. A slightly higher proportion of youth in 2003 than in 2002 engaged in transactional sex (Figure 43).

Figure 43. Transactional sex among youth.

Youth: Gay Sex

Approximately 1% of male youth reported having sex with another man in the past four weeks, similar to the proportion in the representative sample.

Youth: Self-Reported Condom Use

There was no change in condom use by youth from 2002 to 2003. As in the representative sample, condom use with new sexual partners was common and more frequently reported by female youth than by male youth (Figure 44). Approximately 90% of female youth used a condom with their last new partner while approximately 80% of male youth did so. Female youth were also slightly more likely than male youth to have used a condom at last sex with a regular partner.

Approximately two-thirds of male youth and three quarters of female youth reported always using a condom with their new partners in the past four weeks. Only, 7% of male youth and 5% of female youth reported never using a condom with new partners in the past four weeks, while the remaining 28% of male youth and 17% of female youth with used condoms sometimes with new partners during this time period.

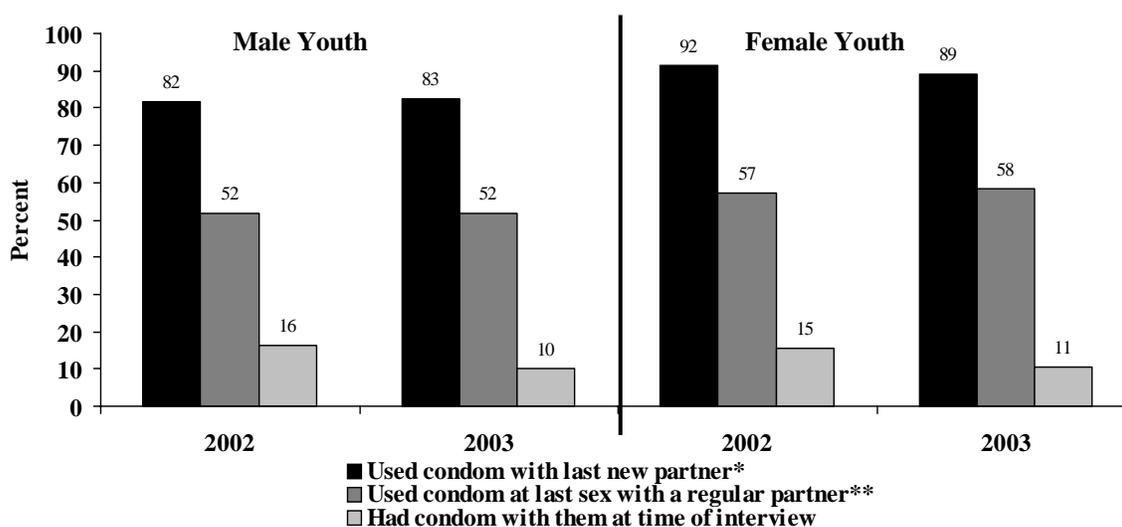
Among male youth who did not use a condom with their last new partner in the past four weeks, the most common reasons for not using a condom were that they trusted their partner (46%) and they did not like condoms (39%). Among female youth, the most common reasons among female youth for not using a condom with their last new partner in the past four weeks were that they trusted their partner (49%) and their partner protested (27%).

Youth: Perceived Condom Effectiveness

Among those who use condoms and had a partner in the past 12 months, slightly less than 20% reported that they had had a condom break during this time period. Youths' perception of the effectiveness of condoms was similar to that of the representative sample. Approximately a third of respondents reported that they thought condoms were very effective in preventing STIs including HIV and another third thought that they were somewhat effective. Approximately 20% thought that they were not very effective but less than 3% thought that they were not effective at all. Around 10% did not know whether or not they were effective. On average, youth thought that a reasonable price of a condom was slightly higher than was thought by individuals in the representative sample. Male youth thought that a reasonable price for a condom should be 63 tenge and female, 73 tenge.

Youth: Condom Availability

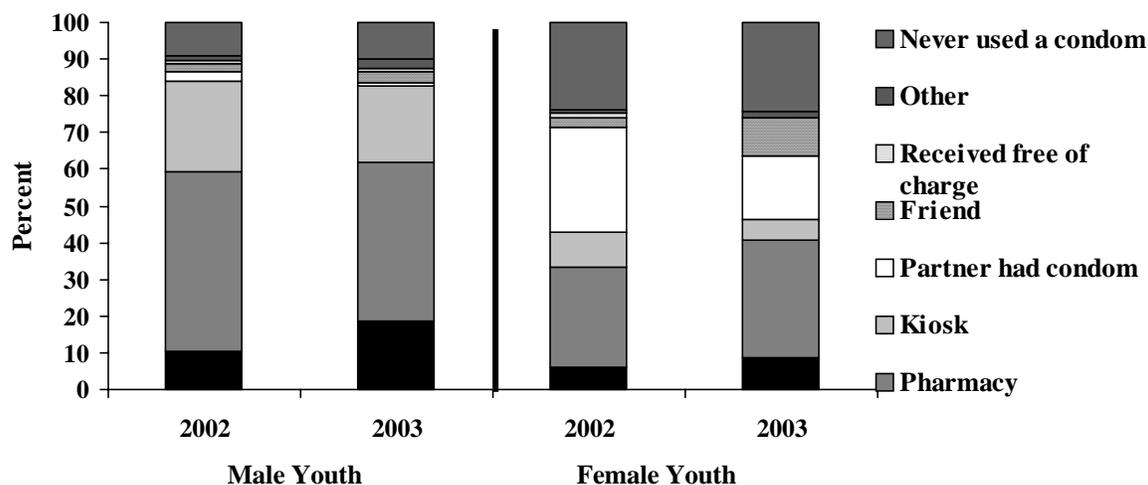
Having a condom at the time of interview decreased slightly from 2002 to 2003. However, a condom was actually seen by the interviewer for approximately 10% of respondents during both years. As in the representative population, Durex was the most commonly seen brand of condom. Among those that had a condom seen by the interviewer, 39% of male youth and 49% of female youth had a Durex brand condom.

Figure 44. Condom use by youth.

*Among youth with at least one new partner in past four weeks

**Among youth with a regular partner

As in the representative population, pharmacies were most frequently named by male and female youth as the location where they obtained their last condom. Male youth also frequently reported kiosks and women reported their partner as the source of their last condom (Figure 45).

Figure 45. Location where last condom used was obtained.

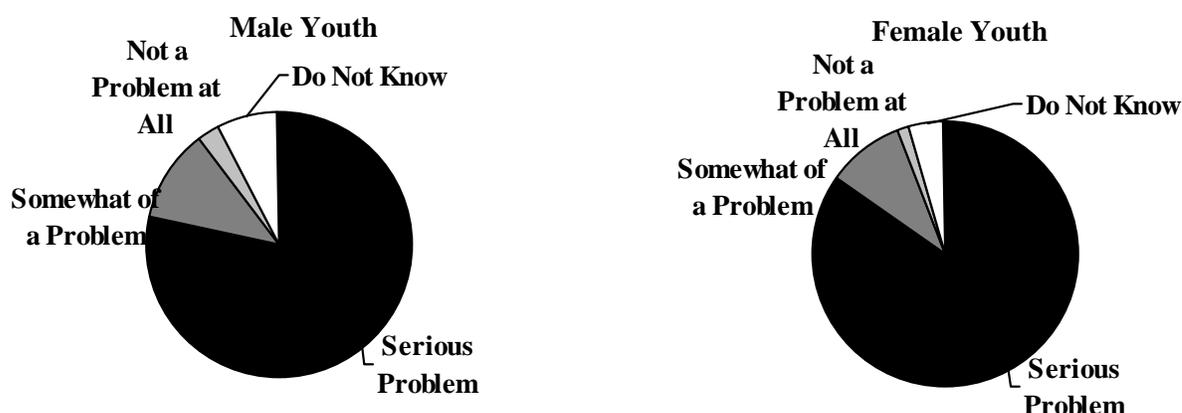
Youth: Exposure to HIV/AIDS Education

In 2002, youth were slightly more likely to have attended an AIDS education session during the past 12 months than individuals in the representative sample with 23% of male youth and 29% of female youth having done so. In 2003, individuals socializing at sites were asked if they had seen or heard any information about HIV/AIDS in the past 12 months and 80% of male youth and 84% of female youth responded that they had. As in the representative sample, television was the most frequently reported source from which information about HIV/AIDS had been received with almost two-thirds of youth having done so. Other commonly reported sources of information included newspapers, magazines, leaflets, and posters. A quarter to a third of youth also reported hearing or receiving information about HIV/AIDS on the radio, from a friend or relative, from a doctor or healthcare worker, and/or in school. The proportion of youth receiving information from these sources is comparable to the representative sample except that youth were more likely to have received information from education places than older individuals. Female youth were more likely than male youth to report receiving information from a doctor or a healthcare worker (35% vs. 25% respectively) and in school (37% vs. 28% respectively) but the proportions receiving information from the other sources were approximately equal among male and female youth.

Youth: Opinion about HIV/AIDS as a Problem in Almaty

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Almaty. As in the representative sample, the majority of male youth (78%) and female youth (85%) interviewed thought that HIV/AIDS was serious problem in Almaty (Figure 46). Less than 3% thought that it was not a problem at all in Almaty.

Figure 46. Youth opinion of HIV/AIDS as a problem in Almaty.

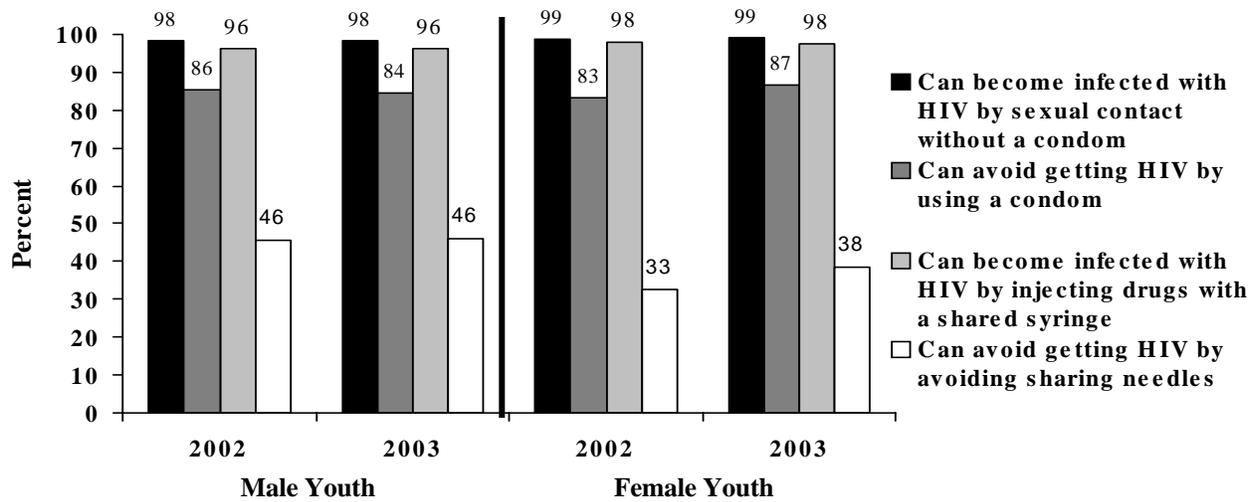


Youth : Knowledge of HIV/AIDS

Youth were also asked about their knowledge of HIV/AIDS transmission and prevention. Over 98% of youth knew that it is possible to become infected with HIV/AIDS through sexual contact without a condom, over 96% knew it is possible to become infected through injecting drugs with a shared syringe, and over 84% knew it is not possible to become infected through a handshake. Knowledge did not differ significantly between male and female youth or between 2002 and 2003. As in the representative sample, youth were less certain whether HIV/AIDS could be transmitted through eating from a common dish, swimming in a common pool, or from an insect bite. The mean number of questions answered correctly by youth was 4.4 out of 6.

As in the representative sample, more youth knew the modes of transmission of HIV than the methods to protect against transmission (Figure 47). Over 98% of male and female youth reported that HIV/AIDS can be transmitted by sexual contact but only 85% responded that people can avoid or reduce chance of getting HIV by using a condom. Over 96% of youth reported that HIV could be transmitted by injecting drugs with a shared syringe but only 46% of male youth and a third of female youth named avoiding needle sharing as a way to avoid or reduce the chance of HIV transmission. The majority of youth named 2 or 3 ways that an individual could avoid or reduce the chance of becoming infected with HIV but approximately 3% to 5% of youth were unable to name any ways. On average, youth named 2.0 ways to avoid or reduce their chance of getting HIV.

Figure 47. Knowledge about how a person may become infected with HIV and ways to avoid or reduce chances of getting HIV.

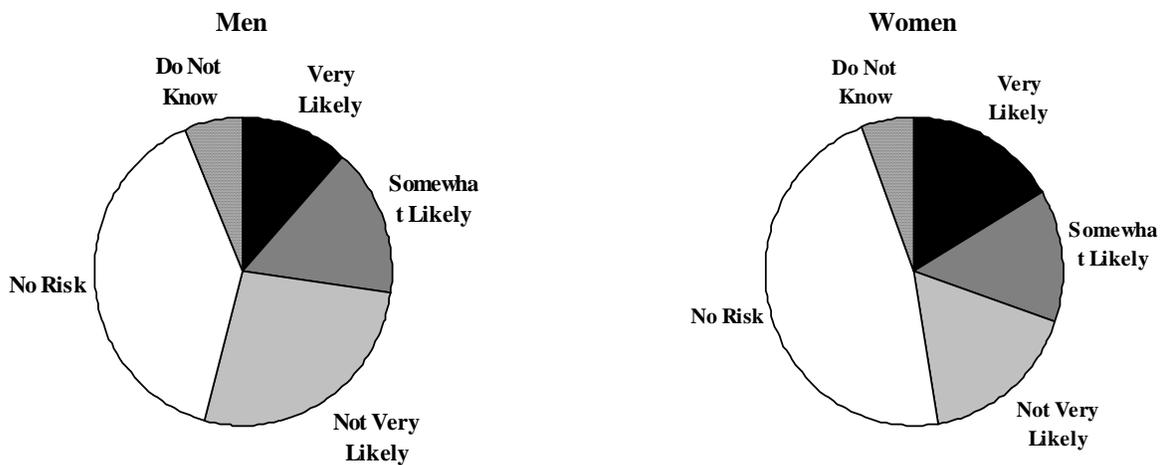


Approximately four-fifths of male and female youth responded that a person who looks healthy can be infected with HIV. However, 8% to 14% of youth replied that they were not sure.

Youth: Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus. Youth had similar risk perception for HIV as individuals in the representative sample. Approximately 12% of male youth and 16% of female youth thought that they were very likely to contract the HIV/AIDS virus and 39% of male youth and 47% of female youth thought that they were at no risk at all for contracting the virus (Figure 48).

Figure 48. Youth perception of likelihood of contracting the HIV/AIDS virus.



Youth: HIV Testing

Youth had similar patterns of HIV testing and counseling as individuals in the representative sample. The proportion of youth who had been tested for HIV in the past 12 months decreased from 2002 to 2003. In 2002, 52% of male youth and 56% of female youth reported being tested for HIV in the past 12 months and in 2003, 39% of male youth and 43% of female youth reported being tested. Approximately half of the youth tested were tested voluntarily while testing for the other half was obligatory.

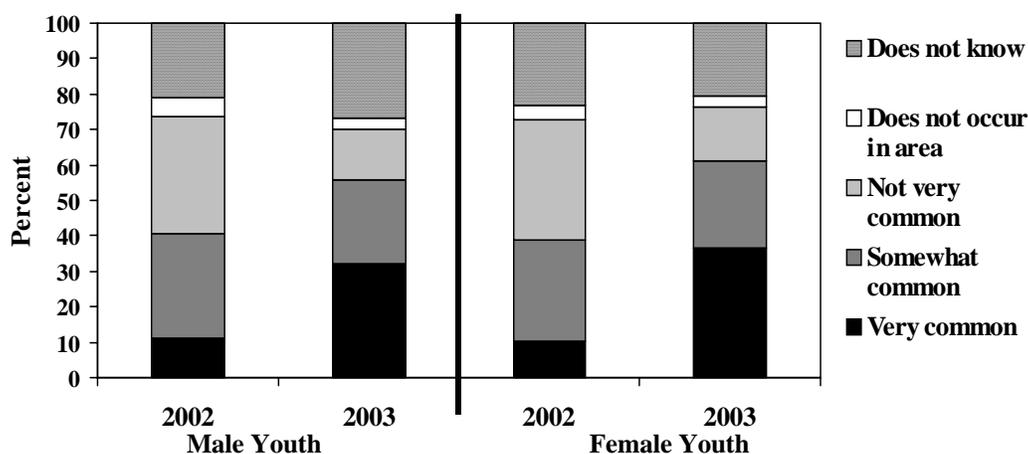
Among those who had been tested in 2003, 36% of male youth and 41% of female youth reported that they had received counseling about ways of transmission and other HIV/AIDS related information.

Slightly under half of youth in 2003 reported that they would be interested in getting an HIV test voluntarily. When asked if they knew where in Almaty a person could receive an HIV test, the most frequently named place was a hospital or clinic with 43% of male youth and 47% of female youth responding as such. The next most frequently named place was the Center of AIDS named by 26% of male youth and 31% of female youth followed by a venerological or dermatological dispensary (17% of male youth and 23% of female youth). Male youth were more likely than female youth to not know where a person can get an HIV test (28% vs. 20%, respectively).

Youth: Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred

Respondents were asked about injection drug use in the area as well as about their personal drug use. As in the representative population, youths' opinion about drug use in the area increase substantially between 2002 and 2003 (Figure 49). In 2002, 11% of male youth thought that injection drug use was very common in the unit of the city in which they were interviewed and in 2003, this proportion had almost tripled to 32%. Similarly, among female youth, the proportion that thought injection drug use was very common in the area more than tripled from 10% in 2002 to 37% in 2003. Only 3% of youth thought that injection drug use did not occur in the area but approximately two-fifths did not know whether injection drug use occurred in the unit.

Figure 49. Youths' opinion of injecting drug use in city unit of interview.



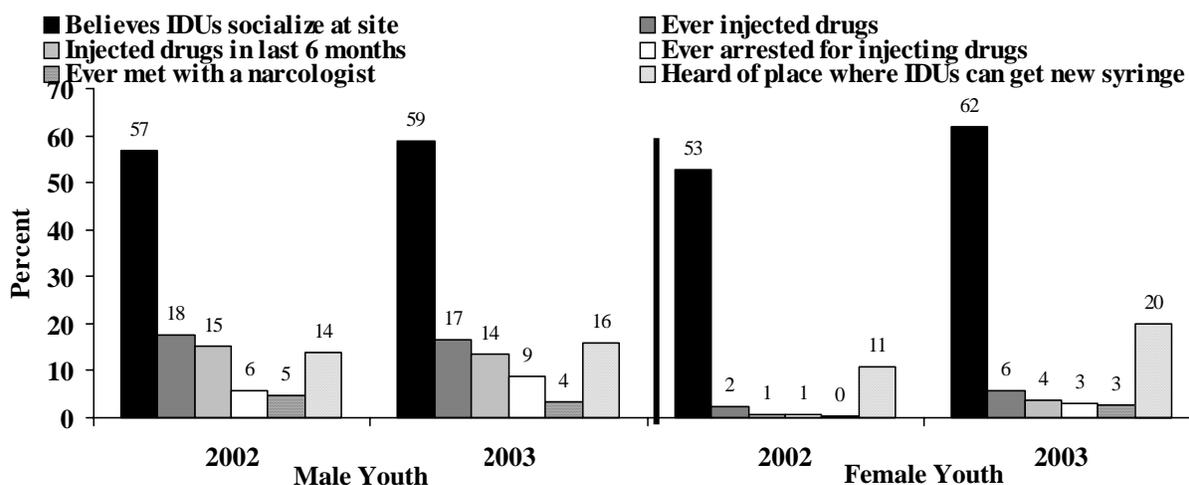
Youth: Opinion whether Injection Drug Users Socialize at the Site

Over half of male and female youth thought that injection drug users socialized at the interview site (Figure 50). Approximately 14% of male youth and 11% of female youth thought that injection drug users did not socialize at the site and roughly a third reported that they did not know whether or not injection drug users socialized there.

Youth: Self-reported Injection Drug Use and Knowledge of Needle Exchange Sites

Male youth were substantially more likely than female youth to have ever injected drugs but the proportion of male and female youth who ever injected drugs was similar to the proportions of men and women who had done so in the representative sample. Among male youth who had ever injected drugs, the proportion who injected drugs in the past six months was 86% in 2002 and 81% in 2003. Female youth were also much less likely to have injected drugs recently compared to male youth but among those who had ever injected drugs, the proportion of female youth who had injected drugs during the past six months increased from 39% in 2002 to 63% in 2003. Youth were slightly less likely to have met with a narcologist or to have been arrested for injecting drugs than individuals in the representative sample. Approximately 15% of youth had heard of a place in the city where IDUs could obtain a new syringe.

Figure 50. Injecting drug use behavior among youth socializing at sites.



Youth: Contact with Treatment Facilities

As in the representative sample, the majority of male (88%) and female (87%) youth had visited a state medical clinic. Contact with private medical clinics was not as common with 39% of male youth and 54% of female youth having ever visited such a facility. A quarter of male youth and 30% of female youth had ever been to an emergency clinic. Approximately 12% of male and female youth had ever visited an infection hospital and 16% of male and 21% of female had ever visited a skin or venerological dispensary. Less than 10% of youth had ever visited a trust point or TB dispensary, talked with a private venerological or narcological doctor, or talked to an outreach or social worker about injection drug use.

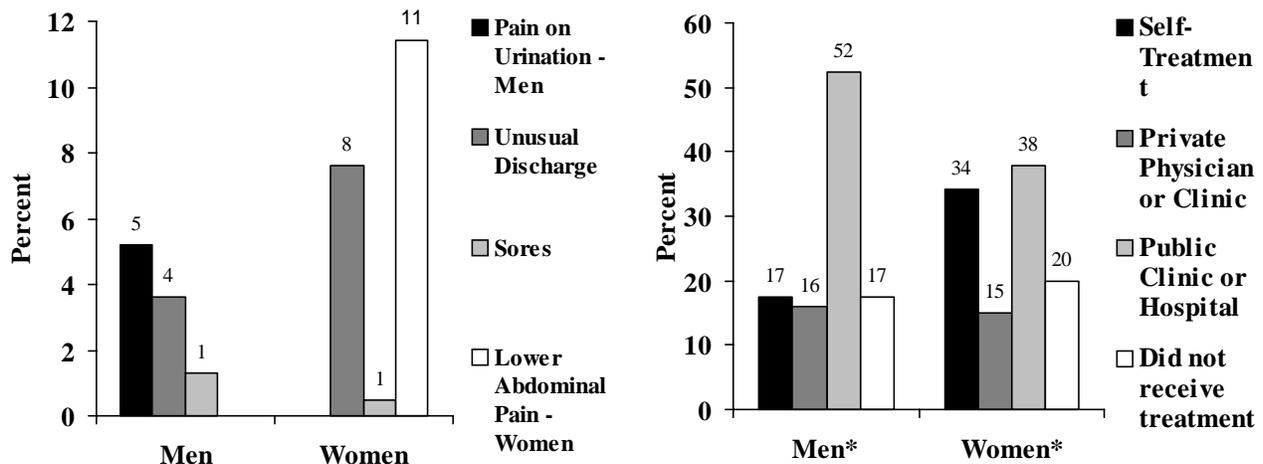
Youth: Knowledge of STI Symptoms

Youth had similar knowledge about STI symptoms as individuals in the representative sample. In 2003, 94% of male and female youth reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate that someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by male youth were discharge from penis (59%), burning pain on urination (27%), itching in genital area (23%), and genital ulcers or open sores (21%). The most commonly named signs and symptoms by female youth were discharge from vagina (64%), itching in genital area (40%), genital ulcers or open sores (25%), and lower abdominal pain (25%). Approximately 15% of male youth and 10% of female youth did not know any signs or symptoms that indicate that someone has a sexually transmitted disease or infection.

Youth: Self-Reported STI Symptoms

The proportion of youth who reported STI symptoms and sought treatment was similar to the representative population. In 2003, 6% of male youth and 14% of female youth reported that they had experienced STI symptoms in the past four weeks (Figure 51). The most commonly reported symptom among male youth was pain on urination (5%) and among female youth, lower abdominal pain (11%). Among those who had symptoms, a public clinic or hospital was the most commonly reported location where treatment was sought by male youth (52%) and female youth (38%). Treatment was sought from a private physician by 16% of male youth and 15% of female youth. Female youth were twice as likely to self treat their symptoms (34%) than male youth (17%). Approximately 17% of male youth and 20% of female youth did not seek any treatment for their symptoms.

Figure 51. STI symptoms and treatment among youth.

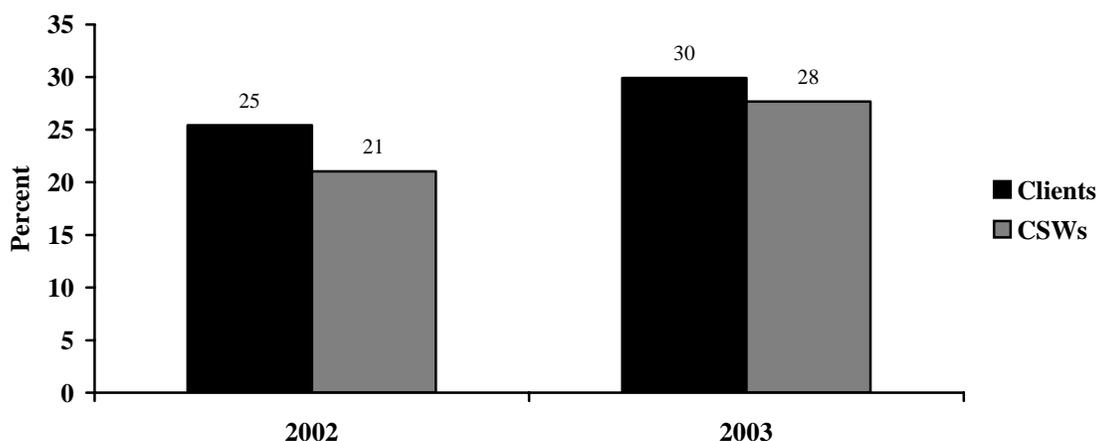


*Among the 6% of male youth and 14% of female youth with any symptoms in past 4 weeks.

Part 3: Commercial Sex Workers and Clients

Commercial sex workers are defined as women who reported receiving money in exchange for sex during the past three months. Clients of commercial sex workers are defined as men who reported giving money or other gifts in exchange for sexual service during the past three months. Commercial sex workers and clients were interviewed as part of the representative sample of patrons socializing at the sites. A quarter of men in the representative sample in 2002 and 30% in 2003 were clients of sex workers in the past three months (Figure 52). The proportion of women in the representative sample who were commercial sex workers was 21% in 2002 and 28% in 2003.

Figure 52. Proportion of commercial sex workers and clients in the representative sample.

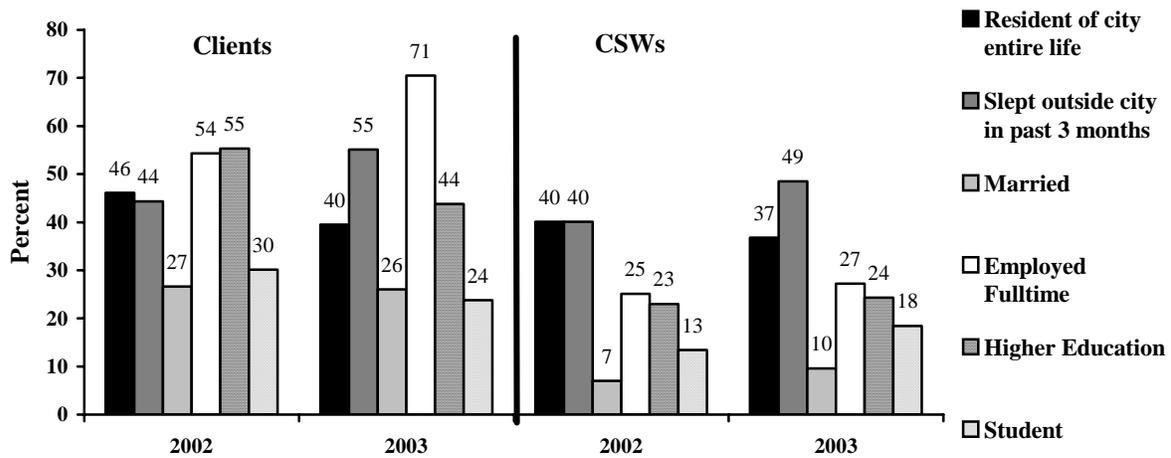


Clients and CSWs: Sociodemographic Characteristics

Male clients of CSWs did not differ significantly from men in the representative sample in terms of age, residence, education, and employment status. The mean age of clients was 27 years in 2002 and 26 years in 2003. Approximately 90% of clients were residents of the city with the majority living in the city for five or more years (Figure 53). As in the representative sample, the proportion of clients who were students decreased slightly from 30% in 2002 to 24% in 2003 and the proportion who were full-time employed and who had spent at least one night outside of the city increased from 2002 to 2003 (54% vs. 71% and 44% vs. 55%, respectively). Clients were slightly less likely to be married and to live within a ten minute walk of the site compared to the representative sample. A quarter of the clients were married compared to a third of men in the representative sample and 32% lived within a ten minute walk of the site compared to 37% in the representative sample.

CSWs are significantly different from the women in the representative sample in terms of age, nights spent outside the city, marital status, education, and employment status. CSWs, on average, were younger than women in the representative sample and than their clients. The average age of CSWs was 23 years in 2002 and 25 years in 2003. Less than 10% of CSWs were married and only a quarter of CSWs reported being employed fulltime. Approximately 15% of CSWs were current students and public high school was the highest educational attainment for half of CSWs. CSWs were much less likely to live within a ten minute walk of the site compared to women in the representative sample (26% vs. 40%).

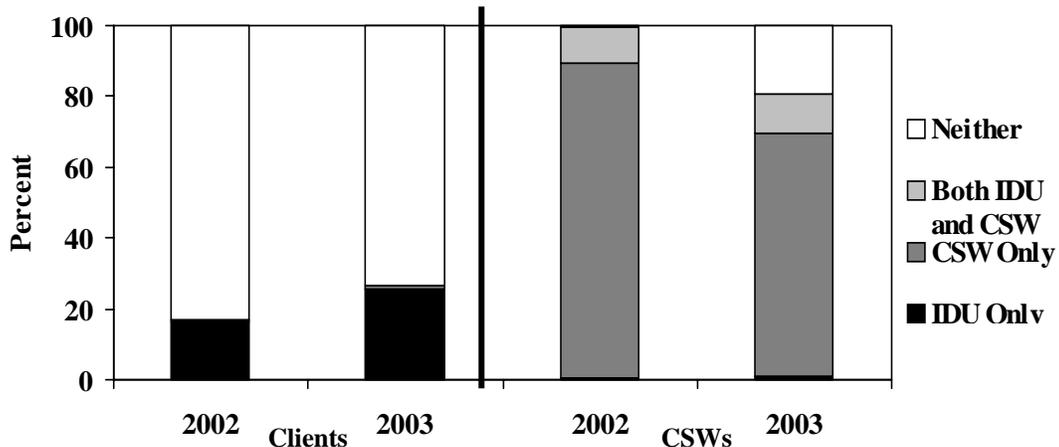
Figure 53. Sociodemographic characteristics of CSWs and clients.



Clients and CSWs: Interviewer Opinion of Respondent

Interviewers were asked to record their opinion whether a male respondent was an IDU and a female respondent an IDU and/or CSW (Figure 54). There was no substantial difference in the perceived risk behaviors for clients of commercial sex workers and men in the representative sample with approximately 15% of clients in 2002 and 25% in 2003 were identified as an IDU by the interviewer. While the majority of CSWs were identified as such by interviewers, the proportion that were not identified as a CSW increased from less than 1% in 2002 to 19% in 2003. Approximately 10% each year were thought to be both a CSW and an IDU.

Figure 54. Interviewer opinion of risk behavior among CSWs and clients.



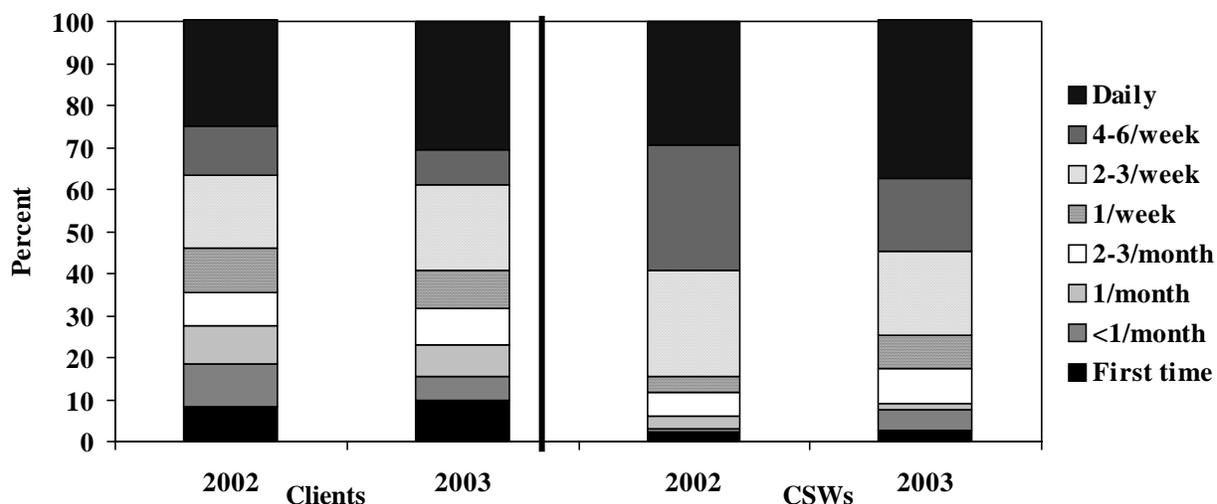
Clients and CSWs: Site Visitation

The frequency of site attendance by clients of CSWs did not differ significantly from that of men in the representative sample (Figure 55). Over two-thirds of clients first visited the site over one year ago, similar to the proportion of men in the representative sample. CSWs visited the sites much more frequently than clients and more frequently than women in the representative sample. The majority of CSWs visited the site multiple times per week. Approximately two-thirds of CSWs had first visited

the site over a year ago. On average, clients visited the site 3.4 days out of the past seven day and CSWs visited 4.3 of 7 days.

Clients and CSWs were less likely to walk to the site and more likely to come to the car by site than men in the representative sample. Approximately 42% of clients and 36% of walked to the sites, 36% of clients and 39% of CSW came to the site by car, and the remaining 22% of clients and 24% of CSWs came the site by public transportation.

Figure 55. Frequency of attendance at site by CSWs and clients.



Clients and CSWs: Reason for Site Visit

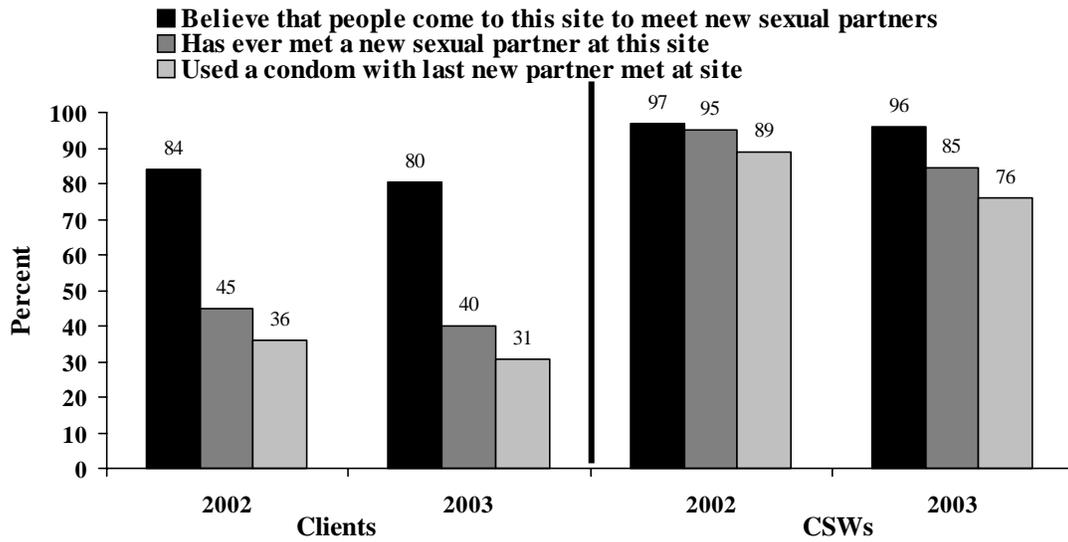
As in the representative sample, the majority of clients (79%) reported coming to the site to socialize with friends but 20% reported coming to the site to meet a new sexual partner and 29% came to drink alcohol, slightly higher proportions than men in the representative sample who came to the site to engage in these activities. CSWs were substantially more likely than women in the representative sample to report coming to the site to meet a new sexual partner (83%) and drink alcohol (29%) and less likely to report coming to the site to socialize with friends (47%).

Clients and CSWs: New Partnership Formation at Sites

As expected, a significantly higher proportion of CSWs and clients thought that people came to the site to meet new sexual partners compared to men and women in the representative sample. Over 80% of clients and 96% of CSWs thought that people came to the site to meet new sexual partners (Figure 56).

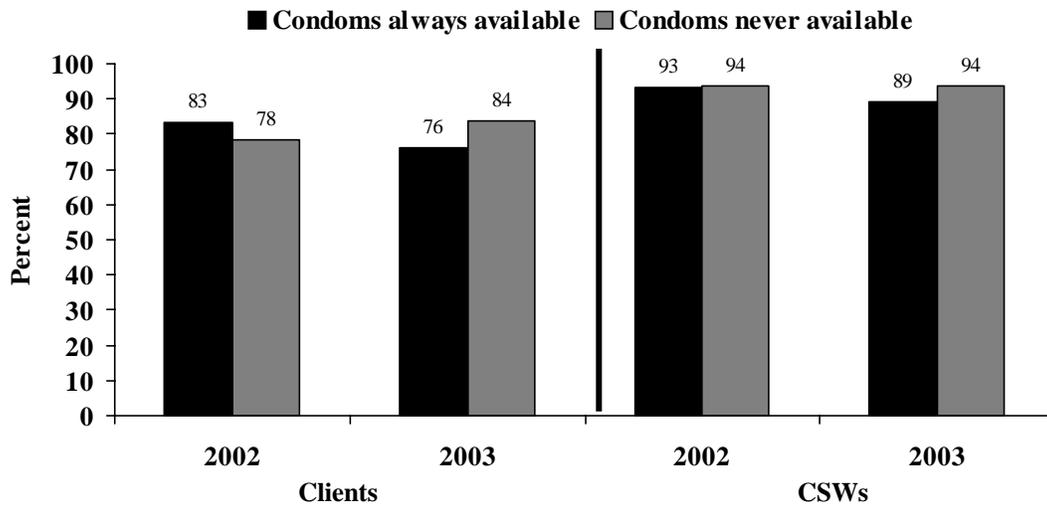
In fact, approximately two-fifths of clients and 95% of CSWs in 2002 and 85% of clients and CSWs in 2003 had met a new sexual partner at the interview site. Among clients who met a new sexual partner at the site, over three quarters used a condom with their last new partner met at the site, slightly higher than the proportion of men in the representative sample. The proportion of CSWs who used a condom with the last new partner met at the site was much higher, with over 90% having done so. CSWs were much more likely to have met a new partner at the site in the past seven days compared to clients.

Figure 56. Partner selection reported by CSWs and clients socializing at sites.



Condom use among CSWs and clients is high and availability at sites does not significantly influence use by these individuals (Figure 57).

Figure 57. Condom use with last new partner met at site by condom available at site.

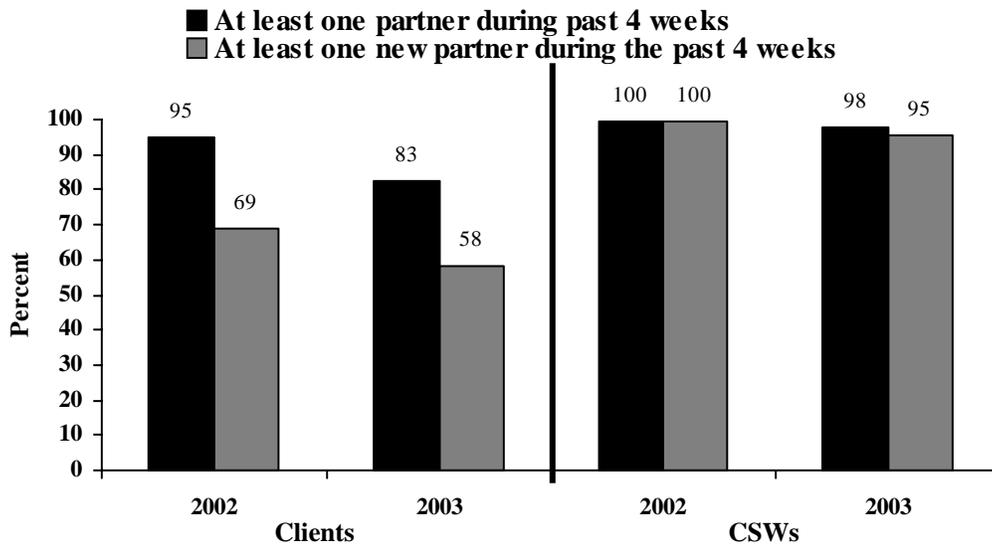


Clients and CSWs: Number of Sexual Partners

Clients of CSWs were much more likely than men in the representative sample to have had a new sexual partner during the past four weeks although the proportion of clients with at least one new partner decreased from 69% in 2002 to 58% in 2003. Among those clients with at least one partner in the past four weeks, approximately 70% had a new sexual partner during that time period (Figure 58). These men were also more likely to have a greater number of total partners including more new partners, during the past 12 months. Over 70% of clients had four or more new partners in the past 12 months compared to less than half of men in the representative sample.

Almost all CSWs reported having at least one new partner in the past four weeks. Over 70% of CSWs reported four or more new sexual partners in the past four weeks and 96% of CSWs in 2002 and 87% in 2003 had 15 or more new partners during the past 12 months. The majority of CSWs (>85%) went to only one or two sites to look for clients.

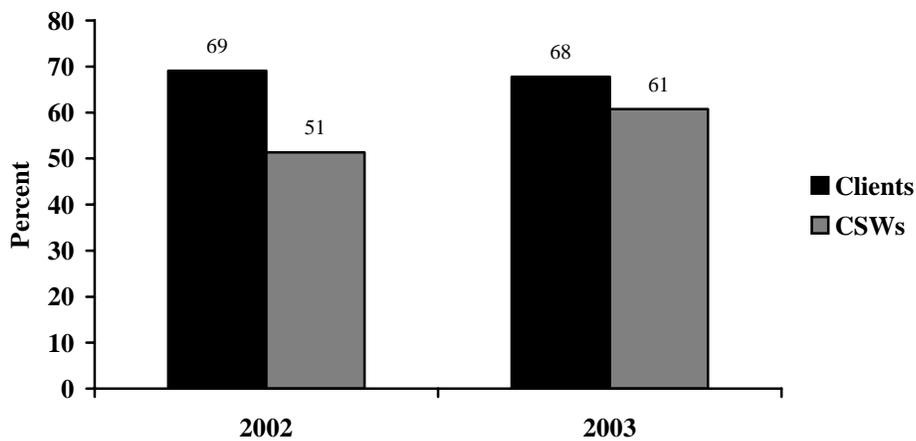
Figure 58. Proportion of CSWs and clients with at least one sexual partner during the past four weeks.



Clients and CSWs: Regular Sexual Partnerships

Over two thirds of men who gave money in exchange for sex during the past three months had a long-term sexual partner (Figure 59). Regular partnerships among women who received money in exchange for sex during the past three months ranged from 51% in 2002 to 61% in 2003.

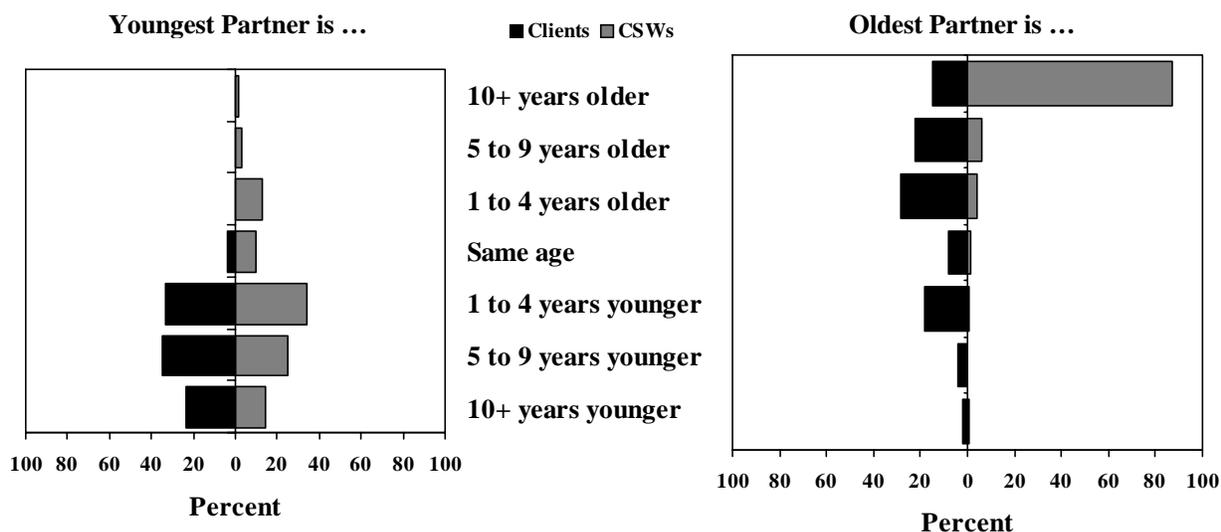
Figure 59. Regular partnerships of CSWs and clients.



Clients and CSWs: Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months. The distribution of the age difference between clients and CSWs is substantially different than men and women in the representative sample. The youngest partner of the majority of clients (95%) and CSWs (83%) was younger than themselves (Figure 60). The oldest partner for clients was younger than a quarter of clients and older than two-thirds. The oldest partner for 87% of CSWs was 10 or more years older. On average, the youngest partner for clients was 6.6 years younger and the oldest partner was 3.4 years older. Among CSWs, the youngest partner was an average of 3.9 years younger and the oldest partner was an average of 22.2 years older.

Figure 60. Age difference between respondent and youngest/oldest partner in past 12 months.



Clients and CSWs: Gay Sex

Clients of CSWs were almost twice as likely to have engaged in sex with another man in the past four weeks compared to the representative sample but the proportion was still small. The proportion of clients reporting having sex with another man in the past four weeks was 1.8% in 2002 and 1.4% in 2003.

Clients and CSWs: Self-Reported Condom Use

Condom use was high among CSWs and their clients (Figure 61). Condom use by CSWs and clients was higher than among individuals in the representative sample. Over 90% of clients had ever used a condom. Among those clients who had a new partner in the past four weeks, 85% reported using a condom with their last new partner. Clients were also asked about consistency of condom use. Among those who had a new partner in the past four weeks, approximately two thirds reported always using a condom with new partners during this time period, one third reported sometimes using a condom, and less than 5% never used condoms. As in the representative sample, not liking condoms (55%) and trusting partner (29%) were the most common reasons given for not using a condom with the last new partner. Condom use by clients with regular partners was lower with approximately 40% using a condom at last sex with a regular partner.

Condom use by CSWs was much higher than women in the representative sample. Only 1% of CSWs had never used a condom. Approximately 95% of CSWs used a condom with their last new partner and approximately two-thirds also used a condom at last sex with a regular partner. As with women in the representative sample, the proportion who reported that they always used condoms with new partners was slightly lower. Approximately 80% of CSWs reported that they always used condoms with new partners in the past four weeks. Less than 3% reported never using condom with new partners in the past four weeks.

In 2003, CSWs were asked specifically about condom use the last time then received money in exchange for sex and 93% reported using a condom the last time. Of those who used a condom, 44% of CSWs reported that they suggested using the condom, 36% said that the decision was made jointly with their partner, and 11% said that their partner suggested using the condom. Among those CSWs who did not use a condom last time they received money in exchange for sex, the most common reasons were that their partner protested (33%), they do not like condoms (28%), and they trusted their partner (28%).

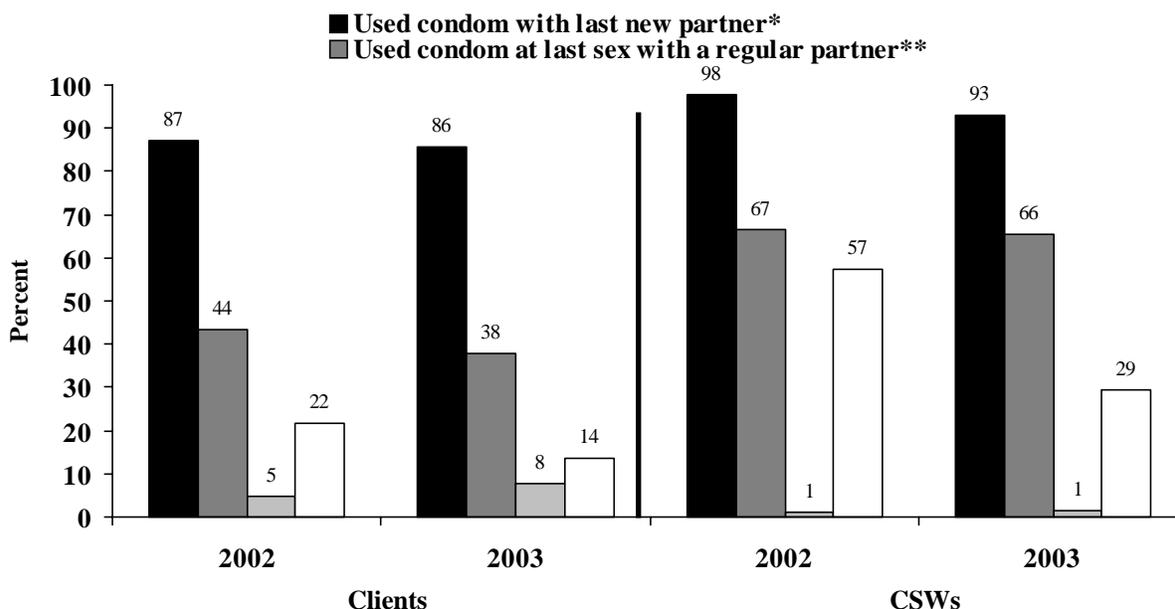
Clients and CSWs: Perceived Condom Effectiveness

Clients were slightly more likely to report having a condom break than individuals in the representative sample. Among those who use condoms and had a partner in the past 12 months, 29% reported that they had a condom break during this time period. Clients had the same perception of condom effectiveness as men in the representative sample with approximately one third believing they are very effective in preventing STIs including HIV and 2% believing that they are not effective at all. Clients believed that a reasonable price for a condom is 65 tenge, slightly higher than the average reasonable price reported by men in the representative sample.

CSWs were almost twice as likely to report having a condom break than women in the representative sample with approximately 40% reporting so. CSWs had a similar perception of condom effectiveness as women in the representative sample with approximately one third believing they are very effective in preventing STIs including HIV and 3% believing that they are not effective at all. CSWs believed that a reasonable price for a condom is 60 tenge, slightly lower than the average reasonable price reported by women in the representative sample and by clients.

Clients and CSWs: Condom Availability

Clients were slightly more likely to have a condom with them at the time of the interview than men in the representative sample. However, the proportion who had a condom decreased slightly from 22% in 2002 to 14% in 2003. CSWs were also substantially more likely than women in the representative sample and more likely than clients to have a condom with them at the time of the interview. As with the clients, the proportion who reporting having a condom at the time of the interview decreased from 57% in 2002 to 29% in 2003 but the proportion of interviewees who saw the condom increased from 12% in 2002 to 27% in 2003. As in the representative sample, Durex was the most common brand of condom seen. Among those who had a condom with them, a third of clients and half of women had a Durex brand condom.

Figure 61. Condom use by CSWs and clients.

*Among individuals with at least one new partner in the past four weeks

** Among individuals with a regular partner

Clients of CSWs were most likely to have obtained their last condom from a pharmacy or kiosk, the same locations as men in the representative sample. Where CSWs obtained the last condom used varied. In 2002, CSWs were most likely to have obtained their last condom from a pharmacy or kiosk and in 2003 from a pharmacy or their partner.

Among those who had ever used a condom, Durex was most commonly reported (24% of clients and 34% of CSWs) as the last brand of condom used. However, 41% of clients and 34% of CSW did not remember or know the last brand of condom used.

Clients and CSWs: Exposure to HIV/AIDS Education

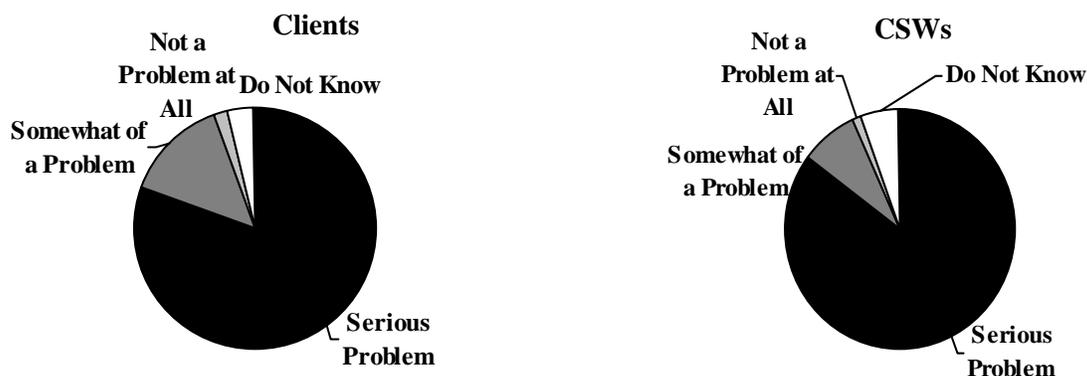
In 2002, 17% of clients and 19% of CSWs had attended an AIDS education session in the past 12 months, similar to the proportions of men and women in the representative sample. In 2003, individuals socializing at the sites were asked if they had heard or seen any information about HIV/AIDS in the past 12 months and approximately 85% of clients and CSWs, same as the proportions of men and women in the representative sample, responded in the affirmative. Television was the most frequently reported source from which this information was received with two-thirds of clients and 57% of CSWs having done so. Other commonly reported sources included newspapers, magazines, leaflets, and posters. A quarter to a third of the socializing population also reported hearing or receiving information about HIV/AIDS from the radio, from a friend or relative, and/or from a doctor or health care worker. CSWs were more likely than clients to report having received information from a doctor or health care worker (36% vs. 27% respectively) and less likely to report receiving information in school (12% vs. 22%) but the proportions receiving information from the other sources were approximately equal among clients and CSWs. CSW were slightly less likely than

women in the representative sample to have received information about HIV/AIDS via television, newspapers, magazines, radio, school, and outreach workers.

Clients and CSWs: Opinion about HIV/AIDS as a Problem in Almaty

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Almaty. As in the representative sample, the majority of clients (80%) and CSWs (85%) interviewed thought that HIV/AIDS was a serious problem in Almaty (Figure 62). Less than 2% thought that it was not a problem at all in the city.

Figure 62. Client and CSW opinion of HIV/AIDS as a problem in Almaty.



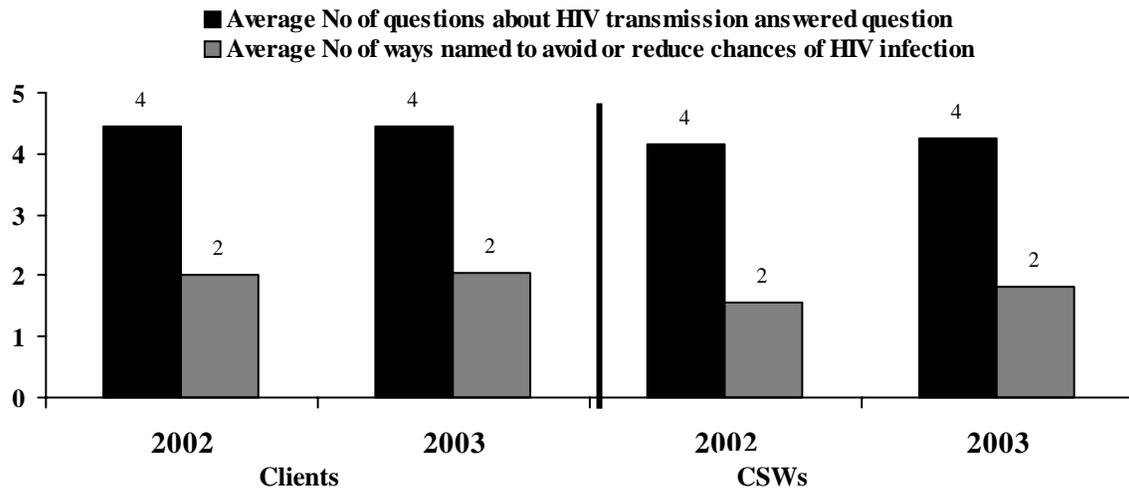
Clients and CSWs: Knowledge of HIV/AIDS

Almost all clients and CSWs responded that it is possible to become infected with HIV/AIDS through sexual contact without a condom. Clients and CSWs were asked six questions about possible ways that HIV could be transmitted (Figure 63). On average, clients answered the same number of questions correctly (4.4 questions) compared to men in the representative sample. CSWs answered on average answered slightly fewer questions correctly (4.2 questions) than women in the representative sample.

CSWs and clients were more likely than individuals in the representative sample to name using condoms as a way to avoid or reduce the risk of getting HIV. Approximately 87% of clients named condoms as a way to prevent transmission while 94% of CSWs did so. Clients and CSWs named the fewer number ways to avoid or reduce the risk of HIV with a mean of 2.0 and 1.7 ways respectively.

As in the representative sample, three-quarters of those interviewed in 2002 and over 85% interviewed in 2003 responded that a person who looks healthy can be infected with HIV. Approximately 15% of clients and 7% of CSWs responded that they did not know.

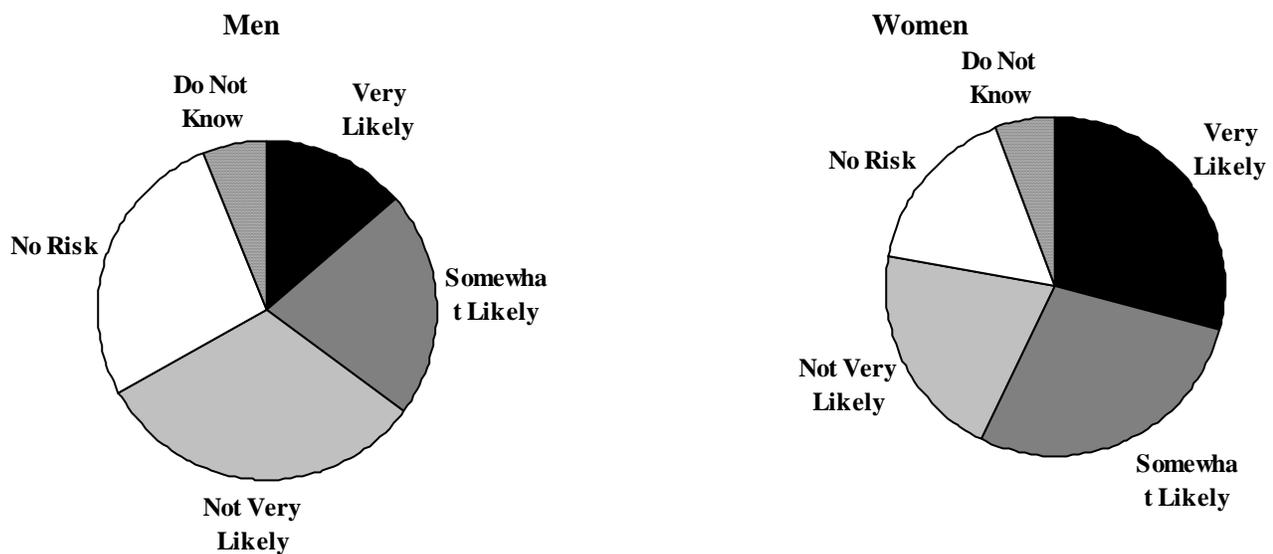
Figure 63. Knowledge of CSWs and clients about HIV transmission and ways to avoid or reduce risk of transmission.



Clients and CSWs: Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus. Clients were slightly less likely than men in the representative sample to report that they were at no risk at all of contracting the HIV/AIDS virus with 27% of clients reporting so. CSWs were substantially more likely than women in the representative sample to think that they were very or somewhat likely to contract the virus with 57% of CSWs reporting so (Figure 64). Only 16% of CSWs thought that they were at no risk at all.

Figure 64. Perception of likelihood of contracting the HIV/AIDS virus.



Clients and CSWs: HIV Testing

The proportion of clients tested for HIV in the past 12 months was similar to the proportion tested in the representative sample but decreased from 53% in 2002 to 43% in 2003. Slightly over half of those tested were tested voluntarily.

A similar proportion of CSWs had been tested for HIV in the past 12 months compared to women in the representative sample but the proportion tested decreased from 83% in 2002 to 68% in 2003. Almost two-thirds of those tested were tested voluntarily.

Among those who were tested for HIV in 2003, a third of clients, similar to the proportion of men in the representative sample, reported that they had received counseling about the ways of transmission and other HIV/AIDS related information. CSWs were slightly more likely than women in the representative sample to report that they had received counseling with 52% reporting so.

Clients and CSWs were more likely than individuals in the representative population to report being interested in a voluntary HIV test. Half of clients and 70% of CSWs in 2003 replied that they would be interesting in getting an HIV test voluntarily. In 2003, respondents were also asked if they knew where in Almaty a person could receive an HIV test. The most frequently named place was a hospital or clinic with 44% of clients and 49% of CSWs responding as such. The next most frequently name place was the Center of AIDS named by 37% of clients and 36% of CSWs. CSWs were more likely than women the representative sample to name a venerological or dermatological center as a testing place (39% vs. 25% respectively). As in the representative sample, clients were more likely than CSWs to report not knowing where a person could get an HIV test (10% vs. 19% respectively).

Clients and CSWs: Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred

CSWs and clients were also asked about injection drug use. The proportion of clients and CSWs who thought that injecting drug use was very or somewhat common in the area increased substantially from 2002 to 2003 (Figure 65). Almost two thirds of clients and three quarters of CSWs reported that drug use was very or somewhat common in 2003 compared to less about half who responded as such the year before. Less than 5% of clients and CSWs reported that drug use does not occur in the area.

Clients and CSWs: Opinion about whether IDUs Socialize at Site

CSWs and clients were slightly more likely than the representative population to believe that IDUs socialized at the interview site with two-thirds of clients and three-quarters of CSWs believing so (Figure 66).

Figure 65. CSWs' and clients' opinion of injecting drug use in unit of interview.

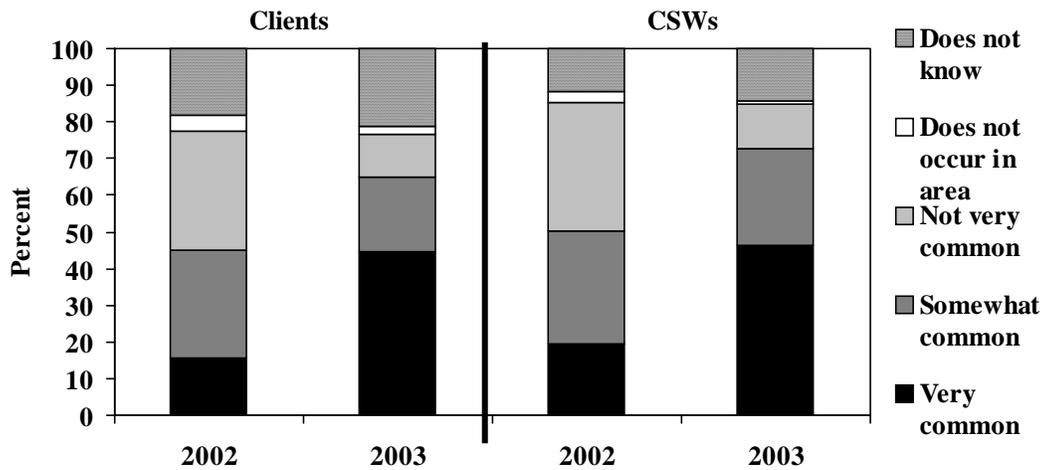
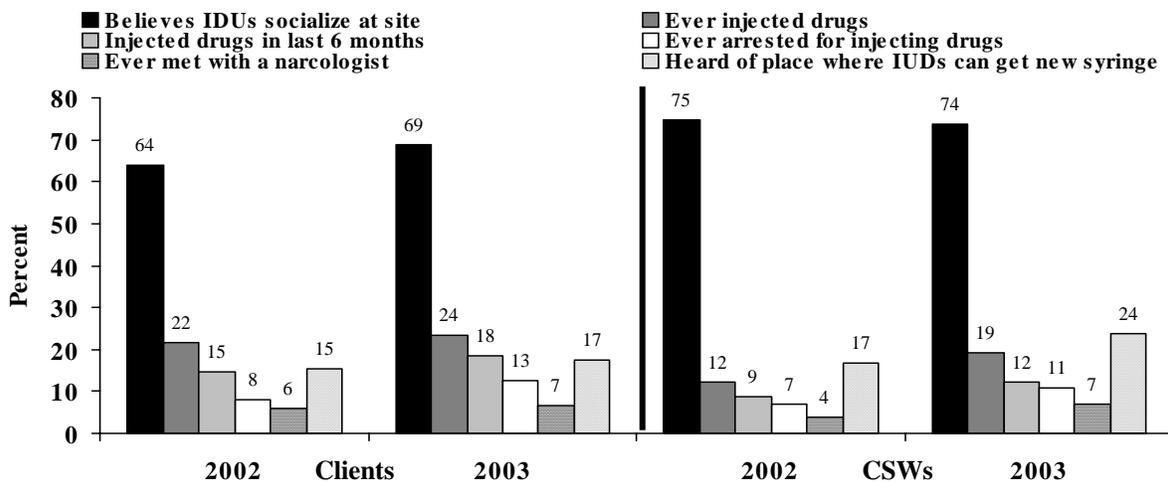


Figure 66. Injecting drug use behavior of CSWs and clients.



Clients and CSWs: Self-reported Injecting Drug Use

Clients reported injection drug use more frequently than CSWs and slightly more frequently men in the representative sample. Approximately two-fifths of clients had ever injected drugs and of those clients that ever inject drugs, approximately two thirds of clients in 2002 and 78% in 2003 had injected drugs in the past six months. Around 10% of clients had ever been arrested for injecting drugs and 6% had visited a narcologist. Approximately 15% of clients had heard of a place in the city where IDUs can get a new syringe.

CSWs were much less likely than their clients to have injected drugs but significantly more likely than women in the representative sample to have injected drugs. Injection drug use among CSWs increased from 2002 to 2003. Approximately 12% of CSWs in 2002 had ever injected drugs compared to 19%

in 2003. However, of those who had ever injected drugs, the proportion who had injected in the past six months decreased from 70% in 2002 to 63% in 2003. The proportion of CSWs who had been arrested for injecting drugs increased from 7% in 2002 to 11% in 2003 and similarly, the proportion who had visited a narcologist increased from 4% to 7%. Approximately 17% of CSWs in 2002 and 24% in 2003 had heard of a place in the city where IDUs can get a new syringe.

Clients and CSWs: Contact with Treatment Facilities

In 2002, clients had similar contact with medical treatment facilities as men in the representative sample with a couple of notable exceptions. Clients were more likely to have ever and to have more recently visited a private medical doctor, a skin/venerological dispensary, and a private venerological doctor than men in the representative sample.

CSWs also had similar contact with medical treatment facilities as women in the representative sample with a couple of exceptions. CSWs were substantially more likely to have ever and to have more recently visited a skin/venerological dispensary and a private venerological doctor compared to women in the representative sample. Additionally, CSWs were slightly more likely to have visited a private medical clinic than women in the representative sample.

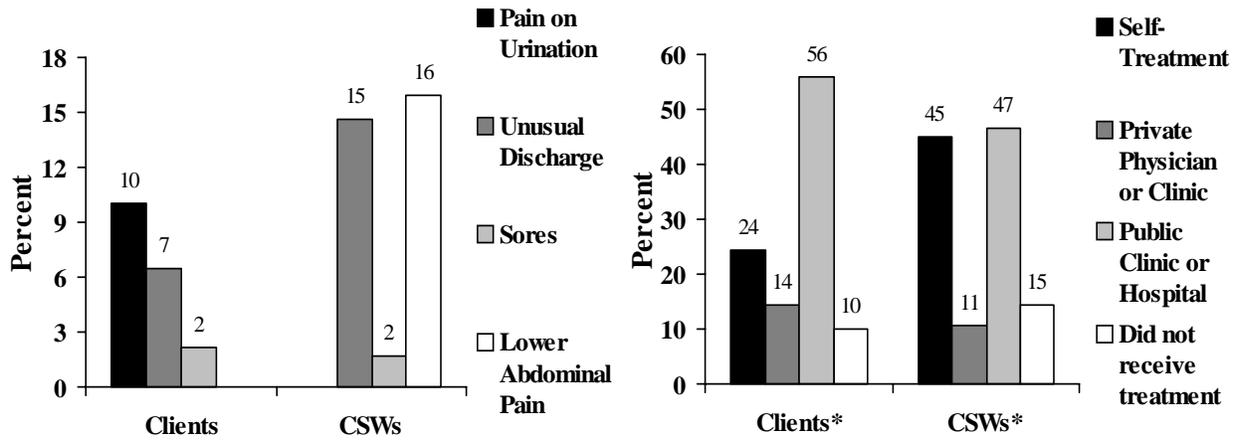
Clients and CSWs: Knowledge of STI Symptoms

In 2003, approximately 94% of clients and CSWs, the same proportion as in the representative population, reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by clients were discharge from penis (61%), burning pain on urination (31%), itching in genital area (28%), and genital ulcers or open sores (23%), the same as those named by men in the representative sample. CSWs reported more signs and symptoms than women in the representative sample. The most commonly named signs and symptoms by CSWs were discharge from vagina (79%), itching in genital area (46%), genital ulcers or open sores (32%), and lower abdominal pain (31%). Approximately 15% of clients and only 3% of CSWs did not know any signs or symptoms which indicate that someone has a sexually transmitted disease or infection.

Clients and CSWs: Self-Reported STI Symptoms

In 2003, clients and CSWs were more likely to report experiencing STI symptoms than individuals in the representative sample. Approximately 11% of clients and 23% of CSWs reported that they had experienced STI symptoms in the past four weeks (Figure 67). The most commonly reported symptom among clients was pain on urination (10%) and among CSWs, lower abdominal pain (16%). Among those who had symptoms, a public clinic or hospital was the most commonly reported location where treatment was sought by clients (56%) and almost equal proportions of CSWs sought treatment for a public clinic or hospital (49%) as self-treated (45%). Treatment was not sought by 10% of clients and 15% of CSWs.

Figure 67. STI Symptoms and treatment.



*Among the 11% of clients and 23% of CSWs with any symptoms in past 4 weeks.

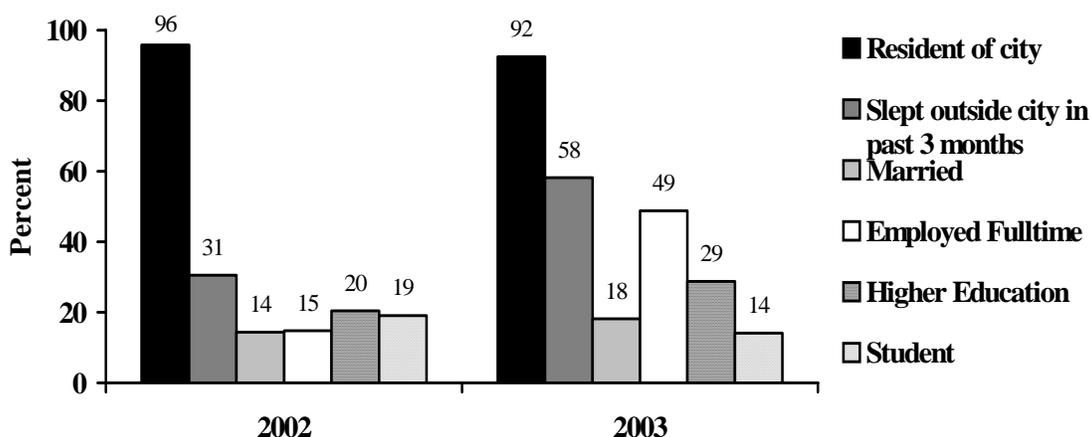
Part 4: Injection Drug Users

The target of 200 interviews with IDUs was achieved each year but oversampling of IDUs in 2002 was necessary to achieve the target number. The majority of IDUs, 90% in 2002 and 83% in 2003, were men. Because so few female IDUs were interviewed, 27 in 2002 and 35 in 2003, much of the analysis will be restricted to male IDUs.

IDUs: Sociodemographic Characteristics

On average, male IDUs are younger than men in the representative sample with an average age of 25 years for male IDUs. Over 92% of male IDUs were residents of the city in which they were interviewed. However, the sociodemographic characteristics of the male IDUs in 2002 and 2003 were substantially different (Figure 68). The proportion that slept outside of the city in the past three months increased from 31% to 58%, the proportion who were employed full time increased from 15% to 49%, and who had at least some higher education from 20% to 29%. The proportion of male IDUs who were married and who were students remained relatively stable. In 2002, 14% were married and 19% students and in 2003, 18% were married and 14% were students.

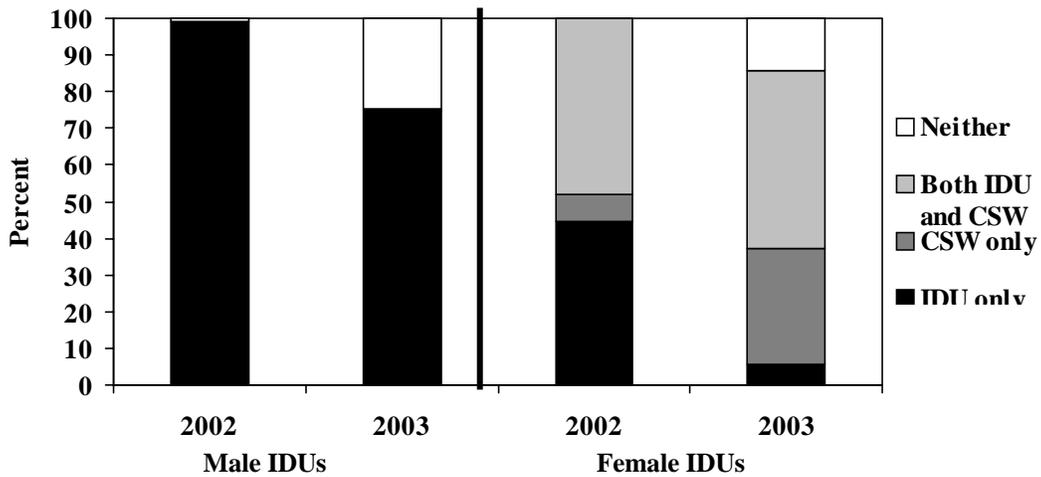
Figure 68. Sociodemographic characteristics of male IDUs.



IDUs: Interviewer Opinion of Respondent

At the start of each interview, interviewers were asked to record their opinion about risk behavior of the respondent. In 2002, 99% of male IDUs were identified as such by interviewers but in 2003, only three quarters were identified as such (Figure 69). A similar pattern was observed among female IDUs. In 2002, 93% were identified as IDUs including over half of these individuals who were also thought to be CSWs. In 2003, 54% were identified as an IDU and 90% of these individuals were also thought to be a CSW. Approximately one third were identified as only a CSW and 14% were not identified as either.

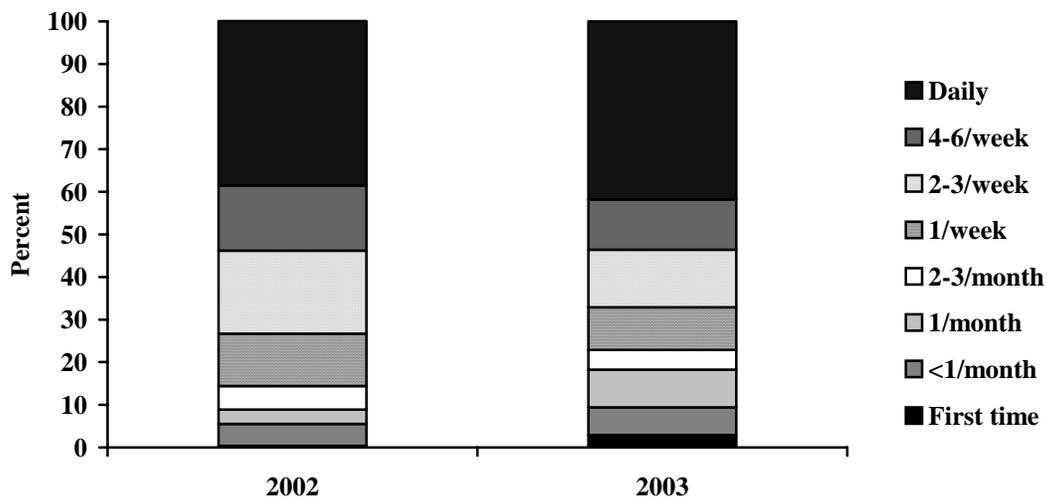
Figure 69. Interviewer opinion of IDU respondent.



IDUs: Site Visitation

Male IDUs visited the sites much more frequently than men in the representative sample. Almost 86% of male IDUs in 2002 and 77% in 2003 visited the site at least once a week (Figure 70). On average, male IDUs visited the interview site four days in the past seven. Over three quarters of male IDUs first visited the interview site over a year ago, a slightly higher proportion than among men in the representative sample. Male IDUs were more likely to walk to the site than men in the representative sample with 57% of male IDUs doing so. Approximately 23% of male IDUs came to the site by public transportation and another 20% came to the site by car.

Figure 70. Frequency of attendance at site by male IDUs.



IDUs: Reason for Site Visit

Male IDUs were slightly more likely than men in the representative sample to report coming to the site to socialize with friends, to drink alcohol, and to meet a new sexual partner. The majority of male IDUs (84%) reported coming to the site to socialize with friends, 29% came to drink alcohol, and 18% came to meet a new sexual partner.

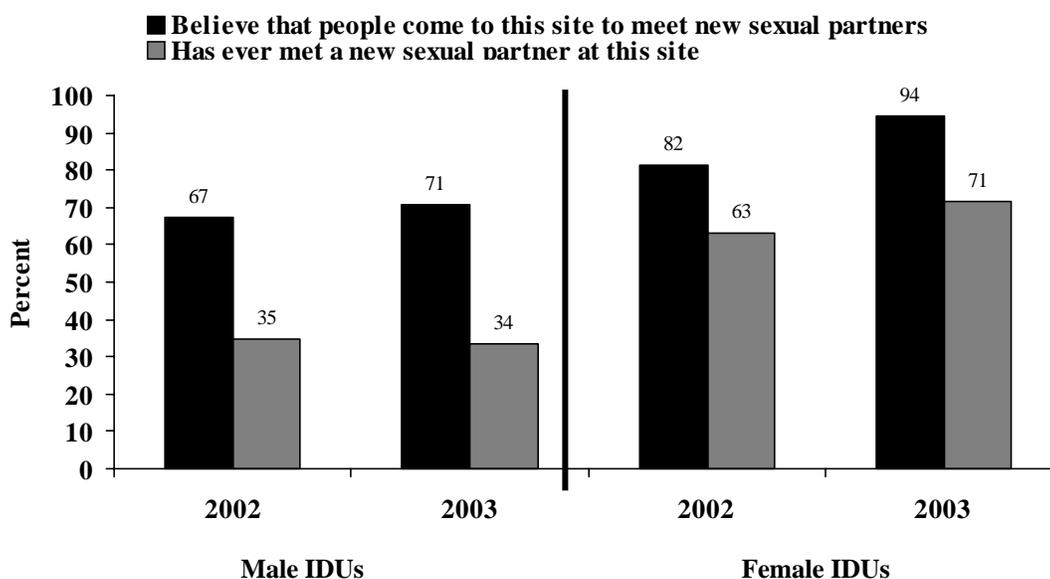
IDUs: New Partnership Formation at Sites

IDUs were asked about whether people came to the interview site to meet new sexual partners (Figure 71). Over two thirds of male IDUs thought people came to the site to meet new sexual partners, similar to the proportion of men in the representative sample. The proportion of female IDUs who thought that people came to the interview site to meet new sexual partners was even higher with 82% in 2002 and 94% in 2003 reporting so.

Male IDUs were slightly more likely than men in the representative sample to meet a new partner at the site with over one third of male IDUs reporting doing so. However, among those who had met a new partner at the site, male IDUs in 2003 were more likely to have recently met a new partner at the site with 44% have done so within the past seven days whereas only 18% of male IDUs in 2002 had met a new partner at the site during this time period. Approximately two-thirds of female IDUs reported meeting a new partner at the site, a proportion higher than in the representative sample.

Condom use with the last new partner among male IDUs was slightly less than among men in the representative sample. In 2002, 55% of male IDUs and 67% in 2003 reported using a condom with their last new partner met at the site. Condom availability at the site did not increase use among male IDUs.

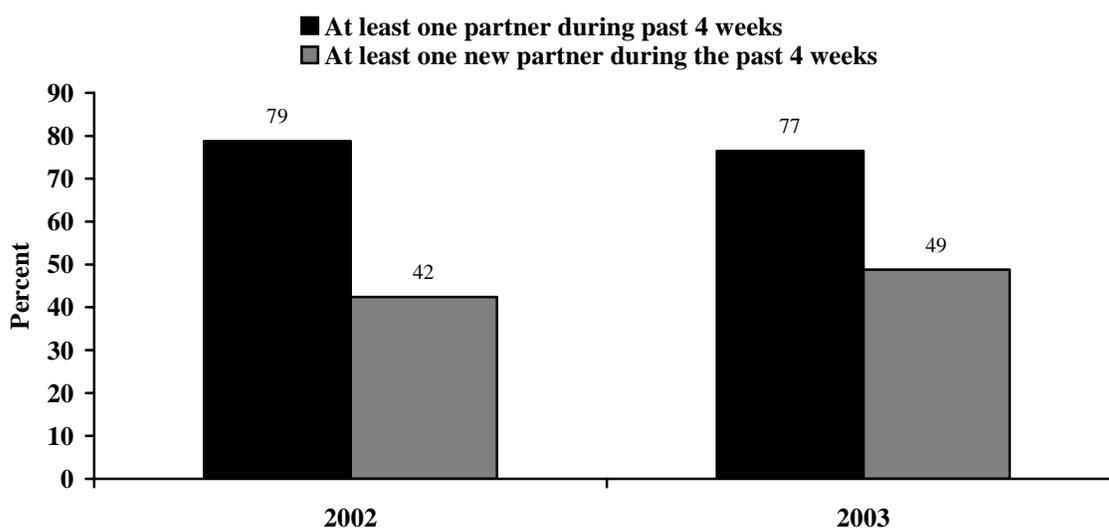
Figure 71. Partner selection reported by IDUs socializing at the sites.



IDUs: Number of Sexual Partners

Over three-quarters of male IDUs had at least one sexual partner in the past four weeks, slightly less than the proportion of men in the representative sample with at least one partner during this timeframe (Figure 72). However, among those with at least one partner in the past four weeks, male IDUs were more likely than men in the representative sample to have had a new partner during the same time period. In 2002, 54% of male IDUs with at least one partner in the past four weeks had a new partner during that time period and in 2003, 64% did, compared to approximately half of men in the representative sample. Male IDUs also were less likely to have had at least one sexual partner in the past 12 months than men in the representative sample and the proportion who had a new partner during this period was not different from the representative sample in 2002. However, in 2003, among people who had had at least one new partner in the past 12 months, 89% of male IDUs had a new partner during this time period compared to only 73% of men in the representative sample.

Figure 72. Proportion of male IDUs with at least one sexual partner in past four weeks.

IDUs: Regular Sexual Partnerships

Male IDUs were less likely to have a regular, long-term sexual partner than men in the representative sample. Approximately two thirds of male IDUs had a regular, long-term sexual partner compared to three-quarters of men in the representative sample.

IDUs: Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months (Figure 73). Among male IDUs, the average age for the youngest partner was 5.8 years younger and the average age of the oldest partner was 3.0 years older. Among female IDUs, the average age for the youngest partner was 4.9 years younger and the average age for the oldest partners was 21.5 years older.

Figure 73. Age difference between respondent and youngest/oldest partner in past 12 months.

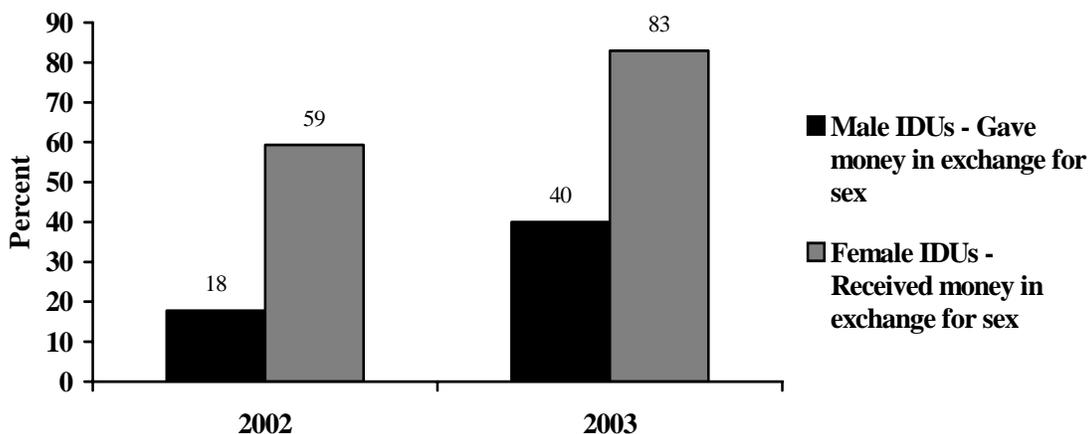


IDUs: Transactional Sex

The proportion of male IDUs who gave money in exchange for sex during the past three months also increased from 2002 to 2003. In 2002, 18% of male IDUs had given money in exchange for sex and in 2003 this proportion had increased to 40%.

Although there were few female IDUs interviewed, the proportion that reported having received money in exchange for sex during the past three months was substantially greater than women in the representative sample and increased from 59% in 2002 to 83% in 2003 (Figure 74).

Figure 74. Transactional sex among IDUs.



IDUs: Gay Sex

Male IDUs were slightly more likely than men in the representative sample to have had sex with another man in the past four weeks. Approximately 2% of male IDUs reported having sex with a man in the past four weeks compared to less than 1% in the representative sample.

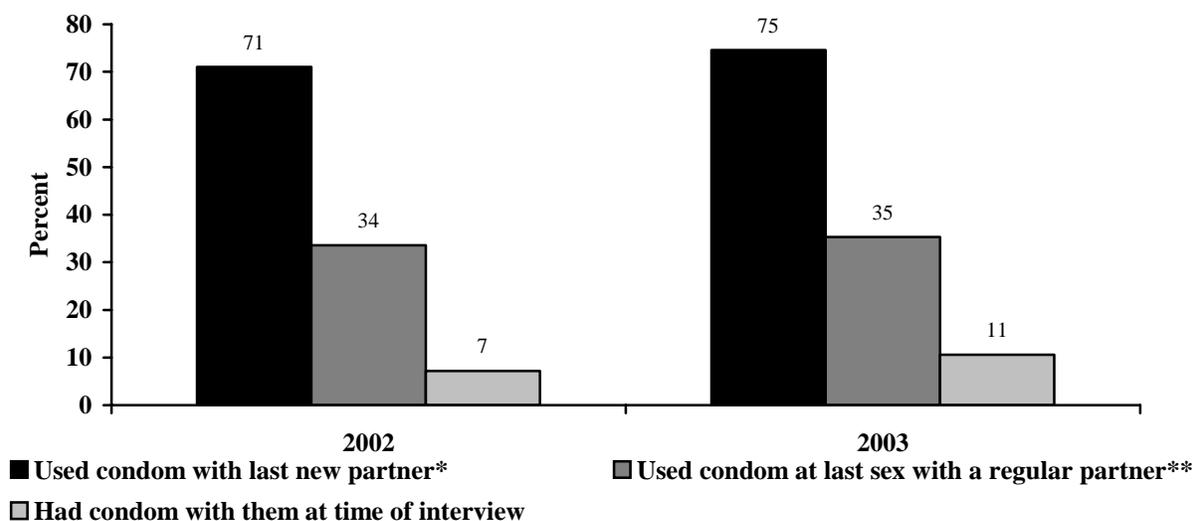
IDUs: Self-Reported Condom Use

Among those with at least one partner in the past four weeks, approximately three quarters of male IDUs used a condom with their last new partner during this time period (Figure 75). Among those with at least one new partner in the past four weeks, the proportion who reported always using a condom with new partners was 54%, a slightly smaller proportion than in the representative sample. Among male IDUs who did not use a condom at last sex with a new partner, the most common reasons given for not using a condom were that they did not like condoms (62%), they trusted their partner (19%), and/or they did not have condoms at hand (19%). Male IDUs were less likely to have used a condom at last sex with a regular partner with a third of male IDUs using a condom at last sex with a regular partner.

IDUs: Perceived Condom Effectiveness

Among those who use condoms and had a partner in the past 12 months, 22% of male IDUs reported that they had had a condom break during this period. A quarter of male IDUs reported that condoms were very effective in preventing STIs including HIV. Only 4% thought that they were not effective at all. On average, male IDUs thought that 51 tenge was a reasonable price for a condom, an average price that was less than what men in the representative sample thought as a reasonable price for a condom.

Figure 75. Condom use by male IDUs.



*Among individuals with at least one new partner in the past four weeks

** Among individuals with a regular partner

IDUs: Condom Availability

Approximately 10% of male IDUs had a condom with them at time of interview. Durex was the most common brand of condom seen by the interviewers (71%). As in the representative sample, pharmacies and kiosks were named frequently by male IDUs as places where they obtained their last condom. Among those who had ever used a condom, Durex was most commonly reported as the last brand of condom used (20%). However, approximately 42% of male IDUs could not remember or did not know the last brand of condom used.

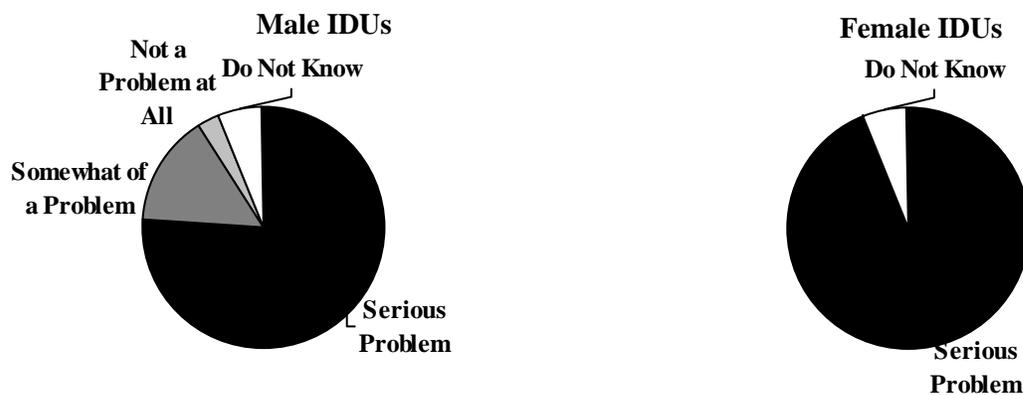
IDUs: Exposure to HIV/AIDS Education

In 2002, 9% of male IDUs had attended an AIDS education session in the past 12 months, a substantially smaller portion than men in the representative sample. In 2003, individuals socializing at the sites were asked if they had heard or seen any information about HIV/AIDS in the past 12 months and approximately 81% of IDUs responded in the affirmative, a similar proportion to that in the representative sample. Television was the most frequently reported source from which this information was received with 61% of male IDUs having done so. Other commonly reported sources included newspapers, magazines, leaflets, and posters but not as frequently reported as by men in the representative sample. A quarter of male IDUs also reported hearing or receiving information about HIV/AIDS from the radio, from a friend or relative, and/or from a doctor or health care worker.

IDUs: Opinion about HIV/AIDS as a Problem in Almaty

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Almaty. Male IDUs responded similarly to men in the representative sample. The majority of male IDUs (76%) thought that HIV/AIDS was a serious problem in Almaty and only 3% thought that it was not a problem at all in the city (Figure 76).

Figure 76. IDUs opinion of HIV/AIDS as a problem in Almaty.

IDUs: Knowledge of HIV/AIDS

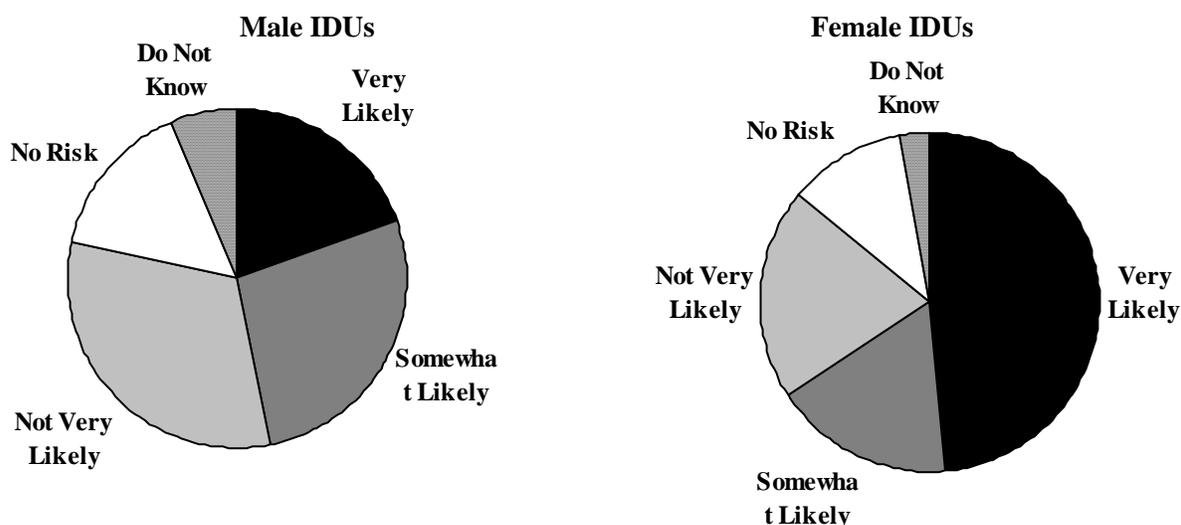
Male IDUs had a similar level of knowledge about how HIV/AIDS is transmitted compared to men in the representative sample. Male IDUs answered 4.3 of 6 questions correctly in 2002 and 4.6 questions correctly in 2003. On average, male IDUs also named a similar number of ways to avoid or reduce the risk of getting HIV as men in the representative sample. However, male IDUs were substantially more

likely than men in the representative sample to name avoid sharing needles as a way to avoid or reduce the risk of getting HIV. Over 72% of male IDUs named avoiding needle sharing as a way to avoid or reduce the risk of getting HIV compared to 42% of men in the representative sample who did. Over 80% of male IDUs stated that a person who looks health can be infected with HIV.

IDUs: Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus (Figure 77). IDUs were more likely than individuals in the representative sample to think that they are very or somewhat likely to contract the HIV/AIDS virus. Almost half of male IDUs thought that they were very or somewhat likely of contracting the HIV virus compared to 30% of men in the representative sample. Only 16% of male IDUs thought that they were at no risk at all for contracting the virus compared to 37% of men in the representative sample.

Figure 77. Perception of likelihood of contracting the HIV/AIDS virus.



IDUs: HIV Testing

As in the representative sample, the proportion of male IDUs who had been tested for HIV in the past 12 months decreased slightly from 59% in 2002 to 52% in 2003. However, male IDUs were still more likely than men in the representative sample to have been tested for HIV in the past 12 months. Among those tested, slightly less than 60% were tested voluntarily and testing for the remaining was obligatory.

Among those who were tested for HIV in 2003, 41% of male IDUs reported that they received counselling about the ways of transmission and other HIV/AIDS related information.

Two thirds of male IDUs in 2003 reported that they would be interested in getting an HIV test voluntarily, a much higher proportion than in the representative sample of men. In 2003, respondents were also asked where in Almaty a person could receive an HIV test. Approximately 40% of male IDUs named a clinic or hospital and/or the Center of AIDS as locations where an HIV test could be obtained. Two-fifths of male IDUs did not know where an HIV test could be obtained.

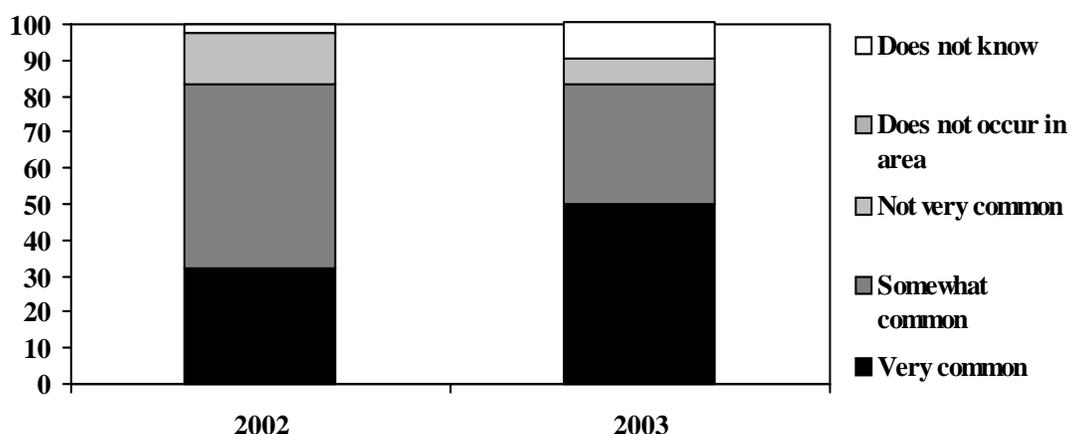
IDUs: Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred

Male IDUs were significantly more likely to report that injection drug use is very or somewhat common in the unit of the interview compared to men in the representative sample. The proportion of male IDUs who reported that drug use was very common increased from 32% in 2002 to 49% in 2003 (Figure 78). No male IDUs reported that injection drug use did not occur in the unit.

IDUs: Opinion whether Injection Drug Users Socialize at the Site

Almost all (98%) of male IDUs in 2002 and 82% in 2003 thought that male IDUs socialized at the interview site. Less than 60% of men in the representative sample reported so.

Figure 78. Male IDUs' opinion of injecting drug use in the unit of interview.

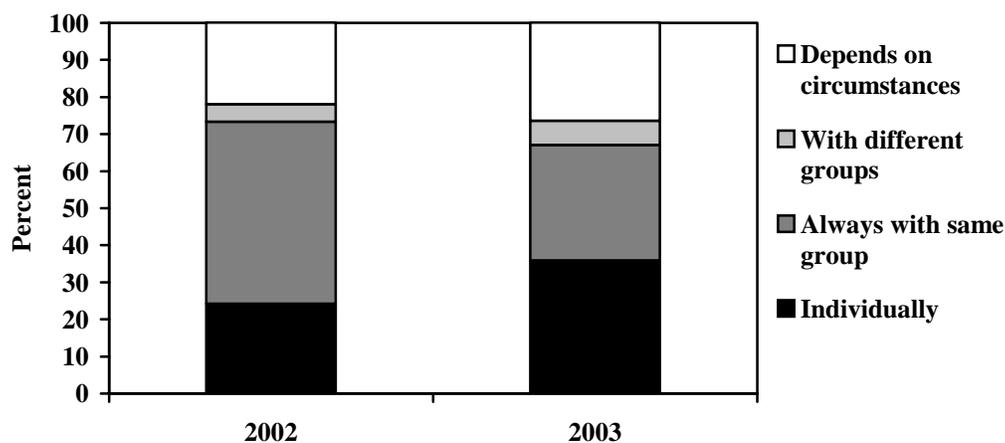


IDUs: Self-reported Injection Drug Use

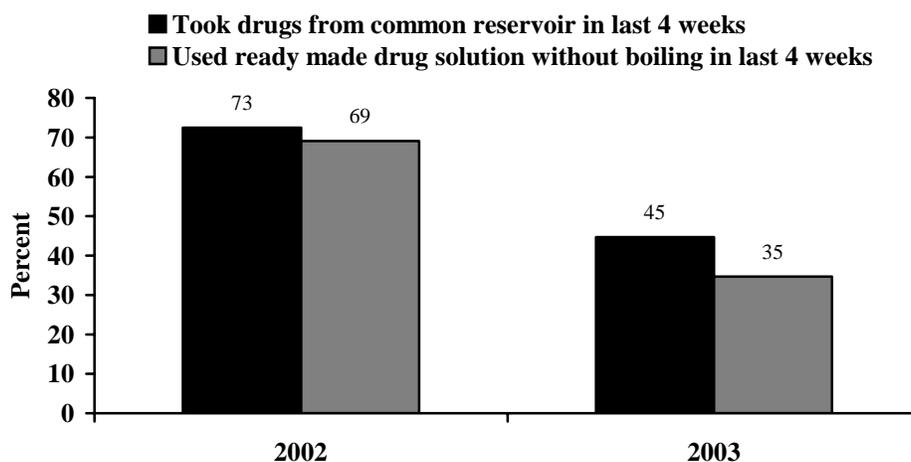
IDUs were also asked about specific drug use behaviors. While heroin was the most frequently used drug by male IDUs, 14% of male IDUs in 2002 reported raw opium (hanka) as their drug of choice and 27% in 2003 reported using it.

Less than 15% of male IDUs had been injecting for less than one year. Male IDUs in 2002 and 2003 had been injecting for an average of 3.4 years.

The main social context in which male IDUs injected drugs differed from 2002 to 2003 (Figure 79). In 2002, almost half of male IDUs reported that they usually took drugs with the same group of people, 24% took drugs individually, and 22% injected drugs in different contexts depending on the circumstances. In 2003, the proportion who injected drugs individually increased to 36% and the proportion who reported that they usually took drugs with the same group decreased to 31%.

Figure 79. Main ways for male IDUs to take drugs.

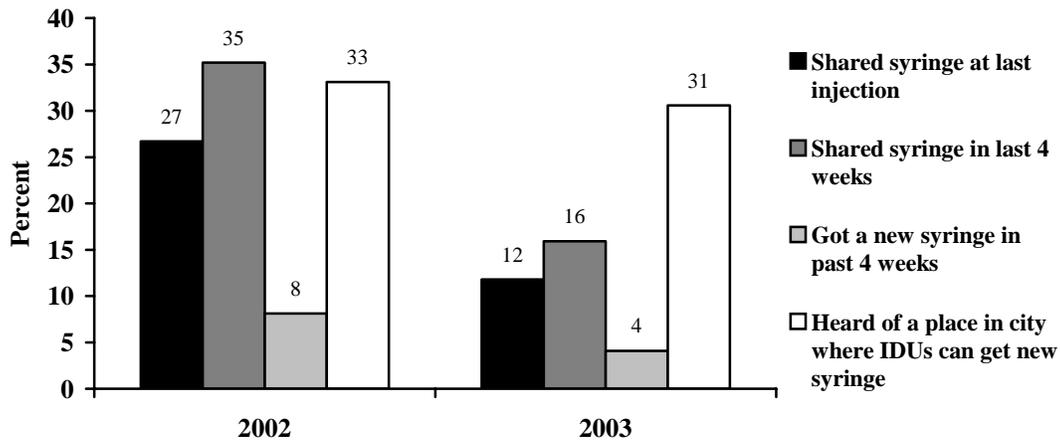
The proportion of male IDUs who took drugs from a common reservoir and used a ready made drug solution decreased substantially from 2002 to 2003 (73% vs. 45% and 69% vs. 35%, respectively) (Figure 80).

Figure 80. Drug preparation by male IDUs.

Male IDUs in 2003 were also less likely than male IDUs in 2002 to have recently injected drugs. In the previous seven days, 81% of IDUs had injected in 2002 compared to 51% in 2003. The proportion who had injected the day before the interview decreased from 72% in 2002 to 41% in 2003. Among those that did inject on the day prior to interview, male IDUs in 2002 injected an average of 1.8 times compared to 1.4 times in 2003.

Needle sharing by male IDUs also varied by year (Figure 81). The proportion of male IDUs who shared a syringe at last injection decreased from 27% in 2002 to 12% in 2003 and who shared in the last four weeks decreased from 35% to 16%. The average number of people with whom male IDUs shared a needle in the past four weeks decreased from 1.2 people in 2002 to 0.6 people in 2003.

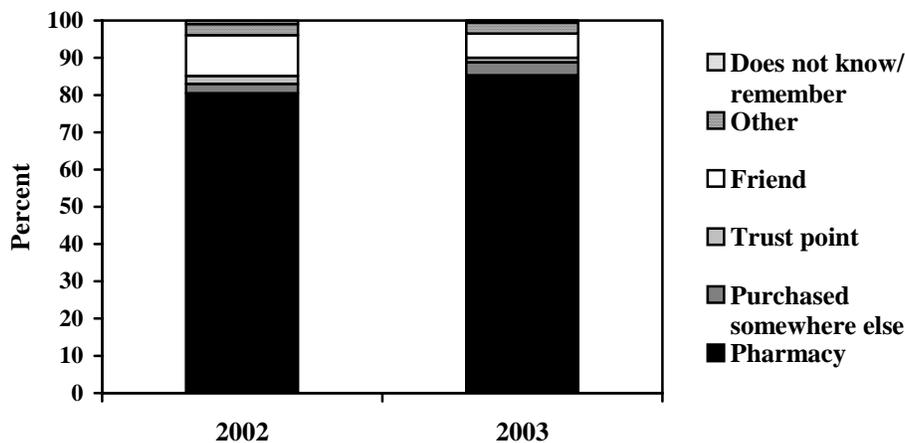
Figure 81. Needle sharing and use by male IDUs.



IDUs: Where New Syringes Are Obtained

The proportion of male IDUs who had obtained a new syringe in the last four weeks decreased from 8% in 2002 to 4% in 2003. Pharmacies were the most frequently named sites by male IDUs as the place where they obtained their last syringe (Figure 82). Friends were another common source for obtaining their last syringe. Approximately a third of male IDUs had heard of a place where IDUs can get a new syringe.

Figure 82. Locations where male IDUs obtained their last syringe.

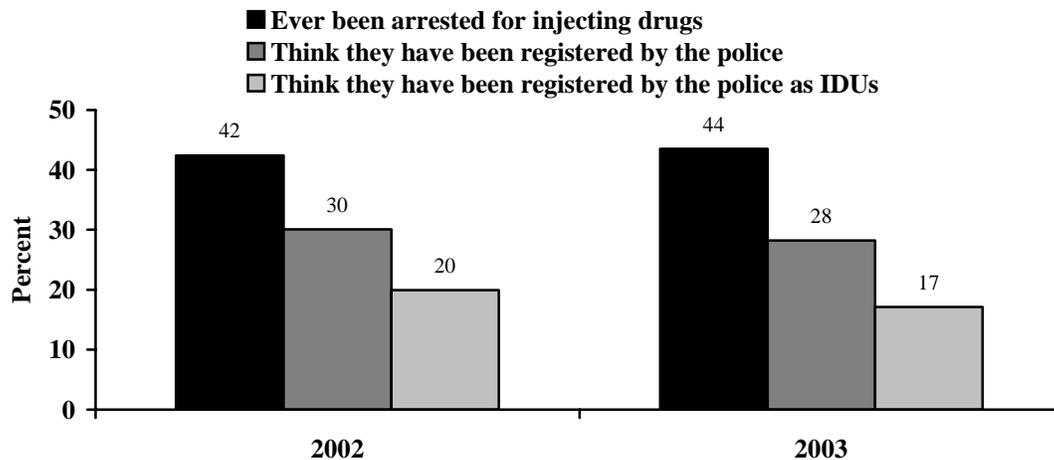


The proportion of male IDUs who responded that they could always get a new syringe whenever they wanted increased from 75% in 2002 to 87% in 2003. Less than 1% of male IDUs responded that they could never get a new syringe whenever they wanted. In 2002, no money and police menace were the most frequently given reasons for not being able to obtain a new syringe when wanted. In 2003, the most common reasons were no money and the kiosk or drug store was too far away. The proportion who did not think it necessary to obtain a new syringe decreased from 22% in 2002 to 5% in 2003.

IDUs: Arrests and Registration

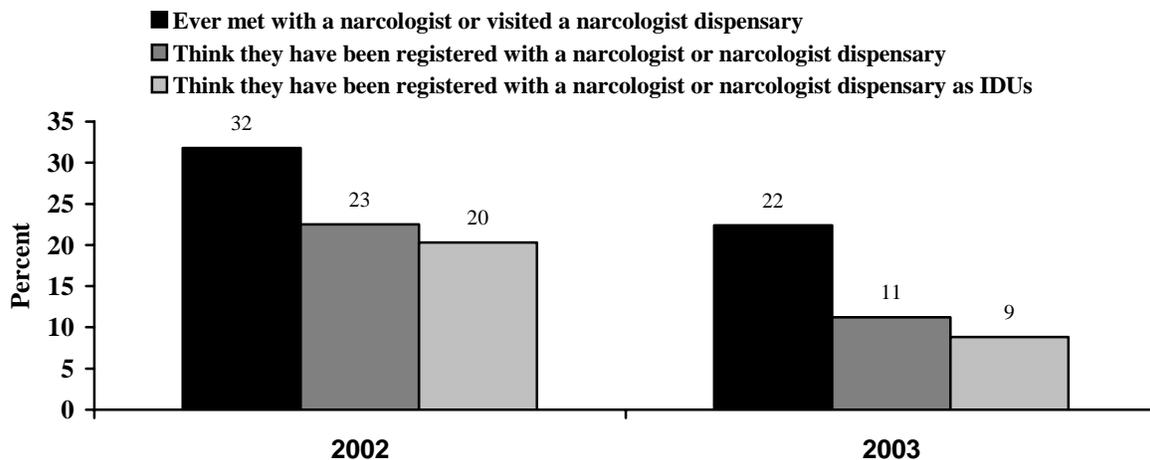
Approximately 43% of male IDUs in 2002 and 2003 reported ever being arrested for injecting drugs (Figure 83). Among those arrested, 47% in 2002 and 41% in 2003 thought that they had been registered by the police as an IDU.

Figure 83. Arrests and registration with police of male IDUs.



Male IDUs were less likely to report that they had ever met with a narcologist or visited a narcologist dispensary than had been arrested by police. Furthermore, the proportion of male IDUs who had met with a narcologist or visited a narcologist dispensary decreased from 32% in 2002 to 22% in 2003 (Figure 84). Of those who had met with a narcologist, the proportion who thought that they had been registered as an IDU with the narcologist decreased from 63% in 2002 and 39% in 2003.

Figure 84. Male IDUs contact with narcologists and narcologist dispensaries.



IDUs: Contact with Treatment Facilities

In 2002, male IDUs had different contact with treatment facilities than men in the representative sample. Male IDUs were less likely to have been to a private medical clinic but had greater contact with more specialized treatment facilities. Male IDUs were more likely than men in the representative sample to have visited a trust point, a private narcological doctor, a TB dispensary, and/or a skin or venerological dispensary, or talked with an outreach or social worker about injection drug use. However, use of these facilities was still not common with only 8% to 23% reporting ever using them.

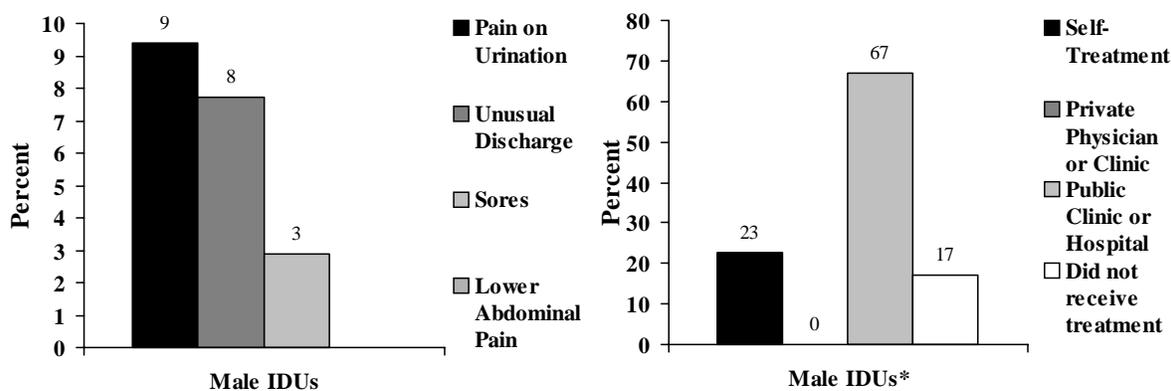
IDUs: Knowledge of STI Symptoms

IDUs had similar knowledge of STI signs and symptoms as individuals in the representative sample. In 2003, 94% of male IDUs reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate that someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by male IDUs were discharge from penis (64%), burning pain on urination (30%), itching in genital area (29%), and genital ulcers or open sores (27%). Approximately 12% of male IDUs did not know any signs or symptoms that indicate that someone has a sexually transmitted disease or infection.

IDUs: Self-Reported STI Symptoms

In 2003, IDUs were more likely than individuals in the representative sample to report that they had experienced STI symptoms in the past four weeks. Approximately 11% of male IDUs and 34% of female IDUs reported experiencing STI symptoms in the past four weeks (Figure 85). The most commonly reported symptom among male IDUs was pain on urination (9%). Among those who had symptoms, a public clinic or hospital was the most commonly reported location where treatment was sought by male IDUs (67%). A quarter of male IDUs self-treated their symptoms, and 17% did not receive any treatment for their symptoms. No male IDUs sought treatment from a private clinic or physician.

Figure 85. STI symptoms and treatment by male IDUs.



*Among the 11% of male IDUs with any symptoms in past 4 weeks.

Step 5: Summary of Findings for AIDS Prevention Programs Using M&E Indicators

A. Summary of Indicators: See Summary at beginning of report

B. Main Findings and Recommendations

Overall Finding: The potential for a widespread HIV epidemic exists in Almaty.

Overall Recommendation: HIV interventions are urgently needed in Almaty to prevent HIV transmission among injecting drug users, sex workers and their partners, and urban youth.

There is limited HIV surveillance in Kazakhstan. Current available data suggest that the overall prevalence of HIV in the country may be quite low, but that some geographic areas have a high incidence of infection. Evidence to date indicates that the HIV epidemic in Almaty is concentrated among injection drug users (IDUs), but could soon include more widespread heterosexual transmission.

PLACE data collected in 2002 and 2003 also indicate that a major epidemic could occur. While condom use appears high, over-reporting of use is likely to have occurred. Sharing of needles among IDUs decreased between 2002 and 2003 but 16% of male IDUs in 2003 still reported sharing a needle during the past four weeks. IDUs reported comparable rates of new sexual partnerships but slightly lower condom use than the general population of socializers at sites. Furthermore, the rate of new partner acquisition in all populations of interest, including the representative population, is high. Programs need to be implemented now to prevent further spread of the epidemic. Below are recommendations on how to respond to this immediate need for HIV prevention programs.

Finding: Characteristics of sites and of the people who socialize at them did not change substantially between 2002 and 2003.

Recommendation: The PLACE protocol should serve as a monitoring tool for intervention programs.

Two PLACE assessments were conducted in Almaty, Kazakhstan one year apart. The goal of both assessments was to identify areas within the city and specific sites within these areas where HIV transmission is likely to occur. With a couple of notable exceptions, such as increased condom availability at sites and decreased needled sharing among IDUs, the characteristics of the sites and the people socializing at them remained stable from 2002 to 2003.

In both studies, bars, cafés, restaurants, streets, and street corners were most frequently named as sites where people meet new sexual partners, commercial sex workers solicit clients, and/or injection drug users socialize. Approximately 60% of sites had been in operation for more than two years and most were located within a ten minute walk of a busy road or public transportation stop. Alcohol was consumed at the majority of sites and eating food and listening to music were also common.

Approximately equal proportions of men and women patronized the sites. Men, on average, tended to be slightly older than women. Most patrons were residents of Almaty and many had lived there all of their lives. Patrons visited the sites frequently with approximately one third visiting the site daily.

As no intervention was introduced at the sites in the year that elapsed between the two assessments, it was observed, as expected, that there was no difference in the characteristics of the sites named or of the people who socialized at them. The similar profiles of the sites and their patrons in 2002 and 2003 suggest that the PLACE method systematically identifies a cross-section of high-risk areas within the city and specifically, sites where transmission is likely to occur.

Key informant interviews are a rapid method for obtaining sensitive data not otherwise available and are especially useful for obtaining data such as a list of sites that can be verified by other sources. By developing a list of sites from many key informants, the bias from any one individual informant is reduced. In addition, self-presentation bias is minimized by not asking about an individual's own sexual or drug-use behavior. Questions posed to key informants are not difficult to answer and key informants are asked for their own opinion. In 2003, approximately one fifth of potential key informants declined an interview but the gender distribution or type of key informant for those who were interviewed and those who declined an interview.

Key informants from a wide range of occupations and demographic groups were interviewed and this variety is reflected by the number and different types of sites that were reported by the key informants. For example, street and stairwell cleaners were productive key informants for identifying sites where syringes could be seen lying on the ground because their job provided them with knowledge about where used syringes are frequently found.

The site verification interviews confirmed that key informants reported verifiable places that were in operation and that risky behaviors occurred at these sites. Refusal rates by site representatives were low with less than 3% of representatives declining an interview. Site representatives at bars, restaurants, cafés, and casinos were most likely to refuse an interview. Effort was taken to reassure participants that the information they provided would not be given to city authorities. Site representatives do not appear to have been reluctant to report behaviors considered socially unacceptable or illegal, such as onsite sex work, injection drug use, alcohol served without a liquor license, or youth coming to the site. There were no refusals specifically for these questions and the extent to which these activities were reported is quite high. Over 85% of site representatives reported alcohol consumption at their site although less than a third of sites were bars, restaurants, nightclubs, or other venues where alcohol is traditionally served. Sex work was reported at approximately a quarter of the sites.

Face-to-face interviews have been associated with underreporting of risky sexual behavior (4). The direction and extent of bias in the data obtained from individuals socializing at sites is difficult to assess. Self-presentation bias in self-reported sexual behavior data is likely to vary by age, gender, and behavior pattern and is probably impossible to untangle. Efforts to minimize self-presentation bias included requesting verbal, anonymous informed consent, assuring confidentiality, and designing simple, close-ended questionnaires. In 2003, approximately 30% of the individuals socializing at sites approached for an interview declined. However, the gender distribution for refusals did not differ substantially from the representative sample with 53% of refusals by men. Approximately 10% of those who refused were thought to be IDUs and another 10% were thought to be CSWs.

Both key informants and site representatives were asked whether the named site was a place where people meet new sexual partners, where IDUs socialize, where syringes can be found lying on the ground, and where commercial sex workers solicit clients. Comparing these responses is useful. Site representatives at approximately 70% of sites identified by key informants as sites where people meet new sexual partners reported that people did in fact meet new partners at the site. Similarly, approximately two-thirds of site representatives at sites identified as places where IDUs socialize reported that IDUs did in fact socialize at the site. Conversely, less than 40% of site representatives at sites not identified by key informants as places where IDUs socialize reported that IDUs socialized there. Key informants and site representatives had the greatest discord about sites where CSWs solicited clients. Site representatives at approximately 30% of sites identified by key informants as places where CSWs solicit clients confirmed that the activity occurs at the site. This discord could be due to either key informants who over-report or are unfamiliar with activities at the sites they name or a reluctance of the site representative to report that commercial sex work occurs at the site.

The activities that occur at the site as reported by key informants and site representatives were also compared with those reported by individuals socializing at the sites. At almost 90% of sites where individual interviews were performed, at least one person reported meeting a new partner at the site regardless of whether key informants or the site representative identified the site as a place where people meet new sexual partners. Among sites identified by key informants and site representatives as places where IDUs socialize, the proportion of sites where at least one injection drug user was interviewed in the representative sample was higher than at sites not identified as places where IDUs socialize. Furthermore, sites identified as places where IDUs socialized had a slightly higher mean number of IDUs included in the representative sample of socializing patrons compared to sites where IDUs were not reported to socialize. IDUs were included in the representative sample at approximately two thirds of sites identified as places where IDUs socialize.

Plans are currently being developed to incorporate site-based interventions into the current prevention strategy in Almaty. The PLACE protocol provides a powerful tool for monitoring the behavior of high-risk individuals over time.

Finding: The PLACE method successfully identified sites where IDUs socialized.

Recommendation: The PLACE method can identify access points to reach this population for intervention programs.

The PLACE method was originally developed to identify places where new sexual partnerships are formed. Epidemiologic models suggest that HIV prevalence in a population is the consequence of the pattern of contacts of the entire population rather than of certain individuals (5). A site-based perspective can offer insights into sexual mixing. Traditional methods for defining sexual networks do not identify the sexual links between individuals that occur at social mixing sites. Methods that require individuals to name sexual partners are vulnerable to bias, since individuals with many sexual partners may be unable or unwilling to name their sexual contacts (6, 7) and are more willing to identify low-risk than high-risk contacts (8, 9).

Because of the importance of injection drug use in the HIV epidemic in Central Asia, the PLACE protocol was adapted to also identify places where injecting drug users can be reached for intervention. The pattern of needle sharing partnerships in a community also shapes its HIV epidemic. Because injection drug use is illegal, IDUs often inject in private, making locations where the actual drug use

occurs hard to access for prevention programs. Over three quarters of male IDUs visited the site at least once a week suggesting that the sites identified by this study are excellent places for intervention programs. Sites where IDUs socialize, rather than inject, provide an access point for interventions.

Finding: HIV was perceived as a serious problem in Almaty. Many patrons believed that they were at high risk of contracting the virus.

Recommendation: Voluntary, confidential HIV testing and counseling should be readily available.

Approximately four-fifths of respondents believed that HIV/AIDS was a serious problem in Almaty. Less than 3% did not think that it was a problem. Approximately one third of men and women in the representative sample thought that they were very or somewhat likely to contract the virus. Youth had a similar perception of their risk. However, CSWs and IDUs had a much higher perceived risk of contracting HIV/AIDS. Over half of CSWs and almost half of IDUs thought that they were very or somewhat likely to contract the virus. Clients were less likely to think that they were at no risk compared to men in the representative sample.

CSWs and IDUs were also more likely to be interested in getting a voluntary HIV test. Just under half of men and women in the representative sample were interested in a voluntary HIV test compared to over two thirds of CSWs and IDUs who were interested in such a test. Voluntary, confidential HIV testing and counseling should be readily available and education and awareness programs should contain information about where such tests can be obtained.

Finding: Condom availability at sites increased from 2002 to 2003. Condom use remained high.

Recommendation: Condoms should be available at sites where people meet new sexual partners. Current programs promoting condom use need to be maintained and strengthened.

The proportion of sites where condoms were always available during the past 12 months increased from 29% in 2002 to 43% in 2003. Similarly, the proportion of interviewers who saw condoms at the site on the day of the interview increased from 18% in 2002 to 38% in 2003. Reported condom use with new partners remained high among all sub-populations in 2002 and 2003. Among patrons with at least one new partner in the past four weeks, approximately 80% of men and 90% of women reported using a condom with the last new partner in the past four weeks. However, the proportion who reported always using a condom with new partners in the past four weeks was lower indicating that condom use with new partners was not consistent. Programs promoting condom use, especially those promoting consistent use with new partners, need to be maintained to ensure that condom awareness, availability, and use continue to remain high.

Finding: There was a high degree of overlap among high-risk populations socializing at sites identified by this assessment.

Recommendation: HIV intervention activities should be implemented at sites where people at high risk of infection socialize, and in particular at sites where these high-risk groups overlap.

Overlap between high-risk populations socializing at the sites identified by this assessment was frequently reported by site representatives. Overlap sites were defined for this assessment as sites that had at least two of the following activities at the site: people meet new sexual partners at the site, youth (<18 years old) socialize at the site, CSWs solicit clients, and IDUs can be found at the site. The overlap of these key populations at sites provides the opportunity for the transmission of HIV from one high-risk population to another. At approximately 15% of sites verified (70 of the 439 verified sites in 2002 and 55 of the 423 in 2003), site representatives reported that all four of these high-risk groups could be found at their site. Nineteen sites were identified during both the 2002 and 2003 sites as priority sites. Interaction between these populations will help facilitate the spread of HIV in the population as it can potentially be spread via two modes of transmission. Since so many sites were named in each year, sites with overlapping risk populations, particularly sites with all four high risk groups, should be prioritized for site-based interventions. (See appendix 1 for map of priority sites).

Finding: Many individuals socializing at the sites engaged in more than one risky behavior creating the potential for HIV to spread through several modes of transmission.

Recommendation: Multiple prevention messages are needed at the sites.

In addition to high-risk populations socializing at the same sites, many individuals reported engaging in two or more high-risk behaviors. Approximately a quarter of clients of CSWs had ever injected drugs and many of these individuals were current injection drug users. Over 40% of male IDUs had at least one new partner in the past four weeks. These individuals are at increased risk of infection because they have the potential to become infected with HIV through sharing syringes and unprotected sex. Over two thirds of men in the representative sample who gave money in exchange for sex during the past three months also had a regular, long-term sexual partner.

Injection drug use is a major force behind the transmission of HIV in Kazakhstan (1, 3). HIV spread consists of “intersecting epidemics” among drug using and non-drug using populations involving transmission associated with drug use and risky sexual behavior (10). High numbers of new syphilis infections and new cases of gonorrhea suggest that these sexually transmitted infections (STIs) are well established in Almaty (Table 4). Approximately 7% of men and 15% of women in the representative sample had experienced symptoms of a sexually transmitted infection in the past four weeks. The proportion of CSWs and IDUs who had experienced symptoms was even higher. STIs enhance the transmissibility of HIV. Determining the extent of overlap and mixing between high-risk populations is important in predicting the course of the epidemic and in developing future prevention and control strategies. Since many individuals socializing at study sites engage in more than one risky behavior, site-based prevention efforts should contain multiple messages aimed at preventing the spread via different routes.

Table 4. Numbers of newly registered HIV, syphilis, and gonorrhea cases in Almaty

	1995	1996	1997	1998	1999	2000	2001	2002	2003
HIV	3	2	6	12	11	15	33	92	187
Syphilis	4718	6098	4655	3167	2277	2031	1778	1430	1406
Gonorrhea		1896	1484	1063	1373	1537	1411	1265	1105

* Source: Almaty AIDS Center and STI Dispensary

Finding: A high proportion of the population is exposed to HIV/AIDS prevention messages but these prevention messages and condoms are not reaching the populations where their impact could potentially be the largest. Sites are stable places for intervention programs.

Recommendation: Site-based educational and informational sessions should be introduced at sites.

In 2002, less than a quarter of patrons reported attending an AIDS education session in the past 12 months. However, in 2003, when asked if they had heard or seen any information about HIV/AIDS in the past 12 months, over 80% responded in the affirmative. Television was the most commonly reported medium by which these messages were received, but high proportions of patrons also reported print media, including newspapers, magazines, and posters, as sources of information about HIV/AIDS. Despite this high level of exposure to information about HIV/AIDS and a high level of knowledge about modes of transmission, patrons were still uncertain about ways to prevent transmission. Knowledge about sexual intercourse without a condom and injecting drugs with a shared syringe as modes of HIV transmission was high in all sub-populations but when asked to name ways to reduce or prevent the transmission of HIV, a lower proportion of individuals identified using condoms or avoiding needle sharing.

HIV/AIDS prevention messages and condoms are not reaching the places where their potential impact could be the largest. Less than 10% of sites had ever had an HIV/AIDS prevention activity at the site and while condom availability at sites increased, less than half of sites had condoms always available during the past year. Just a handful of sites had an HIV/AIDS prevention poster displayed or HIV/AIDS prevention brochures available. The amount of HIV/AIDS prevention material available at these high-risk sites is inadequate as risky sexual and drug use behavior among socializing patrons is high.

Introduction of site-based interventions can fill this unmet need for prevention activities that was detected at these sites. Approximately 60% of sites have been in operation for over two years indicating that the sites identified by this assessment are stable locations in which to introduce HIV/AIDS prevention programs. Of those site representatives who replied that IDUs could be found at their site, the majority responded that the site had been a place where drug injectors could be found for at least one year prior to the interview and often longer. Two-thirds of CSWs had first visited the site over a year ago and most CSWs only went to one or two sites to solicit clients. Similarly, over two-thirds of site patrons in the representative sample first visited the site where they were interviewed over one year ago indicating that these sites have well-established, loyal patronage.

The site-based approach enables intervention programs to simultaneously target many different at-risk or vulnerable populations, such as youth, IDUs, and CSWs and their clients. General education programs for youth have little effect on HIV or STI incidence so targeted intervention programs tailored for high-risk youth may be a more cost effective approach (11). Sites remain stable and can be used as intervention points even though the population moving through the sites is dynamic. Many people visit sites and put themselves at risk of becoming infected with HIV or infecting others. HIV/AIDS education sessions at sites are rare. Some of the sites identified by this study would be ideal locations for educational efforts. Sites offer stable intervention points to reach dynamic populations. Furthermore, intervention groups who focus on different populations such as youth, commercial sex workers, or IDUs should be enlisted to make sure that these vulnerable and often hard to reach populations are included in intervention programs.

Previous studies have demonstrated that decreasing the length of time between prevention efforts and situations where that knowledge is translated into action results in a decrease in risky behavior (12, 13). Site-based interventions have the advantage of reaching individuals at a critical time in condom use negotiations (12). Additionally, site-based interventions are useful in reaching IDUs, a somewhat isolated population that is often hard to reach at the locations where drug injection actually occurs. Since IDUs frequently inject in private locations, introducing an intervention at sites where IDUs socialize, rather than where they inject, provides a point of access to this population. Finally, a site-based intervention is an attractive prevention approach because sites offer an informal support network. Daily and weekly attendance at sites by many patrons is likely to familiarize site managers with patrons well enough to provide a mechanism for education and social support that can be utilized by prevention programs to decrease both sexual and injection transmission of HIV (12).

Finding: Commercial sex work was common. Clients of commercial sex workers are accessible at sites.

Recommendation: HIV prevention programs for commercial sex workers should focus on sites named by many key informants.

The proportion of key informants who reported that CSWs solicit clients in the interview unit increased from 44% in 2002 to 61% in 2003. Key informants were able to name specific sites where commercial sex work occurred with the proportion of site reports for places where commercial sex occurs increasing from 51% in 2002 to 61% in 2003. Site representatives substantiated the key informant reports that commercial sex work occurs in the units with 27% of site representatives reporting that CSWs solicit customers at their site. Both CSWs and clients socialized at sites identified by this study. Approximately one quarter of men in 2002 and 30% in 2003 reported giving money in exchange for sex during the past three months, making the sites in this study reasonable locations to access this hard to define and identify population. The proportion of women who reported receiving money in exchange for sex during the past three months was 21% in 2002 and 28% in 2003.

In 2003, key informants were knowledgeable about where commercial sex workers solicited clients. Commercial sex workers are more likely to be found at sites named by fifteen or more key informants. When the behavior of individuals at sites named more than fifteen times by key informants is compared with the behavior of those at sites named fewer times, the most noticeable difference is in the sexual risk behaviors of women. Women at sites named by more than fifteen key informants were more likely to have reported coming to the site to look for and to have met a new sexual partner and to have a higher new partnership rate for the past four weeks and total partnership rate for the past 12

months than women interviewed at sites named by fewer key informants. Women at sites named by fifteen or more key informants are also slightly more likely to have always used condoms with new partners in the past four weeks and to have a condom with them at the time of the interview. Both men and women at sites named by fifteen or more key informants were more likely to live further than ten a minute walk from the site and to have come to the site by car. Approximately one third of women in the representative sample in 2003 were interviewed at sites named by more than fifteen key informants. Since these sites were oversampled, the estimates for the women in the representative sample probably overestimate the risky sexual behavior among women. Intervention programs for commercial sex workers should be located at sites named by many key informants.

Finding: Perception of drug use within the units is mixed. High risk behaviors by IDUs, including needle sharing and taking drugs from a common reservoir, decreased between 2002 and 2003.

Recommendation: Programs focused on reducing high-risk injection drug use behaviors need to be maintained.

Key informants, site representatives, and socializing individuals were asked about their perception of injection drug use in the area. Key informants and socializing individuals thought that injection drug use increased in the area from 2002 to 2003 while site representatives thought that it had decreased during the same time period. The proportion of key informants who believed that injection drug use occurred in the area increased slightly from 75% in 2002 to 83% in 2003 but the proportion who had seen used syringes lying on the ground in the past four weeks decreased slightly from 54% in 2002 to 47% in 2003. Among site representatives, the proportion who thought that injection drug use was very common in the area decreased from 26% in 2002 to 14% in 2003. However, the proportion who thought that injection drug use was somewhat common increased from 26% to 34%. There was no difference between the proportion of site representatives who thought that drug injectors socialized at the site or that had seen used syringes lying on the ground during the past three months. The proportion of interviewers who observed used syringes on the day of the interview also did not change. The proportion of socializing individuals who thought that injecting drug use was very common in the unit almost tripled between 2002 and 2003 but the proportion who thought that injection drug users socialized at the site or who had personally ever injected drugs remained constant.

The target of 200 interviews with IDUs was achieved both years although oversampling was required in 2002. Injection drug use was more common among men than women. However, the discrepancy between the high levels of key informants who reported that injection drug use occurred in the area and the need to oversample IDUs in 2002 suggests that some IDUs are still missed by this method. Individuals could be reluctant to report personal injection drug use despite reassurances that the information they provide would remain confidential. Alternatively, if a substantial proportion of the IDUs were less than 18 years old, they would not have been included in this assessment because they did not meet the age of eligibility for interview. Furthermore, while drug use was perceived as common in the area, key informants may be less sure about specific sites where IDUs socialize.

High risk behaviors among IDUs decreased from 2002 to 2003. Among male IDUs who had injected drugs within the past six months, the proportion who had shared a syringe at last injection, who shared a syringe in the past four weeks, who took drugs from a common reservoir in the past four weeks, and who used a ready made drug solution without boiling in the past four weeks, all decreased substantially between 2002 and 2003. Similarly, the main social context in which male IDUs in Almaty took drugs

changed from always taking drugs with the same group to taking drugs individually. All other characteristics of drug use remained constant. While this downward trend in risky drug use behavior is promising, it must be monitored to ensure that it is a true behavior change and not a self-presentation bias where respondents in 2003 were more reluctant to report high risk behaviors. Programs focused on reducing high-risk injection drug use behaviors need to be maintained.

Finding: While all approaches identified units with sites where people meet new sexual partners, commercial sex workers solicit clients, and injection drug users socialize, focus group discussions were most successful in identifying units where the most risky behavior occurred.

Recommendation: PLACE studies should use focus groups to help identify areas of the city where the assessment should be implemented.

The focus group units had a higher proportion of sites where people meet new sexual partners and commercial sex workers solicit clients. This high proportion of sites suggests that the focus groups are more efficient than random selection to identify areas more likely to have a higher rate of HIV incidence. The number of sites where injection drug users can be found was not significantly different between focus group units and randomly selected units. There was no substantial difference between contextually selected units and randomly selected units with respect to the proportion of sites where people meet new sexual partners, commercial sex workers solicit clients, and injection drug users socialize. In large cities when little information is available about where new sexual partnerships are formed and where injection drug users socialize, focus group discussions are the most efficient for identifying areas of the city where prevention efforts should be focused.

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Appendix 1 – Additional Tables

Table A1. Characteristics of Key Informants - Almaty		
	Baseline 2002	Follow-Up 2003
Field Work	N	N
Days of key informant interviewing	6	10
Number of interviewers	20	20
Number of key informant interviews completed	1200	1000
Number of refused interviews	--	267
Number of Key informant reports	4189	4438
Number of sites reported	857	1015
Number of new sites reported during follow-up	--	674
Number of sites reported during baseline and follow-up	--	341
Number of sites reported at baseline and not follow-up	--	516
Type of Key informant	%	%
Male	51	60
Female	49	40
Age of Key Informant	%	%
18--19	7	9
20--24	21	22
25--29	16	16
30--34	13	11
35--39	12	12
40+	32	30
Missing	0	1
Drug Use and Sex Work	%	%
Believe drug use occurs in unit	75	83
Has seen syringes in last 4 weeks	54	47
Reports SWs solicit customers in unit	44	61
Site Reports		
Number of site reports in unit	1,656	--
Number of site reports outside unit	2,533	--
Number of site reports within 10 minute walk	--	1,212
Number of site reports further than a 10 minute walk	--	3,226
% of site reports where people meet new sexual partners	61%	47%
% of site reports where IDUs can be found	30%	42%
% of site reports where syringes can be found	29%	42%
% of site reports where SWs solicit customers	51%	69%

Table B1. Characteristics of Sites - Almaty		
	2002 (N=439)	2003 (N=423)
Type of Site		
Bar/Café/Restaurant	25.3	21.8
Night Club/Disco	5.2	5.2
Casino	1.4	1.0
Gay Club	0.5	0.5
Hotel	3.9	5.9
Sauna	2.1	2.1
Billiards	1.4	0.7
Game Club	0.0	0.2
Computer Club	0.5	0.0
Dormitory	2.5	1.9
Private Apartment/Flat	5.0	0.7
Basement/Roof	0.2	0.0
Stairwells	1.4	0.2
Unused/Abandoned Building	0.9	1.4
School	4.3	4.7
College/Professional School	1.1	0.0
University Campus/Tutorial Institute	2.1	1.7
Railway Station	0.5	0.5
Long Distance Bus Station	0.5	0.5
Airport	0.0	0.0
Truck Stop/Stand	0.0	0.2
Taxi Stand	0.2	0.2
Street	23.2	35.7
Street Tunnel	0.7	0.0
Market	1.6	3.1
Park	5.9	6.6
Other	9.8	5.2
Total	100.0	100.0
Number of Times Site Named by Key Informant		
0 Times	0.0	5.0
1 Time	35.3	37.8
2 Times	17.8	14.2
3-5 Times	21.4	16.8
6-10 Times	11.4	11.1
>10 Times	14.2	15.1
Total	100.0	100.0
Years site has been in operation		
Less than one year	8.7	3.1
1 to 2 years	29.4	20.1
3 to 5 years	29.4	28.6
6 to 10 years	7.7	12.8
More than 10 years	19.4	26.7
Not applicable	5.5	8.8
Total	100.0	100.0
Is the site within a ten minute walk of ...		
A Busy Road	--	85.8
A Public Transportation Stop	--	82.7
A Trucking Route	--	7.3

Table B1. Characteristics of Sites - Almaty		
	2002 (N=439)	2003 (N=423)
Busy times at Site		
Mondays	82.2	90.5
Tuesdays	85.0	94.1
Wednesdays	86.3	95.5
Thursdays	87.0	96.2
Fridays	95.9	98.1
Saturdays	93.9	99.1
Sundays	87.9	96.5
Winter	46.2	39.5
Spring	61.3	62.9
Summer	72.2	86.3
Autumn	57.9	73.1
Holidays	62.2	70.2
Other	3.0	--

Table B2. Demographics of Site Representatives		
	2002 (N=439)	2003 (N=423)
Gender of Respondent		
Male	41.0	39.0
Female	59.0	61.0
Total	100.0	100.0
Age of Respondent		
18-19	4.8	6.4
20-24	21.6	20.8
25-29	18.0	22.0
30-34	12.5	13.7
35-39	13.0	13.5
40-44	10.5	10.4
45-49	5.2	6.4
50+	14.4	6.9
Total	100.0	100.0

Table B3. Size of Site				
	2002 (N=439)		2003 (N=423)	
	Men	Women	Men	Women
Maximum number of people who come to site in one day				
<10	10.3	17.5	--	--
11-20	23.9	22.1	--	--
21-50	24.6	26.0	--	--
51-100	21.4	15.3	--	--
101-300	9.3	7.7	--	--
301-500	3.6	3.9	--	--
501-1000	6.6	7.3	--	--
Missing	0.2	0.2	--	--
Total	100.0	100.0	--	--
Number of people who come to the site during a busy time				
<=10	--	--	20.3	--
11-25	--	--	29.6	--
26-50	--	--	24.4	--
51-100	--	--	12.8	--
101-150	--	--	5.2	--
151-200	--	--	2.8	--
201-250	--	--	1.1	--
251-300	--	--	0.5	--
301-350	--	--	0.5	--
351-400	--	--	0.5	--
401-450	--	--	0.0	--
451-500	--	--	0.2	--
>500	--	--	1.7	--
Total	--	--	100.0	--
Number of men and women socializing at site during most recent busy time				
	Men	Women	Men	Women
<=10	--	--	35.7	43.5
11-25	--	--	34.8	28.4
26-50	--	--	16.8	13.7
51-100	--	--	8.5	9.2
101-150	--	--	1.4	2.1
151-200	--	--	1.7	1.2
201-250	--	--	0.2	0.2
251-300	--	--	0.2	0.7
301-350	--	--	0.0	0.0
351-400	--	--	0.3	0.0
401-450	--	--	0.0	0.2
451-500	--	--	0.5	0.5
>500	--	--	0.0	0.0
Missing	--	--	0.0	0.2
Total	--	--	100.0	100.0
Number socializing upon interviewer arrival				
0	8.4	11.2	6.4	10.4
1-4	40.6	43.7	25.8	31.2
5-9	23.7	22.6	28.6	20.1
10-19	17.5	12.1	23.9	22.9
20-49	6.4	7.5	11.8	11.5
50+	3.4	3.0	3.6	3.8
Total	100.0	100.0	100.0	100.0

Table B4. Onsite Activities		
	2002 (N=439)	2003 (N=423)
Activities onsite		
Beer consumed	87.7	85.6
Hard alcohol consumed	73.6	66.9
TV or Video viewing	18.9	18.0
Dancing	33.3	27.4
Music	54.9	48.9
Computer Games	16.6	13.5
Eating food	70.4	52.7
Striptease Show	4.8	4.7
Men meet new female sexual partners here	63.1	54.4
Women meet new sexual partners here	62.4	53.4
Men meet male (gay) sexual partners	4.8	5.2
Someone onsite facilitates partnerships	8.7	12.3
Staff meet new sexual partners here	--	12.1
Female sex workers solicit customers here	26.9	27.4
How long female sex workers have solicited customers at site		
Less than one year	3.0	1.9
1 to 2 years	8.7	6.2
3 to 5 years	8.4	10.2
6 to 10 years	2.5	4.5
More than 10 years	1.1	2.6
Do not know	3.2	13.2
Not applicable	73.1	61.5
Total	100.0	100.0

Table B5. Overlap of High-Risk Populations Socializing at Sites		
	2002 (N=439)	2003 (N=423)
Overlaps		
People meet new sexual partners and at least some youth (age <18) at site	64.2	32.4
People meet new sexual partners and commercial sex workers solicit clients	23.9	24.4
People meet new sexual partners and IDUs socialize	33.3	28.1
At least some youth (age <18) at site and commercial sex workers solicit clients	26.9	17.0
At least some youth (age <18) at site and IDUs socialize	49.2	37.8
Commercial sex workers solicit clients and IDUs socialize	18.0	18.0
People meet new sexual partners, at least some youth (age <18) at site, commercial sexworker solicit clients, and IDUs socialize	16.0	12.3

Table B6. Characteristics of Site Patrons						
2002 (N=439)						
	None	Less than Half	Half	More than Half	Almost All/All	Missing
Percentage of sites with male patrons who...						
Are Unemployed	56.0	33.9	5.0	2.5	0.7	1.8
Are Students	21.9	51.5	15.7	7.3	3.2	0.5
Are < Age 18	38.7	42.6	10.5	6.2	1.6	0.5
Live within a 10 minute walk of site	16.2	44.9	20.3	12.3	5.2	1.1
Residents of this unit	9.8	37.4	23.5	18.9	9.6	0.9
Come here at least once a week	7.5	45.3	22.3	17.3	7.1	0.5
Drink alcohol at site	19.4	33.7	19.1	16.6	11.2	0.0
Find a new sexual partner while at site	29.2	55.8	9.1	3.6	1.1	1.1
Appear to be injection drug users	55.1	38.5	3.9	1.4	0.5	0.7
Percentage of sites with female patrons who...						
Are Unemployed	48.5	38.5	4.6	5.0	2.5	0.9
Are Students	21.6	50.1	19.1	5.7	2.7	0.7
Are < Age 18	36.7	44.4	11.9	5.2	1.4	0.5
Live within a 10 minute walk of site	15.5	47.6	21.2	10.3	4.1	1.4
Residents of this unit	9.3	37.8	25.7	17.3	8.2	1.6
Come here at least once a week	6.8	44.4	23.7	17.3	6.4	1.4
Drink alcohol at site	26.2	36.7	16.2	11.9	8.7	0.5
Find a new sexual partner while at site	31.0	52.9	7.7	4.1	3.4	0.9
Appear to be injection drug users	70.2	23.2	3.0	1.1	0.9	1.6
2003 (N=423)						
	None	Some			Most	Missing
Percentage of sites with male patrons who...						
Are Unemployed	51.3	41.4			7.3	0.0
Are Students	28.8	59.8			11.4	0.0
Are < Age 18	44.7	48.7			6.6	0.0
Live within a 10 minute walk of site	12.8	53.9			33.3	0.0
Live outside this unit	19.2	62.7			18.2	0.0
Come by car or taxi	24.4	50.4			25.3	0.0
Come by public transportation	34.8	55.8			9.5	0.0
Come here at least once a week	6.9	63.8			29.3	0.0
Drink alcohol at site	22.5	51.3			26.2	0.0
Find a new sexual partner while at site	40.2	51.5			8.3	0.0
Appear to be injection drug users	53.2	42.6			3.6	0.7
Appear to be buying sex (clients)	65.3	27.9			6.4	0.5
Are homosexual	92.2	7.3			0.2	0.2
Percentage of sites with female patrons who...						
Are Unemployed	39.0	48.9			12.1	0.0
Are Students	31.4	58.6			9.9	0.0
Are < Age 18	41.8	53.2			5.0	0.0
Live within a 10 minute walk of site	11.6	57.2			31.2	0.0
Live outside this unit	20.8	66.7			12.5	0.0
Come by car or taxi	29.3	51.3			19.4	0.0
Come by public transportation	37.1	53.7			9.2	0.0
Come here at least once a week	9.0	64.3			26.7	0.0
Drink alcohol at site	31.4	57.0			11.6	0.0
Find a new sexual partner while at site	41.1	50.1			8.5	0.2
Appear to be injection drug users	67.4	30.3			1.7	0.7
Appear to be selling sex	64.5	27.4			7.6	0.5

Table B7. Injection Drug Use Around Sites		
	2002 (N=439)	2003 (N=423)
Number of used syringes observed by interviewer at site		
0	86.1	86.5
1	4.3	5.0
2	3.2	4.5
3	3.6	2.1
4	0.9	0.5
5+	1.8	1.4
Total	100.0	100.0
How common in injection drug use in this unit?		
Very common	25.5	14.2
Somewhat common	26.4	34.0
Not very common	38.0	44.2
Does not occur in this area	9.6	7.6
Missing	0.5	0.0
Total	100.0	100.0
Have you seen used syringes lying around inside or outside this place in the past 3 months?		
Yes	43.5	46.6
No	56.5	53.4
Total	100.0	100.0
Is this a place where drug injectors can be found?		
Yes	50.3	53.2
No	49.7	46.8
Total	100.0	100.0
For how many years has this been a place where drug injectors can be found?		
Less than one year	7.5	4.3
1 to 2 years	14.1	11.4
3 to 5 years	17.3	17.0
6 to 10 years	4.6	9.5
More than 10 years	2.1	5.7
Do not know	5.0	7.3
Not Applicable	49.4	44.9
Total	100.0	100.0

Table B8. HIV Interventions at Site		
	2002 (N=439)	2003 (N=423)
Have there ever been any AIDS prevention activities at this place?		
Yes	10.7	5.9
No	89.1	94.1
Missing	0.2	0.0
Total	100.0	100.0
Type of AIDS prevention activities at site		
Lectures and Seminars	--	2.4
Pamphlets and Leaflets	--	2.4
Posters	--	2.1
Distribution of Syringes	--	0.2
Condom Distribution	--	1.0
Other	--	0.5
In the last 12 months, how often have condoms been available here?		
Always	29.4	42.8
Sometimes	5.9	9.0
Never	64.7	32.9
Don't Know	--	15.4
Total	100.0	100.0
Condoms available at site on day of interview		
Yes, but one not seen	8.2	4.3
Yes, and one was seen	18.5	38.3
No	73.4	57.5
Total	100.0	100.0
Number of different brands of condoms available		
1	4.8	3.3
2	5.0	10.2
3	5.0	12.1
4+	5.2	12.8
Not Applicable	80.0	61.7
Total	100.0	100.0
Brands of condoms seen		
Favorite	--	17.3
Durex	--	24.1
Pilotos	--	3.1
Two to Tango	--	4.3
Innotex	--	6.4
Vizit	--	4.5
Lifestyle	--	9.7
Context	--	5.4
Desire	--	14.4
Gold Circle	--	1.2
Indian / No Brand	--	9.5
Other	--	15.8
Is it possible for someone to find a condom within 10 minutes of leaving this place at night?		
Yes	87.7	73.8
No	4.8	12.3
Do not know	7.5	14.0
Total	100.0	100.0

Table B8. HIV Interventions at Site		
	2002 (N=439)	2003 (N=423)
Willing to have AIDS educational programs at site*		
Yes	55.8	43.0
No	31.0	57.0
Not Applicable	13.2	--
Total	100.0	100.0
Willing to sell condoms at site		
Yes	41.9	51.5
No	43.7	30.3
Not Applicable	14.4	18.2
Total	100.0	100.0
Number of AIDS posters displayed		
0	98.2	97.2
1	0.5	1.9
2	0.5	0.2
3+	0.9	0.7
Total	100.0	100.0
Number of AIDS brochures at site		
0	98.6	98.6
1	0.2	0.7
2+	1.2	0.9
Total	100.0	100.0
Number of condoms visible		
0	84.1	62.2
1-9	2.5	24.4
10-99	12.1	11.9
100+	1.4	1.7
Total	100.0	100.0

*Only persons who have authority to act on behalf of the site were asked this question in 2003 (N=165)

Table C4. Reported Condom Use by Individuals Socializing at Sites in Almaty

	Representative Sample		Youth				CSW and Clients				IDUs					
	Males		Females		Males		Females		Males		Females		Males		Females	
	2002 N=1109	2003 N=1237	2002 N=889	2003 N=863	2002 N=607	2003 N=719	2002 N=559	2003 N=564	2002 N=282	2003 N=370	2002 N=187	2003 N=239	2002 N=236	2003 N=170	2002 N=27	2003 N=35
Brand of Condom Seen?																
Favorite	--	0.3	--	0.1	--	0.6	--	0.2	--	0.5	--	0.0	--	0.6	--	0.0
Durex	--	3.1	--	4.6	--	3.9	--	4.6	--	4.6	--	13.8	--	7.1	--	20.0
Pilotos	--	0.1	--	0.2	--	0.0	--	0.4	--	0.0	--	0.8	--	0.0	--	0.0
Two to Tango	--	0.2	--	0.0	--	0.4	--	0.0	--	0.5	--	0.0	--	0.0	--	0.0
Innotex	--	0.5	--	0.6	--	0.6	--	0.7	--	0.5	--	1.7	--	0.0	--	0.0
Vizit	--	0.3	--	1.4	--	0.4	--	1.6	--	0.3	--	4.6	--	0.6	--	5.7
Lifestyle	--	0.7	--	0.6	--	0.7	--	0.5	--	0.3	--	2.1	--	0.0	--	0.0
Context	--	0.2	--	0.4	--	0.3	--	0.4	--	0.0	--	0.0	--	0.0	--	0.0
Desire	--	1.1	--	1.2	--	1.0	--	1.2	--	2.4	--	3.4	--	1.2	--	5.7
Gold Circle	--	0.1	--	0.0	--	0.0	--	0.0	--	0.0	--	0.0	--	0.0	--	0.0
Indian/No Brand	--	0.3	--	0.1	--	0.4	--	0.0	--	0.8	--	0.4	--	0.0	--	0.0
Other	--	1.9	--	0.8	--	2.2	--	0.9	--	2.7	--	2.1	--	1.2	--	2.9
Condom not seen	--	8.5	--	1.0	--	0.4	--	1.2	--	1.6	--	2.1	--	0.6	--	2.9
No condom at interview	--	90.4	--	89.7	--	89.7	--	89.4	--	86.5	--	70.7	--	89.4	--	65.7

Table C8
Contact with Treatment Facilities for Men Socializing at Sites in Almaty, 2002

	Never	<4 weeks	1-6 months	7-12 months	>1 year
Representative Sample (N=1109)	%	%	%	%	%
Ever been to:					
Private medical clinic	60.0	9.0	16	6.4	8.7
State medical clinic	15.8	14.0	27.7	15.1	27.4
Trust Point	97.3	0.7	1.2	0.3	0.5
TB Dispensary	89.3	2.2	1.7	1.5	5.3
Emergency	74.6	2.8	5.6	4.1	12.9
Infection Hospital	86.7	1.1	1.7	1.6	8.9
Skin/Venerological Dispensary	86.0	1.7	2.5	2.2	7.6
Private venerological Doctor	93.3	0.7	2.1	1.3	2.6
Private narcological doctor	96.6	0.7	1.5	0.3	0.9
An outreach/social worker about injection drug use	99.1	0.4	0.3	0.1	0.2
Youth (N=607)					
Ever been to:					
Private medical clinic	61.3	8.1	18.1	5.4	7.1
State medical clinic	12.2	16.1	30.6	18.5	22.6
Trust Point	97.2	0.7	1.0	0.3	0.8
TB Dispensary	90.1	2.1	1.8	1.6	4.3
Emergency	77.4	2.1	4.6	3.6	12.2
Infection Hospital	87.5	0.8	1.6	1.6	8.4
Skin/Venerological Dispensary	84.3	2.1	3.0	3.1	7.4
Private venerological Doctor	95.1	0.7	1.5	1.3	1.5
Private narcological doctor	97.4	0.5	1.2	0.3	0.7
An outreach/social worker about injection drug use	98.8	0.2	0.5	0.2	0.3
Clients of Commercial Sex Workers (N=282)					
Ever been to:					
Private medical clinic	47.9	15.2	19.5	8.2	9.2
State medical clinic	16.7	13.8	23.8	17.0	28.7
Trust Point	98.2	1.1	0.4	0.0	0.4
TB Dispensary	90.8	1.1	2.8	0.7	4.6
Emergency	71.6	5.0	4.3	7.1	12.1
Infection Hospital	81.6	0.7	3.5	2.1	12.1
Skin/Venerological Dispensary	76.6	2.8	4.6	3.2	12.8
Private venerological Doctor	86.2	1.4	5.0	2.5	5.0
Private narcological doctor	94.3	1.1	2.5	0.4	1.8
An outreach/social worker about injection drug use	99.3	0.4	0.0	0.0	0.4
Injection Drug Users (N=236)					
Ever been to:					
Private medical clinic	74.6	6.8	11.4	1.7	5.5
State medical clinic	14.0	5.9	34.7	18.6	26.7
Trust Point	91.9	1.3	3.8	0.4	2.5
TB Dispensary	80.1	2.1	3.8	3.4	10.6
Emergency	73.7	3.4	5.5	4.2	13.1
Infection Hospital	85.2	0.8	2.5	2.5	8.9
Skin/Venerological Dispensary	77.5	0.8	3.4	4.2	14.0
Private venerological Doctor	93.6	0.4	2.5	0.8	2.5
Private narcological doctor	85.2	3.0	7.6	1.3	3.0
An outreach/social worker about injection drug use	93.6	1.3	1.7	1.7	1.7

Table C9					
Contact with Treatment Facilities for Women Socializing at Sites in Almaty, 2002					
	Never	<4 weeks	1-6 months	7-12 months	>1 year
Representative Sample (N=889)	%	%	%	%	%
Ever been to:					
Private medical clinic	45.8	13.2	21.3	8.9	10.9
State medical clinic	12.3	18.7	31.2	15.7	22.2
Trust Point	98.2	0.6	0.9	0.0	0.3
TB Dispensary	93.5	0.9	1.6	1.2	2.8
Emergency	64.0	3.0	8.4	5.8	18.7
Infection Hospital	86.5	0.8	2.8	1.6	8.3
Skin/Venerological Dispensary	79.1	3.6	5.3	3.0	9.0
Private venerological Doctor	91.6	2.6	2.7	1.0	2.1
Private narcological doctor	99.3	0.0	0.2	0.1	0.3
An outreach/social worker about injection drug use	99.3	0.3	0.1	0.0	0.2
Youth (N=559)					
Ever been to:					
Private medical clinic	46.2	14	23.1	9.1	7.7
State medical clinic	12.7	18.1	32.4	16.5	20.4
Trust Point	98.4	0.5	0.9	0.0	0.2
TB Dispensary	93.7	1.3	1.3	1.3	2.5
Emergency	70.1	2.3	8.2	3.8	15.6
Infection Hospital	88.6	0.5	3.4	1.1	6.4
Skin/Venerological Dispensary	78.7	3.8	6.4	3.0	8.1
Private venerological Doctor	90.5	3.0	3.9	0.9	1.6
Private narcological doctor	99.5	0.0	0.2	0.2	0.2
An outreach/social worker about injection drug use	99.6	0.0	0.2	0.0	0.2
Commercial Sex Workers (N=187)					
Ever been to:					
Private medical clinic	36.4	17.6	28.9	9.1	8.0
State medical clinic	17.6	18.2	26.2	15.5	22.5
Trust Point	95.7	2.1	1.6	0.0	0.5
TB Dispensary	90.4	1.6	2.1	1.1	4.8
Emergency	70.1	3.2	7.5	4.8	14.4
Infection Hospital	85.0	0.0	5.3	1.1	8.6
Skin/Venerological Dispensary	44.9	12.3	18.7	8.6	15.5
Private venerological Doctor	69.0	11.8	11.8	2.7	4.8
Private narcological doctor	97.3	0.0	0.5	0.5	1.6
An outreach/social worker about injection drug use	97.3	1.1	0.5	0.0	1.1
Injection Drug Users (N=27)					
Ever been to:					
Private medical clinic	48.1	11.1	29.6	0.0	11.1
State medical clinic	29.6	11.1	25.9	14.8	18.5
Trust Point	92.6	0.0	3.7	0.0	3.7
TB Dispensary	77.8	3.7	11.1	3.7	3.7
Emergency	59.3	3.7	7.4	7.4	22.2
Infection Hospital	81.5	0.0	3.7	0.0	14.8
Skin/Venerological Dispensary	59.3	3.7	11.1	7.4	18.5
Private venerological Doctor	81.5	3.7	0.0	3.7	11.1
Private narcological doctor	77.8	0.0	14.8	0.0	7.4
An outreach/social worker about injection drug use	81.5	7.4	3.7	0.0	7.4

Table C10								
STI Symptoms and Knowledge of Individuals Socializing at Sites in Almaty, 2003								
	Representative Sample		Youth		CSW and Clients		IDUs	
	Males	Females	Males	Females	Males	Females	Males	Females
	N=1237	N=863	N=719	N=564	N=370	N=239	N=170	N=35
Heard of diseases or infections that can be transmitted through sexual intercourse								
Yes	94.1	94.0	93.3	93.8	94.9	93.3	94.1	91.4
No	5.9	6.0	6.7	6.2	5.1	6.7	5.9	8.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Signs or symptoms that someone has a sexually transmitted disease or infection								
Lower abdominal pain	8.6	23.6	10.3	24.8	11.6	31.0	9.4	14.3
Discharge from vagina (woman) / penis (man)	60.9	65.5	58.8	63.8	60.5	79.1	64.1	82.9
Itching in genital area	22.9	40.4	23.0	39.7	27.8	46.4	28.8	45.7
Burning pain on urination	28.5	11.6	27.1	11.0	31.3	17.6	30.0	20.0
Pain during intercourse	4.6	7.3	4.2	8.3	4.9	12.6	5.9	25.7
Genital ulcers / open sores	20.9	25.6	21.1	24.5	23.0	32.2	26.5	31.4
Inflammation in genital area	7.3	11.8	7.9	11.7	8.7	18.8	8.2	34.3
Blood in urine	2.7	3.7	2.8	4.3	2.7	2.9	3.5	0.0
Failure to pass urine	4.8	2.6	5.2	1.8	6.2	3.4	4.7	2.9
Loss of weight	3.2	5.8	4.0	6.0	4.1	5.0	4.1	2.9
Inability to conceive (woman) / impotence (man)	3.1	1.9	3.1	2.3	4.9	1.7	5.3	8.6
Other	9.1	12.6	9.7	12.2	10.0	8.4	8.8	11.4
No symptoms	0.1	0.4	0.0	0.0	0.0	0.4	0.6	0.0
Don't know	14.3	8.9	14.6	9.9	14.6	2.5	12.4	0.0
Refused	1.8	0.8	1.7	1.1	1.4	0.4	1.2	0.0
In the past 4 weeks, the respondent has had the following symptoms								
Any Symptoms	6.5	14.5	6.3	14.0	11.1	23.4	10.6	34.3
Lower abdominal pain (women)	--	11.0	--	11.4	--	15.9	--	17.1
Pain on urination (men)	5.2	--	5.2	--	10.0	--	9.4	--
Unusual discharge	3.4	8.1	3.6	7.6	6.5	14.6	7.7	25.7
Sores	1.5	0.6	1.3	0.5	2.2	1.7	2.9	0.0
Received treatment for symptoms in past 4 weeks								
Self-Treatment	1.3	4.4	1.1	4.8	2.7	10.5	2.4	20.0
Private Physician or Clinic	0.8	2.0	1.0	2.1	1.6	2.5	0.0	2.9
Public Clinic or Hospital	3.7	6.6	3.3	5.3	6.2	10.9	7.1	11.4
Did not receive treatment	0.8	2.8	1.1	2.8	1.1	3.4	1.8	2.9
No symptoms in past 4 weeks	93.5	85.5	93.7	86.0	88.9	76.6	89.4	65.7

Table C12				
Needle Sharing Behavior of Injection Drug Users in Almaty				
	Males		Females	
	2002 N=236	2003 N=170	2002 N=27	2003 N=35
Shared syringe at last injection				
Yes	26.7	11.8	25.9	8.6
No	67.8	81.2	70.4	88.6
Don't know/remember	5.5	7.1	3.7	2.9
Total	100.0	100.0	100.0	100.0
In last 4 weeks, shared syringe with other IDU				
Yes	35.2	15.9	44.4	25.7
No	61.9	81.8	55.6	74.3
Don't know/remember	3.0	2.4	0.0	0.0
Total	100.0	100.0	100.0	100.0
In last 4 weeks, got new syringe				
Yes	8.1	4.1	3.7	2.9
No	91.5	95.9	96.3	97.1
Don't know/remember	0.4	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0
Number of times injected drugs yesterday				
0	28.0	59.4	25.9	28.6
1	30.5	25.3	11.1	34.3
2	30.1	12.9	40.7	22.9
3	10.2	2.4	14.8	11.4
4+	1.3	0.0	7.4	2.9
Total	100.0	100.0	100.0	100.0
Number of different syringes used yesterday				
0	28.4	59.4	25.9	28.6
1	58.1	31.8	59.3	42.9
2	11.0	8.2	11.1	17.1
3	2.1	0.6	3.7	8.6
4+	0.4	0.0	0.0	2.9
Total	100.0	100.0	100.0	100.0
Number of different people with whom shared a syringe in past 4 weeks				
0	61.0	76.5	44.4	62.9
1	8.1	5.3	11.1	14.3
2	8.5	8.2	22.2	11.4
3	9.7	6.5	11.1	2.9
4 -- 9	11.9	3.5	7.4	8.6
10+	0.8	0.0	3.7	0.0
Total	100.0	100.0	100.0	100.0
Number of different people with whom shared a syringe for the first time in past 4 weeks				
0	89.0	90.0	88.9	97.1
1	8.9	5.3	3.7	2.9
2	1.7	2.9	0.0	0.0
3	0.4	1.2	3.7	0.0
4 -- 9	0.0	0.6	0.0	0.0
10+	0.0	0.0	3.7	0.0
Total	100.0	100.0	100.0	100.0

Table C12				
Needle Sharing Behavior of Injection Drug Users in Almaty				
	Males		Females	
	2002 N=236	2003 N=170	2002 N=27	2003 N=35
Where got last syringe used				
Pharmacy	80.5	85.3	85.2	85.7
Purchased somewhere else	2.5	3.5	0.0	0.0
Trust point	2.1	1.2	0.0	0.0
Friend	11.0	6.5	14.8	8.6
Other	3.0	2.9	0.0	2.9
Don't know/remember	0.8	0.6	0.0	2.9
Total	100.0	100.0	100.0	100.0
Can get new syringes whenever wants				
Always	74.6	87.1	63.0	85.7
Sometimes	24.6	12.9	37.0	14.3
Never	0.8	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0
Why can't always get new syringes when wants				
No money	11.0	5.9	22.2	0.0
Exchange station too far away	0.4	0.0	0.0	0.0
Kiosk or drug store too far way	4.7	3.5	7.4	0.0
Police menace	9.3	0.6	14.8	0.0
Don't think it is necessary to get a new syringe	5.5	0.6	7.4	2.9
Other	2.5	2.9	3.7	11.4
Always can get new syringes	74.6	87.1	63.0	85.7

Table C13				
Drug Use History of Injection Drug Users Socializing in Almaty				
	Males		Females	
	2002 N=236	2003 N=170	2002 N=27	2003 N=35
Main way to take drugs				
Individually	24.2	35.9	25.9	42.9
Always with same group	49.2	31.2	55.6	42.9
With different groups	4.7	6.5	14.8	0.0
Depends on circumstances	22.0	26.5	3.7	14.3
Total	100.0	100.0	100.0	100.0
Most frequently injected drugs				
Raw opium (hanka)	14.0	26.5	3.7	8.6
Heroin	82.2	79.4	96.3	85.7
Other	3.8	10.0	0.0	8.6
In last 4 weeks, took drugs from common reservoir				
Yes	72.5	44.7	77.8	65.7
No	25.4	54.1	22.2	34.3
Don't know/remember	2.1	1.2	0.0	0.0
Total	100.0	100.0	100.0	100.0
In last 4 weeks, used ready made drug solution without boiling				
Yes	69.1	34.7	70.4	40.0
No	23.7	64.1	25.9	54.3
Don't know/remember	7.2	1.2	3.7	5.7
Total	100.0	100.0	100.0	100.0
Length of time injecting drugs				
< 1 year	13.6	11.8	18.5	8.6
1 year	23.7	25.9	14.8	14.3
2 years	16.1	14.7	7.4	17.1
3-4 years	21.2	16.5	14.8	28.6
5-9 years	18.2	23.5	29.6	25.7
10+ years	7.2	7.7	14.8	5.7
Total	100.0	100.0	100.0	100.0
Ever been arrested for injecting drugs				
Yes	42.4	43.5	55.6	60.0
No	57.6	56.5	44.4	40.0
Total	100.0	100.0	100.0	100.0
Think they have been registered by police				
Yes	30.1	28.2	48.1	40.0
No	12.3	15.3	7.4	20.0
Never arrested for injecting drugs	57.6	56.5	44.4	40.0
Total	100.0	100.0	100.0	100.0
Think they have been registered by police as IDUs				
Yes	19.9	17.1	37.0	34.3
No	10.2	11.2	11.1	5.7
Never been registered by police	12.3	15.3	7.4	20.0
Never arrested for injecting drugs	57.6	56.5	44.4	40.0
Total	100.0	100.0	100.0	100.0
Ever met with a narcologist or visited a narcologist dispensary				
Yes	31.8	22.4	44.4	42.9
No	68.2	77.7	55.6	57.1
Total	100.0	100.0	100.0	100.0

Table C13				
Drug Use History of Injection Drug Users Socializing in Almaty				
	Males		Females	
	2002 N=236	2003 N=170	2002 N=27	2003 N=35
Think they have been registered with narcologist or narcology dispensary				
Yes	22.5	11.2	37.0	31.4
No	9.3	11.2	7.4	11.4
Never met narcologist/dispensary	68.2	77.7	55.6	57.1
Total	100.0	100.0	100.0	100.0
Think they have been registered with narcologist or narcology dispensary as IDUs				
Yes	20.3	8.8	33.3	28.6
No	2.1	2.4	3.7	2.9
Never been registered with narcologist/dispensary	9.3	11.2	7.4	11.4
Never met narcologist/dispensary	68.2	77.7	55.6	57.1
Total	100.0	100.0	100.0	100.0

Appendix 2 – Baseline Questionnaires

KEY INFORMANT CHARACTERISTICS - CAR (5/16/02)

No.	Questions	Coding categories
K1	Assessment City	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
K2	Location of Interview	UNIT in city: ____ ____
K3	Interviewer Number / Key Informant Number	_____/____
K4	Date	____/____/____
K5	Gender of Key Informant	MALE 1 FEMALE 2
K6	Type of Key Informant:	ENTER CODE: ____ ____
	TAXI DRIVER 01 PUBLIC TRANSPORTATION DRIVER 02 LONG DISTANCE TRUCK DRIVERS 03 SEX WORKER 04 CLIENT OF SEX WORKER 05 PIMP 06 INJECTION DRUG USER 07 NON-GOVERNMENTAL ORG (NGO) STAFF 08 WORKERS OF AIDS CENTER, NARCOLOGICA DISPENSARY, VENEROLOGICAL CLINIC 09 MEDICAL PERSONNEL 10 POLICE OFFICER 11 HEALTH CARE/ PHARMACY WORKER 12 MINI-MARKET /SHOP SELLER 13 SELLERS AND WORKERS IN MARKET 14 STREET VENDOR 15	BARMEN/WAITERS 16 HOTEL STAFF 17 SAUNA STAFF 18 HOMELESS 19 UNEMPLOYED 20 NEW ARRIVALS/ TEMPORARY 21 STREET CLEANERS 22 STAIRWELL CLEANER 23 FLAT OWNERS COOP PERSONNEL 24 YOUTH 25 DORMITORY RESIDENT 26 RESIDENT OF AREA 27 OTHER _____ 50

No.	Questions	Coding categories
<p>Hello. I am working for the Center for Study of Public Opinion in Almaty on a study to identify where better health programs are needed in the city. The purpose of the study is to find out where people go to meet new sexual partners and to find out where people who inject drugs can be found. AIDS doesn't seem to be a big problem yet in this area, but it could become a big problem if people don't learn about how to reduce the chances they will get infected. I would like to ask you a few questions. We want you to tell us the names and locations of places where people meet new sexual partners and where we can reach drug injectors for prevention programs. We don't want to know the names of any private residences. We are just interested in public places. If you tell us where these places are then we will visit those places to see if they want to have a health program there. Telling us the names and locations of sites should take between 5 and 15 minutes. We won't ask your name or ask you to provide any identifying information. You will not be contacted in the future. Your answers cannot be linked back to you. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. You may be embarrassed by the questions. You may not personally benefit directly from this study, but in a few months a new health program will be carried out in this city.</p> <p>The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Gulzhan at the Center for Study of Public Opinion.</p>		
K7	Are you willing to participate? *IF NO, STOP INTERVIEW.	YES 1 IF NO, STOP INTERVIEW. NO 2
K8	How old are you? *STOP INTERVIEW IF RESPONDENT IS YOUNGER THAN 18	____ ____
K9	<p>We want to know where people socialize with the intention of meeting a new sexual partner. This will help us plan AIDS prevention programs there and have condoms available. We especially want to know:</p> <ul style="list-style-type: none"> • Where youth socialize and meet new sexual partners • Where women or men sell sex • Where other people such as single men, gay men, temporary residents, migrant workers, go to find new sexual partners. • Where people in this unit go to meet new partners in this unit and in other units. We also want to know where people from outside the unit come to meet new sexual partners in this unit. <p>*WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.</p>	
K10	We also want to know what you think about drug use around here. Does injecting drug use occur here (in this unit)?	YES 1 NO 2
K11	Have you seen any syringes around here in the last 4 weeks?	YES 1 NO 2
K12	Where can syringes be found around here? *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	

No.	Questions	Coding categories
K13	Where can injecting drug users be found around here? *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K14	Do sex workers look for customers around here?	YES 1 NO 2
K15	Where can sex workers be found? *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K16	Number of places named by Key Informant within this unit. Number of places named by Key Informant outside this unit.	_____ _____

LIST PLACES NAMED ON LINES BELOW. USING THIS LIST, ASK THE RESPONDENT:

Of all the places you named, which is the place where the most people meet new sexual partners in one day or evening? CIRCLE "1" IN COLUMN TITLED "Sex" NEXT TO THIS PLACE.

Of all the places you named, which is the place where the most drug injectors or drug injecting equipment can be found? CIRCLE "2" IN COLUMN TITLED "Drug" NEXT TO THIS PLACE.

Of all the places you named, which is the place where the most sex workers can be found? CIRCLE "3" IN COLUMN TITLED "SexWorker" NEXT TO THIS PLACE.

AFTER RECORDING WHICH THREE PLACES ARE PRIORITIES, FILL OUT A PLACE REPORT FORM WITH THE RESPONDENT FOR EACH PLACE ON THE LIST (NOT ONLY PRIORITIES).

	PRIORITY PLACE		
	Sex	Drug	SexWorker
1. _____	1	2	3
2. _____	Sex	Drug	SexWorker
	1	2	3
3. _____	Sex	Drug	SexWorker
	1	2	3
4. _____	Sex	Drug	SexWorker
	1	2	3
5. _____	Sex	Drug	SexWorker
	1	2	3
6. _____	Sex	Drug	SexWorker
	1	2	3
7. _____	Sex	Drug	SexWorker
	1	2	3
8. _____	Sex	Drug	SexWorker
	1	2	3
9. _____	Sex	Drug	SexWorker
	1	2	3
10. _____	Sex	Drug	SexWorker
	1	2	3

PLACE REPORT FORM - CAR
5/16/02

S1	Assessment City	<p align="right">Almaty 1 Karaganda 2 Tashkent 3 Osh 4</p>
S2	Location of Interview	UNIT ____ ____
S3	Interviewer Number / Key Informant Number	____ / ____
S4	Key Informant / Place Report Number	____ / ____
S5	Name of place	_____
S6	Place named as a priority place for....	<p align="right">PRIORITY</p> <p align="right">Meeting new sexual partners 1 Injecting drug users 2 Sex workers 3</p> <p align="right">Not a priority for any group 9</p>
S7	Address of place and how to find it.	
S8	Where is the place located? In what unit?	UNIT in city (CODE 1-85): ____ ____
S9	<p>TYPE OF PLACE:</p> <p>01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUILDING</p>	<p align="right">*ENTER CODE: ____ ____</p> <p>15 SCHOOL 16 COLLEGE/PROFESSIONAL SCHOOL 17 UNIVERSITY CAMPUS/TUTORIAL INSTITUTE 18 RAILWAY STATION 19 BUS STATION 20 AIRPORT 21 TRUCK STOP/STAND 22 TAXI STAND 23 STREET 24 STREET TUNNEL 25 MARKET 26 PARK 27 OTHER (specify): _____</p>

S10	Is this a place where.....		YES	NO
		People meet sexual partners	1	2
		Drug Injectors can be found	1	2
		Syringes are lying around	1	2
		Sex workers solicit	1	2

SITE VERIFICATION FORM (May 21, 2002)

Unique Place Number: _____

No.	Questions	Coding Categories
V1	Assessment Area	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
V2	Location of Site	UNIT CODE: ____
V3	List ID Number	_____
V4	Name of Place	_____
V5	Correct Street Address	_____ _____
V6	What is the closest public transportation route?	BUS: _____ TROLLEY: _____ TRAM: _____ ROUTE TAXI/MICROBUS: _____
V7	Outcome of place verification	PLACE NOT FOUND 0 PLACE FOUND AND RESPONDENT INTERVIEWED 1 PLACE FOUND BUT NOT WILLING RESPONDENT 2 PLACE CLOSED TEMPORARILY 3 NO LONGER A PLACE 4

No.	Questions	Coding Categories
V8	TYPE OF SITE: 01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUILDING 15 SCHOOL 16 COLLEGE/PROFESSIONAL SCHOOL 17 UNIVERSITY CAMPUS/TUTORIAL INSTITUTE	*ENTER CODE: ____ ____ 18 RAILWAY STATION 19 LONG DISTANCE BUS STATION 20 AIRPORT 21 TRUCK STOP/STAND 22 TAXI STAND 23 STREET 24 STREET TUNNEL 25 MARKET 26 PARK 27 OTHER (specify): _____
V9	Interviewer Number	____ ____
V10	Date (DD/MM)	____ / ____
V11	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
V12	Time of day (24 HOUR CLOCK)	____ : ____
V13	Number socializing upon interviewer arrival at place	MEN: ____ ____ WOMEN: ____ ____
V14	Number of used syringes observed by interviewer at the site	____ ____
V15	Gender of respondent	MALE 1 FEMALE 2

No.	Questions	Coding Categories
<p>Hello. I am working on a study to identify where better health programs are needed in the city. I would like to ask you some questions about this place and the people who come here. The interview should take between 15 and 30 minutes of your time. I won't ask your name or any other identifying information. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning better health program.</p> <p>This is what we will do with the information you give us. We are asking people these questions at hundreds of places in the city. Your answers will be combined with information about other places like this and will not be reported about this place alone. Your name will not be recorded anywhere and we won't ask any information about you except to make sure you are over 17.</p> <p>The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Gulzhan Alimbekova at the Center for Study of Public Opinion.</p>		
V16	Do you agree to participate?	<p>YES 1</p> <p>NO 2</p>
V17	<p>How old are you?</p> <p>*CONCLUDE INTERVIEW IF RESPONDENT IS YOUNGER THAN 18.</p>	<p>___ ___</p>
V18	How many years has this place been in operation as a place where people can pass time?	<p>LESS THAN A YEAR 0</p> <p>1 TO 2 YEARS 1</p> <p>3 TO 5 YEARS 2</p> <p>6 TO 10 YEARS 3</p> <p>MORE THAN TEN YEARS 4</p> <p>NOT APPLICABLE 9</p>
V19	<p>Which types of activities take place here?</p> <p>READ LIST</p> <p>CIRCLE ONE CODE FOR EACH ACTIVITY</p>	<p>YES NO DK</p> <p>Beer Consumed 1 2 8</p> <p>Hard Alcohol Consumed 1 2 8</p> <p>TV Or Video Viewing 1 2 8</p> <p>Dancing 1 2 8</p> <p>Music 1 2 8</p> <p>Computer Games/Slot Machines 1 2 8</p> <p>Eating food 1 2 8</p> <p>Striptease Show 1 2 8</p>

No.	Questions	Coding Categories																																																												
V20	I have been told that people socialize at places like this and meet sexual partners here. READ LIST	<table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">NO</td> <td style="text-align: right;">DK</td> </tr> <tr> <td>Do men meet new female sexual partners here?</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> <td style="text-align: right;">8</td> </tr> <tr> <td>Do women meet new sexual partners here?</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> <td style="text-align: right;">8</td> </tr> <tr> <td>Do men meet male (gay) sexual partners?</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> <td style="text-align: right;">8</td> </tr> <tr> <td>Does someone onsite facilitates partnerships?</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> <td style="text-align: right;">8</td> </tr> </table>		YES	NO	DK	Do men meet new female sexual partners here?	1	2	8	Do women meet new sexual partners here?	1	2	8	Do men meet male (gay) sexual partners?	1	2	8	Does someone onsite facilitates partnerships?	1	2	8																																								
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V21	Do female sex workers solicit customers here?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">YES</td> <td style="text-align: right;">1</td> </tr> <tr> <td style="text-align: right;">NO</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">DON'T KNOW</td> <td style="text-align: right;">8</td> </tr> </table>	YES	1	NO	2	DON'T KNOW	8																																																						
YES	1																																																													
NO	2																																																													
DON'T KNOW	8																																																													
V22	IF YES, For how many years have female sex workers solicited customers here?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">LESS THAN A YEAR</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">1 TO 2 YEARS</td> <td style="text-align: right;">1</td> </tr> <tr> <td style="text-align: right;">3 TO 5 YEARS</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">6 TO 10 YEARS</td> <td style="text-align: right;">3</td> </tr> <tr> <td style="text-align: right;">MORE THAN TEN YEARS</td> <td style="text-align: right;">4</td> </tr> <tr> <td style="text-align: right;">DON'T KNOW</td> <td style="text-align: right;">8</td> </tr> </table>	LESS THAN A YEAR	0	1 TO 2 YEARS	1	3 TO 5 YEARS	2	6 TO 10 YEARS	3	MORE THAN TEN YEARS	4	DON'T KNOW	8																																																
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READ: Let's talk in more details about people who come here during the busiest times.																																																														
V23	Among men who come here during the busiest times how many do you think are: (a) Are Unemployed (b) Are Students (c) Are < Age 18 (d) Live within a 10 minute walk of here (e) Residents of this unit (f) Come here at least once a week (g) Drink alcohol here (h) Find a new sexual partner while they are here (i) Appear to be injection drug users	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"></th> <th style="text-align: center; border-bottom: 1px solid black;">None</th> <th style="text-align: center; border-bottom: 1px solid black;">< Half</th> <th style="text-align: center; border-bottom: 1px solid black;">Half</th> <th style="text-align: center; border-bottom: 1px solid black;">>Half</th> <th style="text-align: center; border-bottom: 1px solid black;">Almost All/ All</th> </tr> </thead> <tbody> <tr> <td>(a) Are Unemployed</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(b) Are Students</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(c) Are < Age 18</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(d) Live within a 10 minute walk of here</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(e) Residents of this unit</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(f) Come here at least once a week</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(g) Drink alcohol here</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(h) Find a new sexual partner while they are here</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td>(i) Appear to be injection drug users</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> </tbody> </table>		None	< Half	Half	>Half	Almost All/ All	(a) Are Unemployed	0	1	2	3	4	(b) Are Students	0	1	2	3	4	(c) Are < Age 18	0	1	2	3	4	(d) Live within a 10 minute walk of here	0	1	2	3	4	(e) Residents of this unit	0	1	2	3	4	(f) Come here at least once a week	0	1	2	3	4	(g) Drink alcohol here	0	1	2	3	4	(h) Find a new sexual partner while they are here	0	1	2	3	4	(i) Appear to be injection drug users	0	1	2	3	4
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V24	Among woman who come here during the busiest times how many do you think are:	<u>None</u>	<u>< Half</u>	<u>Half</u>	<u>>Half</u>	<u>Almost All/ All</u>			
	(a) Are Unemployed	0	1	2	3	4			
	(b) Are Students	0	1	2	3	4			
	(c) Are < Age 18	0	1	2	3	4			
	(d) Live within a 10 minute walk of here	0	1	2	3	4			
	(e) Residents of this district	0	1	2	3	4			
	(f) Come here at least once a week	0	1	2	3	4			
	(g) Drink alcohol here	0	1	2	3	4			
	(h) Find a new sexual partner while they are here	0	1	2	3	4			
	(i) Appear to be injection drug users	0	1	2	3	4			
V25	During a typical week in the last two months, what were the busiest time(s) here? PROBE FOR DAYS AND TIMES OF DAY. MORE THAN ONE ANSWER ALLOWED FOR EACH DAY.		6-11am	11am-5pm	5-10pm	10pm-6am			
		MON	1	2	3	4			
		TUES	1	2	3	4			
		WED	1	2	3	4			
		THURS	1	2	3	4			
		FRI	1	2	3	4			
		SAT	1	2	3	4			
		SUN	1	2	3	4			
V26	What is the maximum number of men who come to this place in one day? Try to estimate the total number of men who come at any time between opening and closing. READ OPTIONS IF NECESSARY		< 10	11-20	21-50	51-100	101-300	301-500	501-1000
			1	2	3	4	5	6	7
V27	What is the maximum number of women who come to this place in one day? Try to estimate the total number of women who come at any time between opening and closing. READ OPTIONS IF NECESSARY		< 10	11-20	21-50	51-100	101-300	301-500	501-1000
			1	2	3	4	5	6	7

<p>V28</p>	<p>What are the busiest times of the year? CAN MARK YES FOR MORE THAN ONE OPTION</p>	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td style="text-align: right;">WINTER</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">SPRING</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">SUMMER</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">AUTUMN</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">HOLIDAYS</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">OTHER _____</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">Specify</td> <td></td> <td></td> </tr> </table>		YES	NO	WINTER	1	2	SPRING	1	2	SUMMER	1	2	AUTUMN	1	2	HOLIDAYS	1	2	OTHER _____	1	2	Specify		
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Specify																										
<p>V29</p>	<p>Have there ever been any AIDS prevention activities at this place? IF YES: What types of activities?</p>	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">1</td> </tr> <tr> <td></td> <td style="text-align: right;">NO</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">ACTIVITIES _____</td> <td></td> <td></td> </tr> <tr> <td style="text-align: right;">_____</td> <td></td> <td></td> </tr> </table>		YES	1		NO	2	ACTIVITIES _____			_____														
	YES	1																								
	NO	2																								
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<p>V30</p>	<p>In the last 12 months, how often have condoms been available here?</p>	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">ALWAYS</td> <td style="text-align: right;">1</td> </tr> <tr> <td></td> <td style="text-align: right;">SOMETIMES</td> <td style="text-align: right;">2</td> </tr> <tr> <td></td> <td style="text-align: right;">NEVER</td> <td style="text-align: right;">3</td> </tr> </table>		ALWAYS	1		SOMETIMES	2		NEVER	3															
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<p>V31</p>	<p>Are there any condoms here today? If YES, can I see one? If YES, how many different brands of condoms?</p>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: right;">YES, BUT YOU CANT SEE ONE</td> <td style="text-align: right;">1</td> </tr> <tr> <td style="text-align: right;">YES, AND A CONDOM WAS SEEN</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">NO</td> <td style="text-align: right;">3</td> </tr> <tr> <td style="text-align: right;">NUMBER OF BRANDS: ____</td> <td style="text-align: right;">____</td> </tr> </table>	YES, BUT YOU CANT SEE ONE	1	YES, AND A CONDOM WAS SEEN	2	NO	3	NUMBER OF BRANDS: ____	____																
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<p>V32</p>	<p>Is it possible for someone to find a condom within 10 minutes of leaving this place at night?</p>	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">1</td> </tr> <tr> <td></td> <td style="text-align: right;">NO</td> <td style="text-align: right;">2</td> </tr> <tr> <td></td> <td style="text-align: right;">DON'T KNOW</td> <td style="text-align: right;">8</td> </tr> </table>		YES	1		NO	2		DON'T KNOW	8															
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<p>V33</p>	<p>Would you be willing to have AIDS educational programs here?</p>	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">1</td> </tr> <tr> <td></td> <td style="text-align: right;">NO</td> <td style="text-align: right;">2</td> </tr> <tr> <td></td> <td style="text-align: right;">NOT APPLICABLE</td> <td style="text-align: right;">9</td> </tr> </table>		YES	1		NO	2		NOT APPLICABLE	9															
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	NO	2																								
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<p>V34</p>	<p>Would you be willing to sell condoms here?</p>	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">1</td> </tr> <tr> <td></td> <td style="text-align: right;">NO</td> <td style="text-align: right;">2</td> </tr> <tr> <td></td> <td style="text-align: right;">NOT APPLICABLE</td> <td style="text-align: right;">9</td> </tr> </table>		YES	1		NO	2		NOT APPLICABLE	9															
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	NO	2																								
	NOT APPLICABLE	9																								
<p>V35</p>	<p>We also want to know what you think about drug use in this unit. How common is injection drug use in this unit?</p>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: right;">VERY COMMON</td> <td style="text-align: right;">1</td> </tr> <tr> <td style="text-align: right;">SOMEWHAT COMMON</td> <td style="text-align: right;">2</td> </tr> <tr> <td style="text-align: right;">NOT VERY COMMON</td> <td style="text-align: right;">3</td> </tr> <tr> <td style="text-align: right;">DOES NOT OCCUR IN THIS AREA</td> <td style="text-align: right;">4</td> </tr> </table>	VERY COMMON	1	SOMEWHAT COMMON	2	NOT VERY COMMON	3	DOES NOT OCCUR IN THIS AREA	4																
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V36	Have you seen used syringes lying around inside or outside this place in the past 3 months?	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p>
V37	Is this a place where drug injectors can be found?	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p>
V38	IF YES, For how many years has this been a place where drug injectors can be found?	<p style="text-align: right;">LESS THAN A YEAR 0</p> <p style="text-align: right;">1 TO 2 YEARS 1</p> <p style="text-align: right;">3 TO 5 YEARS 2</p> <p style="text-align: right;">6 TO 10 YEARS 3</p> <p style="text-align: right;">MORE THAN TEN YEARS 4</p> <p style="text-align: right;">DON'T KNOW 8</p>
V39	Observation: Evidence of AIDS educational activities noted by interviewer at the site	<p style="text-align: center;">NUMBER OF AIDS POSTERS DISPLAYED _____</p> <p style="text-align: center;">NUMBER OF AIDS BROCHURES AT SITE _____</p> <p style="text-align: center;">NUMBER OF CONDOMS VISIBLE _____</p>

QUESTIONNAIRE FOR INDIVIDUALS SOCIALIZING AT SITES
(5/30/02)

No.	Questions	Coding categories
Q1	Name of City	<p align="right">Almaty 1 Karaganda 2 Tashkent 3 Osh 4</p>
Q2	Interviewer Gender and Number	<p align="right">MALE 1 FEMALE 2</p> <p align="center">INTERVIEWER ID NUMBER: ____</p>
Q3	Individual Interview Consecutive Number at site	<p align="right">____</p>
Q4	Name of site and Unique Identification Number	<p align="center">_____ UNIQUE ID NUMBER: _____</p>
Q5	Date (DD/MM/YY)	<p align="right">____ / ____ / ____</p>
Q6	Time of day (24 hour clock)	<p align="right">____ : ____</p>
Q7	Number socializing at place before interview	<p align="right">MEN: ____</p> <p align="right">WOMEN: ____</p>
Q8	<p>According to the opinion of interviewer, amount of drug injectors and sex workers socializing at place before interview.</p> <p>GIVE YOUR BEST ESTIMATE.</p>	<p align="right">MEN</p> <p align="center">BOTH SEX WORKER AND IDU: ____</p> <p align="center">SEX WORKER ONLY: ____</p> <p align="center">IDU ONLY: ____</p> <p align="right">WOMEN</p> <p align="center">BOTH SEX WORKER AND IDU: ____</p> <p align="center">SEX WORKER ONLY: ____</p> <p align="center">IDU ONLY: ____</p>

No.	Questions	Coding categories
Q9	Gender of respondent	<p style="text-align: right;">MALE 1</p> <p style="text-align: right;">FEMALE 2</p>
Q10	Interviewer opinion if respondent is IDU and/or CSW	<p style="text-align: right;">IDU ONLY 1</p> <p style="text-align: right;">CSW ONLY 2</p> <p style="text-align: right;">BOTH IDU AND CSW 3</p> <p style="text-align: right;">NEITHER 4</p>
<p>Hello. I am working on a study to identify where better health programs are needed in the city. I would like to ask you some questions about your behavior, including sexual behavior and other risky behaviors. The interview should take between 20 and 30 minutes of your time and you will not be contacted in the future. I won't ask your name or any other identifying information. Your answers will be kept confidential. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning better health programs.</p> <p>This is what we will do with the information you give us. Your answers will be recorded on a paper that only identifies you with a number. Your name or specific address will not be recorded anywhere. We are asking hundreds of people these questions at places in the city.</p> <p>The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Gulzhan at the Center for Study of Public Opinion at 323640 or 396484.</p>		
Q11	<p>Do you agree to participate?</p> <p>*IF NO, STOP INTERVIEW</p>	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p>
Q12	<p>How old are you?</p> <p>*STOP INTERVIEW IF YOUNGER THAN 18</p>	<p>_____</p>
Q13	<p>Do you live in Almaty or elsewhere?</p> <p>13.1 IF IN ALMATY:</p> <ul style="list-style-type: none"> • What microrayon do you live in? <p>13.2 IF OUTSIDE Almaty:</p> <ul style="list-style-type: none"> • Where? 	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p> <p><u>13.1 IF YES:</u></p> <p>MICRORAYON _____ CODE: _____</p> <p><u>13.2 IF OUTSIDE ALMATY :</u></p> <p style="text-align: right;">ALMATY OBLAST 1</p> <p style="text-align: right;">OTHER OBLASTS OF KAZAKHSTAN 2</p> <p style="text-align: right;">LIVES ELSEWHERE IN CENTRAL ASIA 3</p> <p style="text-align: right;">LIVES OUTSIDE OF CENTRAL ASIA 4</p>

No.	Questions	Coding categories
Q14	How long have you lived in here / there?	LESS THAN ONE YEAR 0 NUMBER OF YEARS ____ ALL MY LIFE 97
Q15	How many nights in the past three months have you slept outside Almaty?	NUMBER OF NIGHTS: ____
Q16	How often do you come to this place? CIRCLE ONLY ONE RESPONSE.	EVERYDAY 1 4-6 TIMES PER WEEK 2 2-3 TIMES PER WEEK 3 ONE TIME PER WEEK 4 2-3 TIMES PER MONTH 5 ONE TIME PER MONTH 6 LESS THAN ONCE A MONTH 7 THIS IS MY FIRST VISIT 8
Q17	When did you come to this place the first time?	THIS IS MY FIRST VISIT 1 WITHIN PAST 4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5
Q18	Some people meet new sexual partners at places like this. Do you believe that people meet new sexual partners here? That is, people they have never had sex with before.	YES 1 NO 2
Q19	In your opinion, of all the people who came here in the past four weeks, what share are injecting drug users? READ OPTIONS	All or almost all 1 More than half 2 About half 3 Less than half 4 Very few 5 None 6
Q20	Have you ever met a new sexual partner here?	YES 1 NO 2

No.	Questions	Coding categories
Q21	When did you last meet a new sexual partner here?	WITHIN 24 HOURS 1 WITHIN PAST 7 DAYS 2 WITHIN PAST 2-4 WEEKS 3 WITHIN PAST 2-3 MONTHS 4 WITHIN PAST 4-6 MONTHS 5 WITHIN PAST 7-12 MONTHS 6 OVER A YEAR AGO 7 NEVER MET A NEW PARTNER HERE 9
Q22	The last time you had sex with this <u>new</u> partner from this place, did you use a condom?	YES 1 NO 2 DON'T REMEMBER 3 NEVER MET A NEW PARTNER HERE 9
Q23	Now I want to ask you about the people you had sex with in the past 4 weeks. How many different people have you had sex with in the past 4 weeks?	4 WEEK TOTAL ____
Q24	How many of these people were <u>new</u> sexual partners for you in the past 4 weeks?	4 WEEK NEW ____
Q25	The last time you had sex with one of these new partners, did you use a condom or not?	YES 1 NO 2 NO NEW PARTNERS IN PAST 4 WEEKS 9
Q26	About how many new sexual partners have you had in the past 12 months?	NONE- NO NEW SEXUAL PARTNERS 0 NUMBER ____
Q27	Do you have any regular long-term sexual partner or partners? That is, someone with whom you have been having sex at least monthly for a year or more. This could be a spouse or lover or someone else.	YES, HAVE ONE OR MORE REGULAR 1 NO REGULAR 2
Q28	The last time you had sex with a regular partner, did you use a condom or not?	YES 1 NO 2 NO REGULAR PARTNER 9

No.	Questions	Coding categories
Q29	In total, including new sexual partners, regular partners, and any other partners, how many sexual partners have you had in the past 12 months?	NUMBER: ___ ___ ___
Q30	When was the last time you used a condom?	WITHIN THE PAST 24 HOURS 1 WITHIN THE PAST WEEK 2 WITHIN PAST 4 WEEKS 3 WITHIN PAST 2-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5 OVER A YEAR AGO 6 NEVER USED A CONDOM 7
Q31	Where did you get the last condom you used?	SHOP 1 PHARMACY 2 KIOSK 3 PARTNER HAD CONDOM 5 FROM A FRIEND 4 RECEIVED FREE OF CHARGE 6 OTHER 7 NEVER USED A CONDOM 9
Q32	Do you have a condom with you? *IF YES, May I see it?	CONDOM WITH ME BUT YOU CANT SEE 1 YES AND CONDOM SEEN 2 BRAND _____ NO CONDOM WITH ME 3
Q33	Have you participated in educational programs about AIDS in last 12 months? IF YES, How many months have passed since the last time you participated?	YES 1 NO 2 MONTHS AGO ___ ___
Q34	Are you currently employed?	YES, FULLTIME 1 YES, OCCASIONAL / PARTTIME WORK 2 NO, NOT LOOKING FOR WORK 3 NO, LOOKING FOR WORK 4
Q35	Do you currently study?	YES 1 NO 2

No.	Questions	Coding categories																																																																								
Q36	<p>We also want to know what you think about drug use in this area. In your opinion, how common is injection drug use in this area?</p> <p>'AREA' REFERS TO THE UNIT WHERE INTERVIEW CONDUCTED.</p>	<p>VERY COMMON 1 SOMEWHAT COMMON 2 NOT VERY COMMON 3 DOES NOT OCCUR IN THIS AREA 4 DON'T KNOW 5</p>																																																																								
Q37	<p>In your opinion, do people who inject drugs socialize here at this place?</p>	<p>YES 1 NO 2 DON'T KNOW 3</p>																																																																								
Q38	<p>Have you heard of any place in Almaty where people who inject drugs can exchange used syringes for new?</p>	<p>YES 1 NO 2</p>																																																																								
Q39	<p>Have you ever been to any of the following places? If yes, was it within the last 4 weeks, between one and six months ago, between seven and 12 months ago, or more than one year ago?</p> <table border="1" data-bbox="289 911 1421 1478"> <thead> <tr> <th></th> <th>Never</th> <th><4 weeks</th> <th>1-6mo</th> <th>7-12mo</th> <th>>1 yr</th> </tr> </thead> <tbody> <tr> <td>Private medical clinic</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>State medical clinic</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Trust Point</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>TB Dispensary</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Emergency</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Infection Hospital</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Skin/Venerological Dispensary</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td colspan="6"><u>Or talk with a:</u></td> </tr> <tr> <td>Private venerological Doctor</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Private narcological doctor</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>An outreach/social worker about injection drug use</td> <td>0</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> </tbody> </table>		Never	<4 weeks	1-6mo	7-12mo	>1 yr	Private medical clinic	0	1	2	3	4	State medical clinic	0	1	2	3	4	Trust Point	0	1	2	3	4	TB Dispensary	0	1	2	3	4	Emergency	0	1	2	3	4	Infection Hospital	0	1	2	3	4	Skin/Venerological Dispensary	0	1	2	3	4	<u>Or talk with a:</u>						Private venerological Doctor	0	1	2	3	4	Private narcological doctor	0	1	2	3	4	An outreach/social worker about injection drug use	0	1	2	3	4	
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Q40	<p>Are you married or living in union with someone?</p>	<p>YES 1 NO 2</p>																																																																								

No.	Questions	Coding categories
Q41	How many years of education did you receive?	ELEMENTARY (UP TO 7 FORMS) OR NONE 1 INCOMPLETE HIGH (8-9 FORMS) 2 PUBLIC HIGH 3 SPECIAL HIGH (TECHNICAL, PEDAGOGICAL, MEDICAL, ETC.) 4 INCOMPLETE HIGHER 5 HIGHER 6
Q42	Now we would like to ask you some questions about your own experience with injecting drugs. Your answers are completely confidential. Have you ever injected drugs?	YES 1 NEVER INJECTED DRUGS 2 DON'T REMEMBER 3
IF EVER INJECTED DRUGS CONTINUE. IF NEVER INJECTED DRUGS, GO TO Q53.		
Q43	IF YES, When did you last inject drugs? IF NO, CIRCLE CODE 9. IF CODE 5 or higher (OVER 6 MONTHS AGO) SKIP to Q53	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2 WITHIN PAST 2-3 MONTHS 3 WITHIN PAST 4-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5 OVER A YEAR AGO 6 NEVER INJECTED DRUGS 9
Q44	With whom do you usually inject drugs? READ OPTIONS	Individually 1 Usually with the same group 2 With different groups 3 Depends on circumstances 4
Q45	Which drug do you inject most often?	RAW OPIUM (HANKA) 1 HEROIN 2 OTHER _____ 3
Q46a	Where did you get the syringe you used the last time you injected drugs?	PHARMACY 1 PURCHASED SOMEWHERE ELSE 2 TRUST POINT 3 FRIEND 4 OTHER 5 DON'T KNOW/REMEMBER 6

No.	Questions	Coding categories																				
Q46b	Did you share a syringe the last time you injected drugs?	YES 1 NO 2 DON'T KNOW/REMEMBER 8																				
Q47	During the last 4 weeks, did you..... READ EACH QUESTION	<table border="0"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: center;">NO</td> <td style="text-align: center;">DK</td> </tr> <tr> <td style="text-align: right;">Share a syringe with other IDU</td> <td style="text-align: right;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td style="text-align: right;">Take drugs from common reservoir</td> <td style="text-align: right;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td style="text-align: right;">Use ready made drug solution without boiling</td> <td style="text-align: right;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td style="text-align: right;">Exchange used for new syringe</td> <td style="text-align: right;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </table>		YES	NO	DK	Share a syringe with other IDU	1	2	8	Take drugs from common reservoir	1	2	8	Use ready made drug solution without boiling	1	2	8	Exchange used for new syringe	1	2	8
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Q48	How many times did you inject drugs yesterday? How many different syringes did you use yesterday?	<table border="0"> <tr> <td style="text-align: right;">_____</td> <td style="text-align: right;">_____</td> </tr> <tr> <td style="text-align: right;">_____</td> <td style="text-align: right;">_____</td> </tr> </table>	_____	_____	_____	_____																
_____	_____																					
_____	_____																					
Q49	In the past four weeks, with about how many different people did you share a syringe? Of those, how many were people you shared a syringe with for the first time?	TOTAL: ____ ____ NEW: ____ ____																				
Q50	Can you get new syringes whenever you want?	ALWAYS 1 SOMETIMES 2 NEVER 3																				
Q51	IF 'SOMETIMES' or 'NEVER', why not always? DO <u>NOT</u> PROMPT RESPONDENT.	NO MONEY 1 EXCHANGE STATION TOO FAR AWAY 2 KIOSK OR DRUG STORE TOO FAR AWAY 3 POLICE MENACE 4 I DON'T THINK IT IS NECESSARY TO GET NEW SYRINGES 5 OTHER _____ 6 RESPONDENT 'ALWAYS' ABOVE 9																				
Q52	How long have you been injecting drugs? IF LESS THAN A YEAR, NUMBER OF MONTHS	NUMBER OF YEARS ____ ____ NUMBER OF MONTHS ____ ____																				

No.	Questions	Coding categories																												
ASK OF ALL RESPONDENTS, REGARDLESS OF REPORTED DRUG USE.																														
Q53	Have you ever been detained by the police for injecting drugs?	YES 1 NO 2																												
Q54	IF YES, Do you think your detainment was registered with the police?	YES 1 NO 2																												
Q55	Do you think you are currently registered with the police as a drug user? IF YES, When do you think you were registered as a drug user?	YES 1 NO 2 MONTH _____ YEAR _____																												
Q56	Have you ever gone to a narcologist or a narcologist dispensary?	YES 1 NO 2																												
Q57	IF YES, Have you ever been registered with a narcology dispensary?	YES 1 NO 2																												
Q58	IF YES, Do you think you are currently registered with the narcologist dispensary? IF YES, when were you registered?	YES 1 NO 2 MONTH _____ YEAR _____																												
AIDS is a growing health problem in Almaty. It is important that we find out how knowledgeable people are about how the virus that causes is transmitted. I would like to ask you your opinion about how the virus that causes AIDS is transmitted.																														
Q59	Is it possible to become infected with HIV/AIDS through..... READ EACH QUESTION	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>Sexual contact without condom</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Injecting drugs with shared syringe</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Eating from common dish</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Swimming in common pool</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Insect bite</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Handshake</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	Sexual contact without condom	1	2	8	Injecting drugs with shared syringe	1	2	8	Eating from common dish	1	2	8	Swimming in common pool	1	2	8	Insect bite	1	2	8	Handshake	1	2	8
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No.	Questions	Coding categories
Q60	<p>What ways can people avoid or reduce their chances of getting infected with HIV?</p> <p>Any other ways?</p> <p>DO NOT READ OUT THE ANSWERS.</p> <p>CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.</p>	<p>USE CONDOMS 1</p> <p>HAVE FEWER PARTNERS 2</p> <p>BOTH PARTNERS HAVE NO OTHER PARTNERS 3</p> <p>NO CASUAL SEX 4</p> <p>NO SEX AT ALL 5</p> <p>NO COMMERCIAL SEX 6</p> <p>AVOID SHARING NEEDLES 7</p> <p>AVOID BLOOD TRANSFUSIONS 8</p> <p>OTHER (SPECIFY) 9</p> <hr/> <p>DON'T KNOW ANY 10</p>
Q61	<p>Can a person who looks healthy be infected with the AIDS virus?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>
Q62	<p>How many times have you been tested for HIV in the last 12 months?</p>	<p>NUMBER OF TIMES TESTED ____</p>
Q63	<p>The last time you were tested for HIV, was it voluntary or obligatory? That is, was it your choice to be tested or were you obliged to be tested.</p>	<p>VOLUNTARY 1</p> <p>OBLIGATORY 2</p> <p>NOT TESTED IN LAST 12 MONTHS 9</p>
ASK WOMEN ONLY:		
Q64	<p>Have you received money in exchange for sex in the past 3 months?</p> <p>IF MALE, CIRCLE CODE 9.</p>	<p>YES 1</p> <p>NO 2</p> <p>MALE RESPONDENT 9</p>
Q65	<p>IF YES, How many different places have you gone to look for clients in the last 4 weeks?</p>	<p>_____</p>
Q66	<p>IF YES, Where in the city do you go to look for clients?</p> <p>CAN RECORD UP TO 3 DISTRICT CODES.</p>	<p>PLACES AND THEIR CODES:</p> <p>_____</p> <p>_____</p> <p>_____</p>

No.	Questions	Coding categories
ASK MEN ONLY:		
Q67	Have you given money or other gifts to anyone in exchange for sexual service in the past 3 months? IF FEMALE, CIRCLE CODE 9.	YES 1 NO 2 DON'T REMEMBER 3 FEMALE RESPONDENT 9
Q68	Have you had sex with a man in the past 4 weeks? IF FEMALE, CIRCLE CODE 9.	YES 1 NO 2 DON'T REMEMBER 3 FEMALE RESPONDENT 9

АНКЕТА КЛЮЧЕВОГО ИНФОРМАНТА

№	Вопросы	Категории кодирования
K1	Город	Алматы 1 Караганды 2 Ташкент 3 Ош 4
K2	Место проведения интервью	Участок в городе _____
K3	Номер интервьюера	_____
K4	Дата (день, месяц, год)	____/____/____
K5	Пол ключевого информанта	МУЖСКОЙ 1 ЖЕНСКИЙ 2
K6	Тип ключевого информанта:	ВВЕДИТЕ КОД: _____
	ВОДИТЕЛЬ ТАКСИ 1	БАРМЕН/ОФИЦИАНТ 16
	ВОДИТЕЛЬ ОБЩЕСТВЕННОГО ТРАНСПОРТА 2	РАБОТНИК ГОСТИНИЦЫ 17
	ДАЛЬНОБОЙЩИК 3	РАБОТНИК БАНИ/САУНЫ 18
	РАБОТНИК (-ЦА) КОММЕРЧЕСКОГО СЕКСА (РКС) 4	БОМЖ 19
	КЛИЕНТ РКС 5	БЕЗРАБОТНЫЙ 20
	СУТЕНЕР 6	ИНОГОРОДНИЙ (-ЯЯ) 21
	ПОТРЕБИТЕЛЬ ИНЪЕКЦИОННЫХ НАРКОТИКОВ 7	ДВОРНИК 22
	РАБОТНИК НПО / ОБЩЕСТВЕННОЙ ОРГАНИЗАЦИИ 8	УБОРЩИК (-ЦА) ПОДЪЕЗДОВ 23
	РАБОТНИК СПИД ЦЕНТРА, НАРКОДИСПАНСЕРА, КВД 9	МОЛОДЕЖЬ 24
	РАБОТНИК СКОРОЙ ПОМОЩИ 10	ЖИТЕЛЬ ОБЩЕЖИТИЯ 25
	МИЛИЦИОНЕР / ПОЛИЦЕЙСКИЙ 11	ЖИТЕЛЬ РАЙОНА 26
	РАБОТНИК ЗДРАВООХРАНЕНИЯ / АПТЕК 12	ДРУГОЕ _____ 50
	ПРОДАВЕЦ ЛАРЬКА / МАГАЗИНА 13	
	ТОРГОВЕЦ / РАБОТНИК НА БАЗАРЕ 14	
	УЛИЧНЫЙ ТОРГОВЕЦ 15	

Здравствуйте. Я представляю Центр Изучения Общественного Мнения в Алматы и принимаю участие в исследовании по поиску мест, где необходимо осуществлять программы здравоохранения. Целью нашего исследования является определение мест, где люди встречают новых сексуальных партнеров, а также мест, где могут быть найдены потребители инъекционных наркотиков. СПИД пока еще не стал у нас большой проблемой, но он может стать ею, если люди не будут знать, как уменьшить шансы инфицирования. Я хотел (а) бы задать Вам несколько вопросов. Скажите, пожалуйста, названия и расположения мест, где люди встречают новых половых партнеров и где мы можем найти потребителей инъекционных наркотиков для осуществления программ по профилактике СПИДа. Нам не нужна информация о частных жилищах. Мы интересуемся только общественно доступными местами. После того, как Вы назовете эти места, мы посетим их и узнаем о возможности осуществления профилактических программ. На ответы Вы потратите от 5 до 15 минут. Мы не будем спрашивать Вашего имени. Мы не будем Вас беспокоить в будущем. Ваши ответы никоим образом на Вас не отразятся. Ваше участие полностью добровольно. Вы можете отказаться отвечать на отдельные вопросы и от интервью в целом. Некоторые вопросы могут Вас смутить. Возможно, Вы не получите прямую выгоду от исследования, но через несколько месяцев в Алматы начнется новая программа в сфере здравоохранения.

Если у Вас возникли какие-либо вопросы, Вы сможете связаться с Гульжан Алимбековой, ответственной за проведение исследования, по тел. 323640 и 396484.

K7	Вы согласны отвечать на вопросы? *ЕСЛИ НЕТ, ПРЕКРАТИТЕ ИНТЕРВЬЮ.	ДА 1 НЕТ 2
K8	Сколько Вам лет? *ЗАВЕРШИТЕ ИНТЕРВЬЮ, ЕСЛИ РЕСПОНДЕНТ МЛАДШЕ 18 ЛЕТ	Точный возраст _____
K9	<p>Мы бы хотели узнать места, где люди проводят время с целью знакомства с новыми половыми партнерами. Это поможет нам планировать там программы по профилактике СПИДа, и сделать доступными презервативы. Конкретно, мы бы хотели знать:</p> <ul style="list-style-type: none"> • В каких местах проводит время молодежь, где молодые люди могут познакомиться с новыми половыми партнерами? • В каких местах можно встретить женщин или мужчин, предлагающих сексуальные услуги за вознаграждение? • В какие места ходят одинокие мужчины, приезжие, сезонные рабочие, чтобы найти новых половых партнеров? • В каких местах люди встречают новых половых партнеров <u>в Вашем районе и вне этого района</u>? В какие места <u>Вашего района</u> могут прийти люди из других районов для поиска новых половых партнеров. <p>ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.</p>	
K10	Что Вы думаете о проблеме наркотиков в Вашем районе? Имеет ли место употребление инъекционных наркотиков в этом районе?	ДА 1 НЕТ 2
K11	За последние 4 недели видели ли Вы выброшенные использованные шприцы в Вашем районе?	ДА 1 НЕТ 2

K12	В каких местах поблизости отсюда можно найти использованные шприцы? ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.	
K13	В каких местах поблизости отсюда можно встретить потребителей инъекционных наркотиков? ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.	
K14	Поблизости отсюда знакомятся ли со своими клиентами женщины, оказывающие сексуальные услуги?	ДА 1 НЕТ 2
K15	В каких местах могут быть найдены женщины, оказывающие сексуальные услуги? ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.	
K16	Количество мест, указанных ключевым информантом на этом участке Количество мест, указанных ключевым информантом вне этого участка	_____ _____

ПРЕДВАРИТЕЛЬНЫЙ СПИСОК СООБЩЕННЫХ МЕСТ. ИСПОЛЬЗУЯ ЭТОТ СПИСОК, СПРОСИТЕ РЕСПОНДЕНТА

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где больше людей встречают новых половых партнеров?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше потребителей инъекционных наркотиков или использованные шприцы?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше женщины, оказывающих сексуальные услуги?

ПОСЛЕ ТОГО, КАК ВЫ ПРИОРИТИЗИРОВАЛИ МЕСТА, ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО МЕСТА, ЗАПИСАННОГО В СПИСКЕ

	секс	ПИН	РКС
1. _____	1	2	3
2. _____	1	2	3
3. _____	1	2	3
4. _____	1	2	3
5. _____	1	2	3
6. _____	1	2	3
7. _____	1	2	3
8. _____	1	2	3
9. _____	1	2	3
10. _____	1	2	3

БЛАНК МЕСТА

S1	Город	Алматы 1 Караганды 2 Ташкент 3 Ош 4															
S2	Место проведения интервью	Номер участка _____															
S3	Номер интервьюера / Номер ключевого информанта	_____ / _____															
S4	Номер места в анкете	_____															
S5	Название места																
S6	Названо как приоритетное место...	Где люди встречают новых половых партнеров 1 Потребителей инъекционных наркотиков 2 Женщин, оказывающих сексуальные услуги 3 Не приоритетно 9															
S7	Адрес этого места и как его найти																
S8	Где расположено это место	Номер участка _____															
S9	ТИП МЕСТА: 01 БАР / КАФЕ / РЕСТОРАН 02 НОЧНОЙ КЛУБ / ДИСКОТЕКА 03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУБ 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛУБ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИРА/ДОМ 12 ПОДВАЛ / ЧЕРДАК 13 ЛЕСТНИЧНАЯ ПЛОЩАДКА / ПОДЪЕЗД ДОМА 14 НЕИСПОЛЬЗУЕМОЕ / БРОШЕННОЕ ЗДАНИЕ	*ВВЕДИТЕ КОД : _____ 15 ТЕРРИТОРИЯ ШКОЛЫ 16 ТЕРРИТОРИЯ КОЛЛЕДЖА / ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ 17 ТЕРРИТОРИЯ ВУЗА 18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ 19 АВТОВОКЗАЛ 20 АЭРОПОРТ 21 СТОЯНКА ГРУЗОВИКОВ 22 СТОЯНКА ТАКСИ 23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД 25 РЫНОК 26 ПАРК / СКВЕР 27 ДРУГОЕ _____															
S10	В этом месте...	<table border="0"> <thead> <tr> <th></th> <th>да</th> <th>нет</th> </tr> </thead> <tbody> <tr> <td>Люди встречают новых половых партнеров</td> <td>1</td> <td>2</td> </tr> <tr> <td>Можно найти потребителей инъекционных наркотиков</td> <td>1</td> <td>2</td> </tr> <tr> <td>Можно найти использованные шприцы</td> <td>1</td> <td>2</td> </tr> <tr> <td>Можно встретить женщин, оказывающих сексуальные услуги</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		да	нет	Люди встречают новых половых партнеров	1	2	Можно найти потребителей инъекционных наркотиков	1	2	Можно найти использованные шприцы	1	2	Можно встретить женщин, оказывающих сексуальные услуги	1	2
	да	нет															
Люди встречают новых половых партнеров	1	2															
Можно найти потребителей инъекционных наркотиков	1	2															
Можно найти использованные шприцы	1	2															
Можно встретить женщин, оказывающих сексуальные услуги	1	2															

ФОРМА ОЦЕНКИ МЕСТА

Номер _____

№	Вопросы	Категории кодирования
V1	Город	Алматы 1 Караганды 2 Ташкент 3 Ош 4
V2	Расположение места	Код участка _____
V3	Идентификационный номер места в списке	_____
V4	Название места	_____
V5	Точный адрес	_____
V6	Укажите маршруты общественного транспорта, проходящие рядом с этим местом	Автобус _____ Троллейбус _____ Трамвай _____ Маршрутное такси _____
V7	Результат проверки места	МЕСТО НЕ НАЙДЕНО 0 МЕСТО НАЙДЕНО, ПРОВЕДЕНО ИНТЕРВЬЮ 1 МЕСТО НАЙДЕНО, НО В ИНТЕРВЬЮ ОТКАЗАНО 2 МЕСТО ВРЕМЕННО ЗАКРЫТО 3 МЕСТА БОЛЬШЕ НЕТ 4
V8	ТИП МЕСТА: 01 БАР / КАФЕ / РЕСТОРАН 02 НОЧНОЙ КЛУБ / ДИСКОТЕКА 03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУБ 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛУБ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИРА/ДОМ 12 ПОДВАЛ / ЧЕРДАК 13 ЛЕСТНИЧНАЯ ПЛОЩАДКА / ПОДЪЕЗД ДОМА 14 НЕИСПОЛЬЗУЕМОЕ / БРОШЕННОЕ ЗДАНИЕ	*ВВЕДИТЕ КОД : _____ 15 ТЕРРИТОРИЯ ШКОЛЫ 16 ТЕРРИТОРИЯ КОЛЛЕДЖА / ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ 17 ТЕРРИТОРИЯ ВУЗА 18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ 19 АВТОВОКЗАЛ 20 АЭРОПОРТ 21 СТОЯНКА ГРУЗОВИКОВ 22 СТОЯНКА ТАКСИ 23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД 25 РЫНОК 26 ПАРК / СКВЕР 27 ДРУГОЕ _____

V9	Номер интервьюера	_____
V10	Дата (ДЕНЬ/МЕСЯЦ)	_____/____
V11	День недели	ПОНЕДЕЛЬНИК 1 ВТОРНИК 2 СРЕДА 3 ЧЕТВЕРГ 4 ПЯТНИЦА 5 СУББОТА 6 ВОСКРЕСЕНЬЕ 7
V12	Время начала интервью (ПО 24-ЧАСОВОЙ СИСТЕМЕ)	____ : ____
V13	Количество людей находящихся на месте на момент прибытия интервьюера	МУЖЧИН: _____ ЖЕНЩИН: _____
V14	Количество использованных шприцев, обнаруженных интервьюером на месте	_____
V15	Пол респондента	МУЖСКОЙ 1 ЖЕНСКИЙ 2
<p>Здравствуй. Я работаю в Центре Изучения Общественного Мнения. Мы собираем информацию о том, где в городе необходимо осуществлять программы по здравоохранению. Поэтому я хочу задать Вам несколько вопросов об этом месте и о людях сюда приходящих. Интервью займет у Вас от 15 до 30 минут. Я не буду спрашивать Вашего имени или любую другую информацию на Вас указывающую. Ваше участие является добровольным, и Вы можете не отвечать на отдельные вопросы или отказаться от интервью. Возможно, Вы будете смущены некоторыми вопросами. Может быть Вы не получите прямой выгоды от настоящего исследования, но данная Вами информация поможет в планировании программ по здравоохранению.</p> <p>Данное исследование проводится во многих местах нашего города. Вся полученная информация об этом месте будет анализироваться только в обобщенном виде вместе с информацией из других мест. Мы хотели бы быть уверенными в том, что Вам больше 17 лет.</p> <p>Ниже приведены имя и контактный телефон человека, отвечающего за данное исследование. Если у Вас есть вопросы, Вы можете обратиться к Гульжан Алимбековой, Центр Изучения Общественного Мнения, по тел.: 39-64-84.</p>		
V16	Вы согласны участвовать?	ДА 1 НЕТ 2
V17	Сколько Вам лет? * ЗАВЕРШИТЕ ИНТЕРВЬЮ, ЕСЛИ РЕСПОНДЕНТ МЛАДШЕ 18 ЛЕТ	Точный возраст _____
V18	Сколько лет прошло с тех пор, как оно стало местом для проведения времени?	МЕНЕЕ ОДНОГО ГОДА 0 ОТ 1 ДО 2 ЛЕТ 1 ОТ 3 ДО 5 ЛЕТ 2 ОТ 6 ДО 10 ЛЕТ 3 БОЛЕЕ 10 ЛЕТ 4 НЕ ПРИМЕНИМО 9

V19	Чем здесь занимаются люди? ПРОЧИТАЙТЕ СПИСОК ОБВЕДИТЕ ОДИН КОД ДЛЯ КАЖДОГО ВИДА ДЕЯТЕЛЬНОСТИ		Пьют пиво Пьют крепкие алкогольные напитки Смотрят телевизор и видео Танцуют Слушают музыку Игры (компьютерные, автоматы) Едят Смотрят стриптиз шоу	ДА 1 1 1 1 1 1 1 1	НЕТ 2 2 2 2 2 2 2 2	ЗО 8 8 8 8 8 8 8 8
V20	Мне сказали, что люди знакомятся с половыми партнерами в местах подобных этому. Действительно ли ЗАЧИТАЙТЕ СПИСОК	Мужчины встречают здесь новых сексуальных партнеров – женщин? Женщины встречают здесь новых сексуальных партнеров? Мужчины встречают здесь новых сексуальных партнеров – мужчин? Помогает ли кто-нибудь здесь людям знакомиться?	ДА 1 1 1 1	НЕТ 2 2 2 2	ЗО 8 8 8 8	
V21	Знакомятся ли здесь женщины, оказывающие сексуальные услуги, со своими клиентами?			Да Нет Не знаю	1 2 8	
V22	Если ДА, Сколько лет прошло с того времени, как в этом месте женщины, оказывающие сексуальные услуги, начали искать клиентов?		Менее одного года От 1 до 2 лет От 3 до 5 лет От 6 до 10 лет Более 10 лет Не знаю		0 1 2 3 4 8	
ПРОЧИТАЙТЕ: Давайте поговорим подробнее о тех, кто приходит сюда в "часы пик".						
V23	На ваш взгляд, среди мужчин, приходящих сюда в "часы пик", какую часть составляют...	<u>Никто</u>	<u>Меньше поло- вины</u>	<u>Поло- вина</u>	<u>Больше поло- вины</u>	<u>Почти все/все</u>
	(a) Безработные	1	2	3	4	5
	(b) Студенты	1	2	3	4	5
	(c) Младше 18 лет	1	2	3	4	5
	(d) Живут в 10 минутах ходьбы отсюда	1	2	3	4	5
	(e) Жители этого района	1	2	3	4	5
	(f) Приходят сюда хотя бы раз в неделю	1	2	3	4	5
	(g) Пьют здесь алкогольные напитки	1	2	3	4	5
	(h) Находят здесь новых половых партнеров	1	2	3	4	5
	(i) Вероятно являются людьми, употребляющими инъекционные наркотики	1	2	3	4	5

V24	На ваш взгляд, среди <u>женщин</u> , приходящих сюда в "часы пик", какую часть составляют...	<u>Никто</u>	<u>Меньше поло- вины</u>	<u>Поло- вина</u>	<u>Больше поло- вины</u>	<u>Почти все/все</u>
	(a) Безработные	1	2	3	4	5
	(b) Студенты	1	2	3	4	5
	(c) Младше 18 лет	1	2	3	4	5
	(d) Живут в 10 минутах ходьбы отсюда	1	2	3	4	5
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	(g) Пьют здесь алкогольные напитки	1	2	3	4	5
	(h) Находят здесь новых половых партнеров	1	2	3	4	5
	(i) Вероятно являются людьми, употребляющими инъекционные наркотики	1	2	3	4	5
V25	Укажите, пожалуйста, "часы пик" типичные для данного места за последние два месяца? СПРОСИТЕ О ДНЯХ И ВРЕМЕНИ СУТОК И ОТМЕТЬТЕ НУЖНЫЕ ВАРИАНТЫ МОЖНО ОТМЕТИТЬ НЕСКОЛЬКО ОТВЕТОВ		Утро 6-11	День 11-17	Вечер 17-22	Ночь 22-6
		ПН	1	2	3	4
		ВТ	1	2	3	4
		СР	1	2	3	4
		ЧТ	1	2	3	4
		ПТ	1	2	3	4
		СБ	1	2	3	4
		ВС	1	2	3	4
V26	Назовите, пожалуйста, максимальное количество мужчин, посещающих данное место в течение суток. Постарайтесь оценить общее количество мужчин, которые приходят от открытия до закрытия. ПРИ НЕОБХОДИМОСТИ, ЗАЧИТАЙТЕ ВАРИАНТЫ					< 10 1 11-20 2 21-50 3 51-100 4 101-300 5 301-500 6 501-1000 7
V27	Назовите, пожалуйста, максимальное количество женщин, посещающих данное место в течение суток? Постарайтесь оценить общее количество женщин, которые приходят от открытия до закрытия. ПРИ НЕОБХОДИМОСТИ, ЗАЧИТАЙТЕ ВАРИАНТЫ					< 10 1 11-20 2 21-50 3 51-100 4 101-300 5 301-500 6 501-1000 7
V28	Укажите наиболее посещаемые периоды?					Да Нет ЗИМА 1 2 ВЕСНА 1 2 ЛЕТО 1 2 ОСЕНЬ 1 2 ПРАЗДНИКИ 1 2 ДРУГОЕ 1 2 Укажите _____

V29	Проводилась ли здесь какие-либо мероприятия/действия по профилактике СПИД?	<p style="text-align: right;">ДА 1 НЕТ 2</p> <p>Если да, то какие? _____</p>
V30	Были ли здесь доступны презервативы в течение последних 12 месяцев?	<p style="text-align: right;">ВСЕГДА 1 ИНОГДА 2 НИКОГДА 3</p>
V31	<p>Есть ли здесь сегодня в наличии презервативы? Если ДА, могу ли я их увидеть?</p> <p>Назовите общее количество производителей?</p>	<p style="text-align: right;">ДА, НО ВЫ НЕ МОЖЕТЕ ИХ УВИДЕТЬ 1 ДА, ПРЕЗЕРВАТИВЫ ПОКАЗАНЫ 2 НЕТ 3</p> <p>КОЛИЧЕСТВО ПРОИЗВОДИТЕЛЕЙ ПРЕЗЕРВАТИВОВ: _____</p>
V32	Можно ли ночью найти /купить презервативы недалеко от этого места (не более 10 минут ходьбы отсюда)?	<p style="text-align: right;">ДА 1 НЕТ 2 НЕ ЗНАЮ 8</p>
V33	Вы бы хотели, чтобы здесь были информационные материалы и/или осуществлялись образовательные мероприятия по профилактике СПИДа?	<p style="text-align: right;">ДА 1 НЕТ 2 НЕ ПРИМЕНИМО 9</p>
V34	Вы бы хотели, чтобы здесь продавались презервативы?	<p style="text-align: right;">ДА 1 НЕТ 2 НЕ ПРИМЕНИМО 9</p>
V35	Что Вы думаете о проблеме наркомании в этом районе? Насколько распространено употребление наркотиков в этом районе?	<p style="text-align: right;">ОЧЕНЬ РАСПРОСТРАНЕНО 1 ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО 2 НЕ ОЧЕНЬ РАСПРОСТРАНЕНО 3 ВООБЩЕ НЕТ В ЭТОМ РАЙОНЕ 4</p>
V36	Видели ли Вы использованные иглы или шприцы внутри или около этого места за последние 3 месяца?	<p style="text-align: right;">Да 1 Нет 2</p>
V37	Встречаются ли в этом месте люди, употребляющие инъекционные наркотики?	<p style="text-align: right;">Да 1 Нет 2</p>

V38	Сколько времени прошло с тех пор, как в этом месте можно встретить людей, употребляющих инъекционные наркотики СПАСИБО ЗА ПОМОЩЬ, ДО СВИДАНИЯ!	<p style="text-align: right;">Менее одного года 0</p> <p style="text-align: right;">От 1 до 2 лет 1</p> <p style="text-align: right;">От 3 до 5 лет 2</p> <p style="text-align: right;">От 6 до 10 лет 3</p> <p style="text-align: right;">Более 10 лет 4</p> <p style="text-align: right;">Не знаю 8</p>
V39	Наблюдение: Признаки деятельности по профилактике СПИДа, замеченные интервьюером на месте	<p>КОЛ-ВО ИМЕЮЩИХСЯ ПЛАКАТОВ (СПИД) _____</p> <p>КОЛ-ВО БРОШЮР НА УЧАСТКЕ (СПИД) _____</p> <p>КОЛИЧЕСТВО ПРЕЗЕРВАТИВОВ, КОТОРОЕ МОЖНО УВИДЕТЬ _____</p>

ИНДИВИДУАЛЬНАЯ АНКЕТА

№	Вопросы	Категории кодирования
Q1	Название города	Алматы 1 Караганды 2 Ташкент 3 Ош 4
Q2	Пол интервьюера и номер	Мужской 1 Женский 2 Индивидуальный номер интервьюера _____
Q3	Последовательный номер индивидуального интервью на месте	_____
Q4	Название и идентификационный номер места	_____ Идентификационный номер места: _____
Q5	Дата (ДД/ММ/ГГ)	____ / ____ / ____
Q6	Время суток (24-часовая система)	_____ : _____
Q7	Количество людей находящихся на месте во время интервью	МУЖЧИН: _____ ЖЕНЩИН: _____
Q8	Количество потребителей инъекционных наркотиков и работниц коммерческого секса, находящихся на месте во время проведения интервью <i>(по мнению интервьюера)</i> ДАЙТЕ ПРИБЛИЗИТЕЛЬНУЮ ОЦЕНКУ	МУЖЧИН НАРКОЗАВИСИМЫХ И ПРЕДЛ. СЕКС. УСЛУГИ: _____ ТОЛЬКО ПРЕДЛАГАЮЩИХ СЕКС. УСЛУГИ: _____ ТОЛЬКО НАРКОЗАВИСИМЫХ: _____ ЖЕНЩИН НАРКОЗАВИСИМЫХ И ПРЕДЛ. СЕКС. УСЛУГИ: _____ ТОЛЬКО ПРЕДЛАГАЮЩИХ СЕКС. УСЛУГИ: _____ ТОЛЬКО НАРКОЗАВИСИМЫХ: _____
Q9	Пол респондента	МУЖСКОЙ 1 ЖЕНСКИЙ 2
Q10	Мнение интервьюера, является ли респондент наркозависимым или предоставляет сексуальные услуги за деньги	ТОЛЬКО НАРКОЗАВИСИМЫЙ (-АЯ) 1 ТОЛЬКО ПРЕДОСТ. СЕКС. УСЛУГИ 2 И ТО И ДРУГОЕ 3 НИ ТО И НИ ДРУГОЕ 4

№	Вопросы	Категории кодирования
<p>Здравствуйте. Я работаю в Центре Изучения Общественного Мнения. Мы собираем информацию для разработки и внедрения программ по здравоохранению, включая профилактические программы по СПИДу и другим заболеваниям. Для этого мы бы хотели задать Вам несколько вопросов относительно вашего поведения, включая несколько интимных вопросов о сексуальном поведении. Интервью продлится от 20 до 30 минут. Мы не будем спрашивать Вашего имени. Мы не будем Вас беспокоить в будущем. Ваши ответы никоим образом на Вас не отразятся. Ваше участие полностью добровольно. Вы можете отказаться отвечать на отдельные вопросы и от интервью в целом. Некоторые вопросы могут Вас смутить. Возможно, Вы не получите прямую выгоду от исследования, но полученная в ходе этого исследования информация поможет лучше спланировать и осуществлять программы по здравоохранению.</p> <p>Вся полученная информация будет анализироваться только в обобщенном виде вместе с ответами многих людей, которых мы опрашиваем.</p> <p>Если у Вас возникли какие-либо вопросы, Вы сможете связаться с Гульжан Алимбековой, ответственной за проведение исследования, по тел. 323640 и 396484.</p>		
Q11	<p>Вы согласны участвовать? *ЕСЛИ НЕТ, ПРЕКРАТИТЕ ИНТЕРВЬЮ</p>	<p>ДА 1 НЕТ 2</p>
Q12	<p>Сколько вам лет? ПРЕКРАТИТЕ ИНТЕРВЬЮ, ЕСЛИ РЕСПОНДЕНТ МЛАДШЕ 18 ЛЕТ.</p>	<p>___ ___</p>
Q13	<p>Вы живете в Алматы? 13.1. Если ДА, то в каком микрорайоне или части города Вы проживаете? 13.2. Если за пределами Алматы, то где?</p>	<p>13.1. Микрорайон или часть города _____ Код _____ 13.2. АЛМАТИНСКАЯ ОБЛАСТЬ 1 ДРУГАЯ ОБЛАСТЬ КАЗАХСТАНА 2 ДРУГАЯ СТРАНА СРЕДНЕЙ АЗИИ 3 ДРУГАЯ СТРАНА 4</p>
Q14	<p>Как долго Вы здесь /там/ живете?</p>	<p>МЕНЕЕ ОДНОГО ГОДА 0 КОЛИЧЕСТВО ЛЕТ ___ ___ ВСЮ ЖИЗНЬ 97</p>
Q15	<p>Сколько ночей Вы провели за пределами города за последние три месяца?</p>	<p>КОЛИЧЕСТВО НОЧЕЙ: ___ ___</p>

Q16	Как часто Вы приходите в это место? ОБВЕДИТЕ ТОЛЬКО ОДИН ОТВЕТ	КАЖДЫЙ ДЕНЬ 1 4-6 РАЗ В НЕДЕЛЮ 2 2-3 РАЗА В НЕДЕЛЮ 3 ОДИН РАЗ В НЕДЕЛЮ 4 2-3 РАЗА В МЕСЯЦ 5 ОДИН РАЗ В МЕСЯЦ 6 МЕНЕЕ ОДНОГО РАЗА В МЕСЯЦ 7 ЭТО МОЙ ПЕРВЫЙ ВИЗИТ 8
Q17	Когда Вы пришли сюда впервые?	ЭТО МОЙ ПЕРВЫЙ ВИЗИТ 1 НЕ БОЛЕЕ 4 НЕДЕЛЬ НАЗАД 2 НА БОЛЕЕ 2-6 МЕСЯЦЕВ НАЗАД 3 НА БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД 4 БОЛЬШЕ ГОДА НАЗАД 5
Q18	Некоторые люди встречают новых сексуальных партнеров в местах подобных этому. Как Вы считаете, встречают ли люди здесь новых сексуальных партнеров, то есть людей, с которыми они еще никогда не занимались сексом?	ДА 1 НЕТ 2
Q19	Как вы считаете, сколько людей, из посетивших данное место за последние четыре недели, являются потребителями инъекционных наркотиков? ЗАЧИТАЙТЕ ВАРИАНТЫ ОТВЕТОВ	Все или почти все 1 Более половины 2 Около половины 3 Менее половины 4 Немногие 5 Никто 6
Q20	Вы когда-нибудь познакомились здесь с человеком, который стал Вашим новым сексуальным партнером?	ДА 1 НЕТ 2
Q21	Когда Вы в последний раз познакомились здесь с новым сексуальным партнером?	НЕ БОЛЕЕ 24 ЧАСОВ НАЗАД 1 НЕ БОЛЕЕ 7 ДНЕЙ НАЗАД 2 НЕ БОЛЕЕ 2-4 НЕДЕЛЬ НАЗАД 3 НЕ БОЛЕЕ 2-3 МЕСЯЦЕВ НАЗАД 4 НА БОЛЕЕ 4-6 МЕСЯЦЕВ НАЗАД 5 НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД 6 БОЛЕЕ ГОДА НАЗАД 7 НИКОГДА НЕ ВСТРЕЧАЛ ЗДЕСЬ НОВОГО ПАРТНЕРА 9
Q22	Когда Вы в последний раз занимались сексом с <u>этим новым</u> партнером, пользовались ли Вы презервативом?	ДА 1 НЕТ 2 НЕ ПОМНЮ 3 НИКОГДА НЕ ВСТРЕЧАЛ ЗДЕСЬ НОВОГО ПАРТНЕРА 9

Q23	Сейчас я бы хотел спросить Вас о людях, с которыми Вы вступали в половые отношения за последние 4 недели. Вспомните, со сколькими разными людьми Вы занимались сексом за последние 4 недели?	ВСЕГО ЗА 4 НЕДЕЛИ ____ ____
Q24	Сколько из этих людей являлись новыми половыми партнерами за последние 4 недели?	КОЛИЧЕСТВО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ ____ ____
Q25	В последний раз, когда Вы занимались сексом с одним из этих <u>новых</u> партнеров, Вы пользовались презервативом? ЕСЛИ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ НЕ БЫЛО НОВЫХ ПАРТНЕРОВ, ОТМЕТЬТЕ КОД '9'	ДА 1 НЕТ 2 НЕ БЫЛО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ 9
Q26	Примерно сколько новых половых партнеров у Вас было в течение последних 12 месяцев?	НЕ БЫЛО НОВЫХ ПОЛОВЫХ ПАРТНЕРОВ 0 КОЛИЧЕСТВО ____ ____ ____
Q27	У Вас есть постоянный половой партнер(ы), то есть тот (те), с которым Вы вступали в половые отношения как минимум ежемесячно в течение последнего года, или более? Это может быть супруг(а), любовник(ца) или кто-то еще.	ДА, У МЕНЯ ЕСТЬ РЕГУЛЯРНЫЙ(Е) ПАРТНЕР(Ы) 1 НЕТ РЕГУЛЯРНОГО ПАРТНЕРА 2
Q28	Использовали ли Вы презерватив при последнем половом акте с Вашим постоянным половым партнером?	ДА 1 НЕТ 2 НЕ БЫЛО ПОСТОЯННОГО ПАРТНЕРА 9
Q29	Сколько у Вас было половых партнеров, включая постоянных и новых, в течение последних 12 месяцев?	КОЛИЧЕСТВО ____ ____ ____
Q30	Когда вы пользовались презервативом в последний раз?	НЕ БОЛЕЕ 24 ЧАСОВ НАЗАД 1 НЕ БОЛЕЕ НЕДЕЛИ НАЗАД 2 НЕ БОЛЕЕ 4 НЕДЕЛЬ НАЗАД 3 НЕ БОЛЕЕ 2-6 МЕСЯЦЕВ НАЗАД 4 НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД 5 БОЛЕЕ ГОДА НАЗАД 6 НИКОГДА НЕ ПОЛЬЗОВАЛСЯ(ЛАСЬ) ПРЕЗЕРВАТИВОМ 7
Q31	Где Вы взяли презерватив, который использовали в последний раз?	В МАГАЗИНЕ 1 В АПТЕКЕ 2 В КИОСКЕ 3 ПРЕЗЕРВАТИВ БЫЛ У ПАРТНЕРА 4 У ДРУГА 5 ПОЛУЧИЛ БЕСПЛАТНО 6 ДРУГОЕ 7 НИКОГДА НЕ ПОЛЬЗОВАЛСЯ(ЛАСЬ) ПРЕЗЕРВАТИВОМ 9

Q32	У Вас есть с собой презерватив? *ЕСЛИ ДА, Могу я посмотреть?	ПРЕЗЕРВАТИВ ЕСТЬ, НО Я ЕГО НЕ ПОКАЖУ 1 ДА, И ПРЕЗЕРВАТИВ ПОКАЗАН 2 Производитель _____ ПРЕЗЕРВАТИВА С СОБОЙ НЕТ 3
Q33	Принимали ли Вы участие в информационно-образовательных программах по проблеме СПИДа за последние 12 месяцев? Сколько месяцев прошло после Вашего последнего участия в подобной программе?	ДА 1 НЕТ 2 КОЛИЧЕСТВО МЕСЯЦЕВ: ____ ____
Q34	Работаете ли Вы в настоящее время?	ДА, ПОЛНАЯ ЗАНЯТОСТЬ 1 ДА, СЛУЧАЙНАЯ РАБОТА / НЕПОЛНАЯ ЗАНЯТОСТЬ 2 НЕТ, И НЕ ИЩУ РАБОТУ 3 НЕТ, ИЩУ РАБОТУ 4
Q35	Учитесь ли Вы в настоящее время?	ДА 1 НЕТ 2
Q36	Мы бы так же хотели знать о том, что Вы думаете о потреблении наркотиков в этом районе. По Вашему мнению, как сильно распространено потребление инъекционных наркотиков в этом районе? «РАЙОН» ОБОЗНАЧАЕТ УЧАСТОК, ГДЕ ПРОВОДИТСЯ ИНТЕРВЬЮ	ОЧЕНЬ РАСПРОСТРАНЕНО 1 ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО 2 НЕ ОЧЕНЬ РАСПРОСТРАНЕНО 3 НЕ РАСПРОСТРАНЕНО ВОООЩЕ 4 НЕ ЗНАЮ 5
Q37	Как Вы считаете, приходят ли сюда люди, употребляющие инъекционные наркотики?	ДА 1 НЕТ 2 НЕ ЗНАЮ 3
Q38	Знаете ли Вы что-нибудь о месте (местах) в Алматы, где потребители инъекционных наркотиков могут обменять использованные шприцы на новые?	ДА 1 НЕТ 2

Q39	Бывали ли Вы в следующих местах? Если да, то когда это было в последний раз: 4 недели и менее; от 1 до 6 месяцев; от 7 до 12 месяцев; более года тому назад?					
		Никогда	4 недели и менее	От 1 до 6 месяцев	От 7 до 12 месяцев	Более года тому назад
	Частная мед. клиника	0	1	2	3	4
	Государственная поликлиника или больница	0	1	2	3	4
	Пункт доверия	0	1	2	3	4
	Туберкулезный диспансер	0	1	2	3	4
	Скорая помощь	0	1	2	3	4
	Инфекционная больница	0	1	2	3	4
	Кожно-венерологический диспансер	0	1	2	3	4
	<u>Или прибегали к услугам:</u>					
	Частного венеролога	0	1	2	3	4
	Частного нарколога	0	1	2	3	4
	Социального работника, работающего с потребителями инъекционных наркотиков	0	1	2	3	4
Q40	Состоите ли Вы с кем-либо в браке (зарегистрированном или незарегистрированном)?			ДА 1 НЕТ 2		
Q41	Ваш уровень образования?			НАЧАЛЬНОЕ (ДО 7 КЛАССОВ) ИЛИ НИКАКОГО 1 НЕЗАКОНЧЕННОЕ СРЕДНЕЕ (8-9 КЛАССОВ) 2 СРЕДНЕЕ 3 СРЕДНЕЕ СПЕЦИАЛЬНОЕ 4 НЕЗАКОНЧЕНОЕ ВЫСШЕЕ 5 ВЫСШЕЕ 6		
Q42	А теперь мы хотели бы задать Вам несколько вопросов о Вашем собственном опыте потребления инъекционных наркотиков. Ваши ответы будут сохранены в конфиденциальности. Вы когда-нибудь употребляли наркотики путем инъекций?			ДА 1 НИКОГДА НЕ УПОТРЕБЛЯЛ ИНЪЕКЦИОННЫЕ НАРКОТИКИ 2 ОТКАЗ 3		
ЕСЛИ ДА, ПРОДОЛЖИТЕ ИНТЕРВЬЮ. ЕСЛИ НЕТ, ПЕРЕХОДИТЕ К ВОПРОСУ 53						

Q43	<p>ЕСЛИ ДА: Когда Вы в последний раз употребляли наркотики путем инъекций?</p> <p>ЕСЛИ НЕТ, ОБВЕДИТЕ КОД 9</p> <p>ЕСЛИ КОД 5 ИЛИ ВЫШЕ (БОЛЕЕ 6 МЕСЯЦЕВ НАЗАД) ПЕРЕХОДИТЕ К ВОПРОСУ 53</p>	<p>НЕ БОЛЕЕ 7 ДНЕЙ НАЗАД 1</p> <p>НЕ БОЛЕЕ 2-4 НЕДЕЛЬ НАЗАД 2</p> <p>НЕ БОЛЕЕ 2-3 МЕСЯЦЕВ НАЗАД 3</p> <p>НЕ БОЛЕЕ 4-6 МЕСЯЦЕВ НАЗАД 4</p> <p>НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД 5</p> <p>БОЛЕЕ ГОДА НАЗАД 6</p> <p>НИКОГДА НЕ УПОТРЕБЛЯЛ НАРКОТИКИ ПУТЕМ ИНЪЕКЦИЙ 9</p>																				
Q44	<p>С кем Вы преимущественно употребляете инъекционные наркотики?</p> <p>ПРОЧИТАЙТЕ ВАРИАНТЫ</p>	<p>Индивидуально 1</p> <p>В постоянной группе 2</p> <p>В случайной группе 3</p> <p>Зависит от обстоятельств 4</p>																				
Q45	<p>Какие наркотики Вы принимаете путем инъекции <u>наиболее часто</u>?</p> <p>ПРОЧИТАЙТЕ ВАРИАНТЫ</p>	<p>ХАНКА (СЫРОЙ ОПИУМ) 1</p> <p>ГЕРОИН 2</p> <p>ДРУГОЕ _____ 3</p>																				
Q46A	<p>Откуда был шприц, когда Вы употребляли наркотики путем инъекций в последний раз?</p>	<p>КУПИЛ В АПТЕКЕ 1</p> <p>КУПИЛ В ДРУГОМ МЕСТЕ 2</p> <p>ПОЛУЧИЛ В ПУНКТЕ ОБМЕНА ШПРИЦЕВ 3</p> <p>ИСПОЛЬЗОВАЛ ШПРИЦ ДРУГА/ЗНАКОМОГО 4</p> <p>ДРУГОЕ 5</p> <p>НЕ ЗНАЮ 6</p>																				
Q46B	<p>В последний раз, когда Вы употребляли наркотики путем инъекций, пользовались ли Вы общей иглой или шприцем?</p>	<p>ДА 1</p> <p>НЕТ 2</p> <p>НЕ ЗНАЮ/НЕ ПОМНЮ 9</p>																				
Q47	<p>За последние 4 недели Вам доводилось ...</p> <p>ПРОЧИТАЙТЕ КАЖДЫЙ ВОПРОС</p>	<table border="1"> <thead> <tr> <th></th> <th>ДА</th> <th>НЕТ</th> <th>Не знаю</th> </tr> </thead> <tbody> <tr> <td>Пользоваться общим шприцем вместе с другими потребителями наркотиков</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Забирать наркотики из общей емкости</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Пользоваться готовым раствором без его кипячения</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Обменивать использованный шприц на новый</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		ДА	НЕТ	Не знаю	Пользоваться общим шприцем вместе с другими потребителями наркотиков	1	2	8	Забирать наркотики из общей емкости	1	2	8	Пользоваться готовым раствором без его кипячения	1	2	8	Обменивать использованный шприц на новый	1	2	8
	ДА	НЕТ	Не знаю																			
Пользоваться общим шприцем вместе с другими потребителями наркотиков	1	2	8																			
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Обменивать использованный шприц на новый	1	2	8																			
Q48	<p>Сколько раз Вы употребляли инъекционные наркотики вчера?</p> <p>Сколько разных шприцов Вы использовали вчера?</p>	<p>_____</p> <p>_____</p>																				

Q49	Со сколькими людьми Вам пришлось пользоваться общим шприцем за последние четыре недели? С кем из них Вы делали это впервые?	ВСЕГО: ____ ____ КОЛИЧЕСТВО НОВЫХ: _____
Q50	Вы можете достать новый шприц в любой момент, когда Вам это необходимо?	ВСЕГДА 1 ИНОГДА 2 НИКОГДА 3
Q51	ЕСЛИ «ИНОГДА» или «НИКОГДА», то почему не всегда? ВАРИАНТЫ НЕ ПРЕДЛАГАТЬ	НЕТ ДЕНЕГ 1 ПУНКТ ОБМЕНА ШПРИЦИОВ НАХОДИТСЯ ДАЛЕКО 2 КИОСК ИЛИ АПТЕКА НАХОДЯТСЯ ДАЛЕКО 3 БОЯЗНЬ ПОЛИЦИИ 4 НЕ СЧИТАЮ НЕОБХОДИМЫМ ПРИОБРЕТАТЬ НОВЫЕ ШПРИЦЫ 5 ДРУГОЕ _____ 6 РЕСПОНДЕНТ ОТВЕЧАЛ ТОЛЬКО «ВСЕГДА» 9
Q52	Сколько лет Вы употребляете инъекционные наркотики?	КОЛИЧЕСТВО ЛЕТ ____ ____ КОЛИЧЕСТВО МЕСЯЦЕВ ____ ____
СПРАШИВАТЬ У ВСЕХ РЕСПОНДЕНТОВ НЕЗАВИСИМО ОТ ТОГО, ПОТРЕБЛЯЮТ ОНИ НАРКОТИКИ ИЛИ НЕТ		
Q53	Вас когда-нибудь задерживала полиция за потребление инъекционных наркотиков?	ДА 1 НЕТ 2
Q54	ЕСЛИ ДА, как Вы считаете, было ли Ваше задержание зарегистрировано?	ДА 1 НЕТ 2
Q55	ЕСЛИ ДА, как Вы считаете, в настоящее время Вы состоите на учете в полиции как наркопотребитель? ЕСЛИ ДА, с какого времени Вы состоите на учете в полиции как наркопотребитель?	ДА 1 НЕТ 2 МЕСЯЦ _____, ГОД _____
Q56	Вы когда-нибудь обращались или Вас приводили к наркологу или в наркологический диспансер?	ДА 1 НЕТ 2
Q57	ЕСЛИ ДА, то Вы когда-нибудь состояли на учете в наркологическом диспансере?	ДА 1 НЕТ 2
Q58	ЕСЛИ ДА, в настоящее время Вы состоите на учете в наркологическом диспансере? ЕСЛИ ДА, с какого времени Вы состоите на учете в наркологическом диспансере?	ДА 1 НЕТ 2 МЕСЯЦ _____, ГОД _____

Проблема СПИДа в Алматы становится все более актуальной. Поэтому нам важно оценить уровень знаний о ВИЧ/СПИДе и путях его передачи. По Вашему мнению, как можно заразиться ВИЧ/СПИДом?					
Q59	Можно ли заразиться СПИДом ...		Да	Нет	Не знаю
	ПРОЧИТАЙТЕ КАЖДЫЙ ВОПРОС	При половом контакте без презерватива	1	2	8
		При употреблении наркотиков общим шприцом	1	2	8
		При пользовании общей посуды для приема пищи	1	2	8
		При купании в общем бассейне	1	2	8
		При укусе насекомого	1	2	8
		При рукопожатии	1	2	8
Q60	<p>Как можно снизить риск или избежать заражения ВИЧ инфекцией /СПИДом? Какие способы Вы знаете? НЕ ЗАЧИТЫВАЙТЕ ОТВЕТЫ. ОБВЕДИТЕ ВСЕ ДАННЫЕ ОТВЕТЫ. ОТВЕТОВ МОЖЕТ БЫТЬ БОЛЬШЕ ОДНОГО.</p>	ИСПОЛЬЗОВАТЬ ПРЕЗЕРВАТИВЫ	1		
		ИМЕТЬ НЕБОЛЬШОЕ КОЛИЧЕСТВО ПОЛОВЫХ ПАРТНЕРОВ	2		
		ОБА ПАРТНЕРА ДОЛЖНЫ СОХРАНЯТЬ ВЕРНОСТЬ ДРУГ ДРУГУ	3		
		ИЗБЕГАТЬ СЛУЧАЙНЫХ ПОЛОВЫХ СВЯЗЕЙ	4		
		ОТКАЗАТЬСЯ ОТ СЕКСА ВООБЩЕ	5		
		ОТКАЗАТЬСЯ ОТ УСЛУГ КОММЕРЧЕСКОГО СЕКСА	6		
		ИЗБЕГАТЬ СОВМЕСТНОГО ИСПОЛЬЗОВАНИЯ ШПРИЦЕВ	7		
		ИЗБЕГАТЬ ПЕРЕЛИВАНИЯ КРОВИ	8		
		ДРУГОЕ (УКАЗАТЬ) _____	9		
		НЕ ЗНАЮ	10		
Q61	Может ли человек, имеющий здоровый вид, быть инфицированным ВИЧ/СПИДом?	ДА	1		
		НЕТ	2		
		НЕ ЗНАЮ	3		
Q62	Сколько раз вы проверялись на ВИЧ/СПИД за последние 12 месяцев?	КОЛИЧЕСТВО ТЕСТОВ	___	___	
Q63	Ваша последняя проверка на СИПД/ВИЧ была добровольной или обязательной (по направлению)? То есть, было ли это Вашим выбором или Вас к этому обязали?	ДОБРОВОЛЬНАЯ	1		
		ОБЯЗАТЕЛЬНАЯ	2		
		ЗА ПОСЛЕДНИЕ 12 МЕСЯЦЕВ НЕ ПРОВЕРЯЛСЯ	9		

ВОПРОСЫ ТОЛЬКО ДЛЯ ЖЕНЩИН:		
Q64	Вступали ли Вы в сексуальные отношения за деньги или другое материальное вознаграждение в течение последних 3 месяцев? ЕСЛИ РЕСПОНДЕНТ МУЖЧИНА, ОТМЕТЬТЕ КОД 9	<p style="text-align: right;">ДА 1 НЕТ 2 РЕСПОНДЕНТ-МУЖЧИНА 9</p>
Q65	ЕСЛИ ДА, укажите, пожалуйста, количество мест, где Вы искали клиентов в течение последних четырех недель.	_____
Q66	ЕСЛИ ДА, укажите места, где Вы искали клиентов.	<p style="text-align: right;">Место:</p> <p>_____</p> <p>_____</p> <p>_____</p>
ВОПРОСЫ ТОЛЬКО ДЛЯ МУЖЧИН:		
Q67	Платили ли Вы кому-нибудь деньги или делали материальное вознаграждение в другой форме за сексуальные услуги в течение последних 3 месяцев? ЕСЛИ РЕСПОНДЕНТ ЖЕНЩИНА, ОБВЕДИТЕ КОД 9	<p style="text-align: right;">ДА 1 НЕТ 2 НЕ ПОМНЮ 3 РЕСПОНДЕНТ-ЖЕНЩИНА 9</p>
Q68	Занимались ли Вы сексом с мужчиной в течение последних 4-х недель? ЕСЛИ РЕСПОНДЕНТ ЖЕНЩИНА, ОБВЕДИТЕ КОД 9	<p style="text-align: right;">ДА 1 НЕТ 2 НЕ ПОМНЮ 3 РЕСПОНДЕНТ-ЖЕНЩИНА 9</p>

СПАСИБО ЗА ВАШУ ПОМОЩЬ!

Appendix 3 – Follow-up Questionnaires

KEY INFORMANT CHARACTERISTICS – CAR 2003

No.	Questions	Coding categories
K1	Assessment City	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
K2	Location of Interview	UNIT in city: ____ ____
K3	Interviewer Number / Key Informant Number	____ / ____
K4	Date	____ / ____ / ____
K5	Gender of Key Informant	MALE 1 FEMALE 2
K6	Type of Key Informant:	ENTER CODE: ____ ____ TAXI DRIVER 01 PUBLIC TRANSPORTATION DRIVER 02 LONG DISTANCE TRUCK DRIVERS 03 SEX WORKER 04 CLIENT OF SEX WORKER 05 PIMP 06 INJECTION DRUG USER 07 NON-GOVERNMENTAL ORG (NGO) STAFF 08 WORKERS OF AIDS CENTER, NARCOLOGICA DISPENSARY, VENEROLOGICAL CLINIC 09 MEDICAL PERSONNEL 10 POLICE OFFICER 11 HEALTH CARE/ PHARMACY WORKER 12 MINI-MARKET /SHOP SELLER 13 SELLERS AND WORKERS IN MARKET 14 STREET VENDOR 15
		BARMEN/WAITERS 16 HOTEL STAFF 17 SAUNA STAFF 18 HOMELESS 19 UNEMPLOYED 20 NEW ARRIVALS/ TEMPORARY 21 STREET CLEANERS 22 STAIRWELL CLEANER 23 FLAT OWNERS COOP PERSONNEL 24 YOUTH 25 DORMITORY RESIDENT 26 RESIDENT OF AREA 27 OTHER _____ 50

No.	Questions	Coding categories
<p>Hello. I am working for the Center for Study of Public Opinion in Almaty on a study to identify where better health programs are needed in the city. The purpose of the study is to find out where people go to meet new sexual partners and to find out where people who inject drugs can be found. AIDS doesn't seem to be a big problem yet in this area, but it could become a big problem if people don't learn about how to reduce the chances they will get infected. I would like to ask you a few questions. We want you to tell us the names and locations of places where people meet new sexual partners and where we can reach drug injectors for prevention programs. We don't want to know the names of any private residences. We are just interested in public places. If you tell us where these places are then we will visit those places to see if they want to have a health program there. Telling us the names and locations of sites should take between 5 and 15 minutes. We won't ask your name or ask you to provide any identifying information. You will not be contacted in the future. Your answers cannot be linked back to you. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. You may be embarrassed by the questions. You may not personally benefit directly from this study, but in a few months a new health program will be carried out in this city.</p> <p>The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Gulzhan at the Center for Study of Public Opinion.</p>		
K7	<p>Are you willing to participate? *IF NO, STOP INTERVIEW.</p>	<p>YES 1 IF NO, STOP INTERVIEW. NO 2</p>
K8	<p>How old are you? *STOP INTERVIEW IF RESPONDENT IS YOUNGER THAN 18</p>	<p>___ ___</p>
K9	<p>We want to know where people socialize with the intention of meeting a new sexual partner. This will help us plan AIDS prevention programs there and have condoms available. We especially want to know:</p> <ul style="list-style-type: none"> • Where youth socialize and meet new sexual partners • Where women or men sell sex • Where other people such as single men, gay men, temporary residents, migrant workers, go to find new sexual partners. • Where people in this unit go to meet new partners in this unit and in other units. We also want to know where people from outside the unit come to meet new sexual partners in this unit. <p>K9A. Do you know of any such places? YES ----- 1 NO ----- 2</p> <p>K9B. IF YES: Name the sites within (A) a 10 minute walk or (B) further away.</p> <p>*WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.</p>	
K10	<p>We also want to know what you think about drug use around here. Does injecting drug use occur here (in this unit)?</p>	<p>YES 1 NO 2</p>

No.	Questions	Coding categories
K11	Have you seen any syringes around here in the last 4 weeks?	YES 1 NO 2
K12	Where can syringes be found around here? *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K13	Where can injecting drug users be found around here? *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K14	Do sex workers look for customers around here?	YES 1 NO 2
K15	Where can sex workers be found? *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K16	Number of places named within 10 minute walk of interview location. Number of places named further than a 10 minute walk of interview location.	_____ _____

LIST PLACES NAMED ON LINES BELOW.

For each site named by the Respondent, CIRCLE "1" if the site is located within a 10 minute walk of here and "2" if it is further than a 10 minute walk from here.

	In 10 minute walk from here	Further than 10 minute walk from here
1. _____	1	2
2. _____	1	2
3. _____	1	2
4. _____	1	2
5. _____	1	2
6. _____	1	2
7. _____	1	2
8. _____	1	2
9. _____	1	2
10. _____	1	2

**KEY INFORMANT REFUSAL FORM – CAR
2003**

No.	Questions	Coding categories
K1	Assessment City	<p align="right">Almaty 1 Karaganda 2 Tashkent 3 Osh 4</p>
K2	Location of Interview	UNIT in city: ____ ____
K3	Interviewer Number	____ __
K4	Date	____ / ____ / ____
K5	Gender of Key Informant	<p align="right">MALE 1 FEMALE 2</p>
K6	Type of Key Informant: TAXI DRIVER 01 PUBLIC TRANSPORTATION DRIVER 02 LONG DISTANCE TRUCK DRIVERS 03 SEX WORKER 04 CLIENT OF SEX WORKER 05 PIMP 06 INJECTION DRUG USER 07 NON-GOVERNMENTAL ORG (NGO) STAFF 08 WORKERS OF AIDS CENTER, NARCOLOGICA DISPENSARY, VENEROLOGICAL CLINIC 09 MEDICAL PERSONNEL 10 POLICE OFFICER 11 HEALTH CARE/ PHARMACY WORKER 12 MINI-MARKET /SHOP SELLER 13 SELLERS AND WORKERS IN MARKET 14 STREET VENDOR 15	<p>ENTER CODE: ____ ____</p> <p align="right">BARMEN/WAITERS 16 HOTEL STAFF 17 SAUNA STAFF 18 HOMELESS 19 UNEMPLOYED 20 NEW ARRIVALS/ TEMPORARY 21 STREET CLEANERS 22 STAIRWELL CLEANER 23 FLAT OWNERS COOP PERSONNEL 24 YOUTH 25 DORMITORY RESIDENT 26 RESIDENT OF AREA 27 DIFFICULT TO VERIFY TYPE OF INFORMANT 30 OTHER _____ 50</p>

**PLACE REPORT FORM
2003**

S1	Assessment	Almaty 1 Karaganda 2 Tashkent 3 Osh 4															
S2	Location of Interview	UNIT ____															
S3	Interviewer Number / Key Informant Number	____ / ____															
S4	Key Informant / Place Report Number	____ / ____															
S5	Name of place	_____															
S6	Location of place relative to site of key informant interview. The site is	Within 10 minute walk of here 1 Further than 10 minute walk from here 2															
S7	Address of place and how to find it.																
S8	Where is the place located? In what unit?	UNIT in city (CODE 1-85): ____															
S9	<p>TYPE OF PLACE:</p> <p>01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUILDING</p> <p>15 SCHOOL 16 COLLEGE/PROFESSIONAL SCHOOL 17 UNIVERSITY CAMPUS/TUTORIAL INSTITUTE 18 RAILWAY STATION 19 BUS STATION 20 AIRPORT 21 TRUCK STOP/STAND 22 TAXI STAND 23 STREET 24 STREET TUNNEL 25 MARKET 26 PARK 27 OTHER (specify): _____</p>	<p>*ENTER CODE: ____</p>															
S10	Is this a place where.....	<table border="0"> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>People meet sexual partners</td> <td>1</td> <td>2</td> </tr> <tr> <td>Drug Injectors can be found</td> <td>1</td> <td>2</td> </tr> <tr> <td>Syringes are lying around</td> <td>1</td> <td>2</td> </tr> <tr> <td>Sex workers solicit</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	People meet sexual partners	1	2	Drug Injectors can be found	1	2	Syringes are lying around	1	2	Sex workers solicit	1	2
	YES	NO															
People meet sexual partners	1	2															
Drug Injectors can be found	1	2															
Syringes are lying around	1	2															
Sex workers solicit	1	2															

SITE VERIFICATION FORM 2003

Unique Place Number: _____

No.	Questions	Coding Categories															
V1	City	Almaty 1 Karaganda 2 Tashkent 3 Osh 4															
V2	Location of Site	UNIT CODE: _____															
V3	List ID Number	_____															
V4	How many key informants reported this site?	_____															
V5	Name of Place	_____															
V6	Correct Street Address																
V7	Is this site within a 10 minute walk of . . . READ LIST CIRCLE ONE CODE FOR EACH ACTIVITY	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td style="text-align: right;">A busy road</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td style="text-align: right;">Public transportation stop</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td style="text-align: right;">A trucking route</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td style="text-align: right;">metro stop</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </table>		YES	NO	A busy road	1	2	Public transportation stop	1	2	A trucking route	1	2	metro stop	1	2
	YES	NO															
A busy road	1	2															
Public transportation stop	1	2															
A trucking route	1	2															
metro stop	1	2															
V8	TYPE OF SITE: 01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUILDING 15 SCHOOL 16 COLLEGE/PROFESSIONAL SCHOOL 17 UNIVERSITY CAMPUS/TUTORIAL INSTITUTE	*ENTER CODE: _____ 18 RAILWAY STATION 19 LONG DISTANCE BUS STATION 20 AIRPORT 21 TRUCK STOP/STAND 22 TAXI STAND 23 STREET 24 STREET TUNNEL 25 MARKET 26 PARK 27 OTHER (specify): _____															

No.	Questions	Coding Categories
V9	Interviewer Number	_____
V10	Date (DD/MM/YY)	____ / ____ / ____
V11	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
V12	Time of day (24 HOUR CLOCK)	_____ : _____
V13	Number socializing upon interviewer arrival at place	MEN: _____ WOMEN: _____
V14	Number of used syringes observed by interviewer at the site	_____
V15	Gender of respondent	MALE 1 FEMALE 2
<p>Hello. I am working on a study to identify where better health programs are needed in the city. I would like to ask you some questions about this place and the people who come here. The interview should take between 15 and 30 minutes of your time. I won't ask your name or any other identifying information. Your participation is completely voluntary and you may refuse to answer a question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning better health program.</p> <p>This is what we will do with the information you give us. We are asking people these questions at hundreds of places in the city. Your answers will be combined with information about other places like this and will not be reported about this place alone. Your name will not be recorded anywhere and we won't ask any information about you except to make sure you are over 17.</p> <p>The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Zhanara Alikulova at the Center for Study of Public Opinion at tel no. 796484.</p>		
V16	Do you agree to participate?	YES 1 NO 2
V17	How old are you? *CONCLUDE INTERVIEW IF RESPONDENT IS YOUNGER THAN 18.	_____

No.	Questions	Coding Categories																																				
V18	How many years has this place been in operation as a place where people can pass time?	LESS THAN A YEAR 0 1 TO 2 YEARS 1 3 TO 5 YEARS 2 6 TO 10 YEARS 3 MORE THAN TEN YEARS 4 NOT APPLICABLE 9																																				
V19	Which types of activities take place here? READ LIST CIRCLE ONE CODE FOR EACH ACTIVITY	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>Beer Consumed</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Hard Alcohol Consumed</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>TV Or Video Viewing</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Dancing</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Music</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Computer Games/Slot Machines</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Eating food</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Striptease Show</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	Beer Consumed	1	2	8	Hard Alcohol Consumed	1	2	8	TV Or Video Viewing	1	2	8	Dancing	1	2	8	Music	1	2	8	Computer Games/Slot Machines	1	2	8	Eating food	1	2	8	Striptease Show	1	2	8
	YES	NO	DK																																			
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Music	1	2	8																																			
Computer Games/Slot Machines	1	2	8																																			
Eating food	1	2	8																																			
Striptease Show	1	2	8																																			
V20	I have been told that people socialize at places like this and meet sexual partners here. READ LIST	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>Do men meet new female sexual partners here?</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Do women meet new sexual partners here?</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Do men meet male (gay) sexual partners?</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Does someone onsite facilitates partnerships?</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Do staff meet new sexual partners here?</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	Do men meet new female sexual partners here?	1	2	8	Do women meet new sexual partners here?	1	2	8	Do men meet male (gay) sexual partners?	1	2	8	Does someone onsite facilitates partnerships?	1	2	8	Do staff meet new sexual partners here?	1	2	8												
	YES	NO	DK																																			
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Does someone onsite facilitates partnerships?	1	2	8																																			
Do staff meet new sexual partners here?	1	2	8																																			
V21	Do female sex workers solicit customers here?	YES 1 NO 2 DON'T KNOW 8																																				
V22	IF YES, For how many years have female sex workers solicited customers here?	LESS THAN A YEAR 0 1 TO 2 YEARS 1 3 TO 5 YEARS 2 6 TO 10 YEARS 3 MORE THAN TEN YEARS 4 DON'T KNOW 8																																				
READ: Let's talk in more details about people who come here during the busiest times.																																						

No.	Questions	Coding Categories			
V23	<p>Among <u>men</u> who come here during the busiest times how many do you think are:</p> <p>(j) Are Unemployed</p> <p>(k) Are Students</p> <p>(l) Are < Age 18</p> <p>(m) Live within a 10 minute walk of here</p> <p>(n) Live outside this unit</p> <p>(o) Come by car or taxi</p> <p>(p) Come by public transportation</p> <p>(q) Come here at least once a week</p> <p>(r) Drink alcohol here</p> <p>(s) Find a new sexual partner while they are here</p> <p>(t) Appear to be injection drug users</p> <p>(u) Appear to be buying sex (clients)</p> <p>(v) Are homosexual</p>	None	Some	Most	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
V24	<p>Among <u>women</u> who come here during the busiest times how many do you think are:</p> <p>(a) Are Unemployed</p> <p>(b) Are Students</p> <p>(c) Are < Age 18</p> <p>(d) Live within a 10 minute walk of here</p> <p>(e) Live outside this unit</p> <p>(f) Come by car or taxi</p> <p>(g) Come by public transportation</p> <p>(h) Come here at least once a week</p> <p>(i) Drink alcohol here</p> <p>(j) Find a new sexual partner while they are here</p> <p>(k) Appear to be injection drug users</p> <p>(l) Appear to be selling sex</p>	None	Some	Most	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
		0	1	2	
V25	<p>During a typical week in the last two months, what were the busiest time(s) here?</p> <p>PROBE FOR DAYS AND TIMES OF DAY. MORE THAN ONE ANSWER ALLOWED FOR EACH DAY.</p>	6-11am	11am-5pm	5-10pm	10pm-6am
		1	2	3	4
		1	2	3	4
		1	2	3	4
		1	2	3	4
		1	2	3	4
		1	2	3	4
		1	2	3	4

No.	Questions	Coding Categories
<p>V31.2</p> <p>V31.3</p>	<p>If YES, how many different brands of condoms?</p> <p>What brands?</p> <p>Circle all that apply</p>	<p style="text-align: right;">NO 3</p> <p style="text-align: right;">NUMBER OF BRANDS: ____</p> <p>Brands seen:</p> <p style="text-align: right;">Favorite 1</p> <p style="text-align: right;">Durex 2</p> <p style="text-align: right;">Pilotos 3</p> <p style="text-align: right;">Two to Tango 4</p> <p style="text-align: right;">Innotex 5</p> <p style="text-align: right;">Vizit 6</p> <p style="text-align: right;">Lifestyle 7</p> <p style="text-align: right;">Context 8</p> <p style="text-align: right;">Desire 9</p> <p style="text-align: right;">Gold Circle 10</p> <p style="text-align: right;">Indian/No Brand 11</p> <p style="text-align: right;">Other _____ 12</p> <p style="text-align: right;">No condom seen 99</p>
<p>V32</p>	<p>Is it possible for someone to find a condom within 10 minutes of leaving this place at night?</p>	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p> <p style="text-align: right;">DON'T KNOW 8</p>
<p>V33</p>	<p>Would you be willing to sell condoms here?</p>	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p> <p style="text-align: right;">NOT APPLICABLE 9</p>
<p>V34</p>	<p>We also want to know what you think about drug use in this unit. How common is injection drug use in this unit?</p>	<p style="text-align: right;">VERY COMMON 1</p> <p style="text-align: right;">SOMEWHAT COMMON 2</p> <p style="text-align: right;">NOT VERY COMMON 3</p> <p style="text-align: right;">DOES NOT OCCUR IN THIS AREA 4</p>
<p>V35</p>	<p>Have you seen used syringes lying around inside or outside this place in the past 3 months?</p>	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p>
<p>V36</p>	<p>Is this a place where drug injectors can be found?</p>	<p style="text-align: right;">YES 1</p> <p style="text-align: right;">NO 2</p>

No.	Questions	Coding Categories
V37	IF YES, For how many years has this been a place where drug injectors can be found?	<p style="text-align: right;">LESS THAN A YEAR 0</p> <p style="text-align: right;">1 TO 2 YEARS 1</p> <p style="text-align: right;">3 TO 5 YEARS 2</p> <p style="text-align: right;">6 TO 10 YEARS 3</p> <p style="text-align: right;">MORE THAN TEN YEARS 4</p> <p style="text-align: right;">DON'T KNOW 8</p>
V38	<u>Observation</u> : Evidence of AIDS educational activities noted by interviewer at the site	<p style="text-align: center;">NUMBER OF AIDS POSTERS DISPLAYED _____</p> <p style="text-align: center;">NUMBER OF AIDS BROCHURES AT SITE _____</p> <p style="text-align: center;">NUMBER OF CONDOMS VISIBLE _____</p>

**SITE VERIFICATION REFUSAL FORM
2003**

Unique Place Number: _____

No.	Questions	Coding Categories
B1	City	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
B2	Location of Site	UNIT CODE: ____
B3	List ID Number	_____
B4	How many key informants reported this site?	_____
B5	Name of Place	_____
B6	Correct Street Address	_____
B7	Outcome of place verification	PLACE NOT FOUND / INCORRECT ADDRESS 1 PLACE FOUND BUT NOT WILLING RESPONDENT 2 PLACE CLOSED TEMPORARILY 3 PLACE CLOSED PERMANENTLY / NO LONGER A PLACE 4 PLACE ALREADY NAMED / DUPLICATE 5
B8	TYPE OF SITE: 01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUILDING 15 SCHOOL	*ENTER CODE: ____ 16 COLLEGE/PROFESSIONAL SCHOOL 17 UNIVERSITY CAMPUS/TUTORIAL INSTITUTE 18 RAILWAY STATION 19 LONG DISTANCE BUS STATION 20 AIRPORT 21 TRUCK STOP/STAND 22 TAXI STAND 23 STREET 24 STREET TUNNEL 25 MARKET 26 PARK 27 OTHER (specify): _____
B9	Interviewer Number	_____
B10	Date (DD/MM/YY)	____/____/____

**QUESTIONS FOR RESPONSIBLE PERSON AT SITE
2003**

No.	Questions	Coding Categories
D1 THROUGH D5 ARE TO BE COMPLETED BY FIELD COORDINATOR BEFORE THIS FORM IS GIVEN TO THE INTERVIEWER.		
D1	Name of HTA	ALMATY 1 KARAGANDA 2 TASHKENT 3 OSH 4
D2	Site Number	_____
D3	Date (DD/MM/YYYY)	___/___/___
D4	Site Name	
D5	Correct Address	
D6	<p>We would like to give the name and address of this site to groups <SPECIFY ORGANIZATIONS AND GROUPS> that plan AIDS prevention programs in this community.</p> <p>Do you have the authority to approve giving the name and address of this site to groups so that they can include this site in their AIDS prevention program planning?</p> <p>IF THE PERSON DOES NOT HAVE THE AUTHORITY, CONCLUDE INTERVIEW AND TRY TO IDENTIFY SOMEONE WHO HAS THE AUTHORITY.</p>	YES, I HAVE AUTHORITY 1 COULD NOT FIND A PERSON WITH AUTHORITY TO INTERVIEW 2
ASK THE FOLLOWING QUESTIONS TO SOMEONE WITH AUTHORITY.		
D7	Would you be willing to have a person from a local AIDS prevention program talk with you about including this site in a new AIDS prevention program in this area?	YES, WILLING 1 NO 2
D8	Could someone from an organization that distributes condoms contact you about possibly having condoms available at this site?	YES, CONDOMS 1 NO 2
D9	May we give your name to these groups as a contact person? IF YES:NAME:_____	YES, NAME 1 NO 2

**QUESTIONNAIRE FOR INDIVIDUALS SOCIALIZING AT SITES
2003**

No.	Questions	Coding categories
Q1	Name of City	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
Q2	Interviewer Gender and Number	MALE 1 FEMALE 2 INTERVIEWER ID NUMBER: ____
Q3	Individual Interview Consecutive Number at site	____
Q4	Name of site and Unique Identification Number	_____ UNIQUE ID NUMBER: ____
Q4.1	Location of Site	Primary Sampling Unit: ____
Q5	Date (DD/MM/YY)	____ / ____ / ____
Q6	Time of day (24 hour clock) NOTE: Fill in at the start of each interview	____ : ____
Q7	Number socializing at place before interview NOTE: Fill in at the start of each interview	MEN: ____ WOMEN: ____
Q8	Gender of respondent	MALE 1 FEMALE 2
Q9	Interviewer opinion if respondent is IDU and/or CSW	IDU ONLY 1 CSW ONLY 2 BOTH IDU AND CSW 3 NEITHER 4

No.	Questions	Coding categories
<p>Hello. I am working on a study to identify where better health programs are needed in the city. I would like to ask you some questions about your behavior, including sexual behavior and other risky behaviors. The interview should take between 20 and 30 minutes of your time and you will not be contacted in the future. I won't ask your name or any other identifying information. Your answers will be kept confidential. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning better health programs.</p> <p>This is what we will do with the information you give us. Your answers will be recorded on a paper that only identifies you with a number. Your name or specific address will not be recorded anywhere. We are asking hundreds of people these questions at places in the city.</p> <p>The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Zhanara Alikulova at the Center for Study of Public Opinion at 796484.</p>		
Q10	<p>Do you agree to participate?</p> <p>*IF NO, STOP INTERVIEW</p>	<p>YES 1</p> <p>NO 2</p>
Q11	<p>How old are you?</p> <p>*STOP INTERVIEW IF YOUNGER THAN 18</p>	<p>___ ___</p>
Q12	<p>Do you live in Almaty?</p> <p>12.1 IF YES :</p> <ul style="list-style-type: none"> • What microrayon do you live in? <p>12.2 IF OUTSIDE Almaty:</p> <ul style="list-style-type: none"> • Where? <p>12.3</p> <ul style="list-style-type: none"> • How far away do you live from this place (place of interview)? 	<p>YES 1</p> <p>NO 2</p> <p><u>12.1</u></p> <p>MICRORAYON _____</p> <p>CODE OF UNIT: _____</p> <p><u>12.2</u></p> <p>ALMATY OBLAST 1</p> <p>OTHER OBLASTS OF KAZAKHSTAN 2</p> <p>LIVES ELSEWHERE IN CENTRAL ASIA 3</p> <p>LIVES OUTSIDE OF CENTRAL ASIA 4</p> <p>Distance:</p> <p>10 minute walk or less 1</p> <p>Further than 10 minute walk 2</p>

No.	Questions	Coding categories
Q13	How long have you lived in here / there?	LESS THAN ONE YEAR 0 NUMBER OF YEARS ____ ALL MY LIFE 97
Q14	How many nights in the past three months have you slept outside Almaty?	NUMBER OF NIGHTS: ____
Q15	How often do you come to this place? CIRCLE ONLY ONE RESPONSE.	EVERYDAY 1 4-6 TIMES PER WEEK 2 2-3 TIMES PER WEEK 3 ONE TIME PER WEEK 4 2-3 TIMES PER MONTH 5 ONE TIME PER MONTH 6 LESS THAN ONCE A MONTH 7 THIS IS MY FIRST VISIT 8
Q16	In the past seven days and nights, including today, how many days did you come here?	Enter Number From 1-7: ____
Q17	When did you come to this place the first time?	THIS IS MY FIRST VISIT 1 WITHIN PAST 4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5
Q18	How did you come to this site today?	Walked 1 By Car 2 By Public Transportation 3
Q19	Some people meet new sexual partners at places like this. Do you believe that people meet new sexual partners here? That is, people they have never had sex with before.	YES 1 NO 2
Q20	Why did you come to this site today? READ OPTIONS	YES NO TO DRINK ALCOHOL? 1 2 TO MEET A SEXUAL PARTNER? 1 2 TO SOCIALIZE WITH FRIENDS? 1 2
Q21	Have you ever met a new sexual partner here?	YES 1 NO 2

No.	Questions	Coding categories
Q22	When did you last meet a new sexual partner here?	WITHIN 24 HOURS 1 WITHIN PAST 7 DAYS 2 WITHIN PAST 2-4 WEEKS 3 WITHIN PAST 2-3 MONTHS 4 WITHIN PAST 4-6 MONTHS 5 WITHIN PAST 7-12 MONTHS 6 OVER A YEAR AGO 7
Q23	The last time you had sex with this <u>new</u> partner from this place, did you use a condom?	YES 1 NO 2 DON'T REMEMBER 3
Q24	Now I want to ask you about the people you had sex with in the past 4 weeks. How many different people have you had sex with in the <u>past 4 weeks</u> ?	4 WEEK TOTAL ____
Q25	How many of these people were <u>new</u> sexual partners for you in the <u>past 4 weeks</u> ?	4 WEEK NEW ____
Q26	The last time you had sex with one of these <u>new</u> partners, did you use a condom or not?	YES 1 NO 2 NO NEW PARTNERS IN PAST 4 WEEKS 9
Q27	If NO, why did you not use a condom with your last new partner? DO NOT READ CHOICES. CIRCLE ALL THAT APPLY.	Partner protested 1 do not like condoms 2 I trust my partner 3 I am afraid my partner suspects me 4 Another contraceptive 5 Condoms are too expensive 6 Did not have them at hand 7 Condoms do not protect against STDs /AIDS 8 Low quality condoms / condoms break 9 Other _____ 10
Q28	In the past <u>four</u> weeks, how often did you use condoms with new sexual partners?	Always 1 Sometimes 2 Never 3 No new partners in past 4 weeks 9

No.	Questions	Coding categories
Q29	About how many new sexual partners have you had in the past 12 months?	NONE- NO NEW SEXUAL PARTNERS 0 NUMBER ____ _
Q30	Do you have any regular long-term sexual partner or partners? That is, someone with whom you have been having sex at least monthly for a year or more. This could be a spouse or lover or someone else.	YES, HAVE ONE OR MORE REGULAR 1 NO REGULAR 2
Q31	The last time you had sex with a regular partner, did you use a condom or not?	YES 1 NO 2
Q32	Have you ever had a condom break in the past 12 months?	Yes 1 No 2 I don't use condoms 3 No partners in the past 12 months 4
Q33	In total, including new sexual partners, regular partners, and any other partners, how many sexual partners have you had in the past 12 months?	NUMBER: ____ _
Q34	Of these people you had sex with in the past 12 months, what is the age of the youngest and oldest person you had sex with in the past 12 months? IF ONLY ONE PARTNER, MARK SAME AGE IN OLDEST AND YOUNGEST. ESTIMATE AGE IF NECESSARY. CODE 97 IF NO PARTNERS IN PAST 12 MONTHS.	YOUNGEST: ____ _ OLDEST: ____ _
Q35	When was the last time you used a condom?	WITHIN THE PAST 24 HOURS 1 WITHIN THE PAST WEEK 2 WITHIN PAST 4 WEEKS 3 WITHIN PAST 2-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5 OVER A YEAR AGO 6 NEVER USED A CONDOM 7

No.	Questions	Coding categories
Q36	Where did you get the last condom you used?	SHOP 1 PHARMACY 2 KIOSK 3 PARTNER HAD CONDOM 4 FROM A FRIEND 5 RECEIVED FREE OF CHARGE 6 BAR/NIGHTCLUB/RESTAURANT/HOTEL 7 OTHER 8
Q37	What brand of the last condom you used?	Favorite 1 Context 8 Durex 2 Desire 9 Pilotos 3 Gold Circle 10 Two to Tango 4 Indian/No Brand 11 Innotex 5 Other_____ 12 Vizit 6 Don't Remember / Don't Lifestyle 7 Know 13
Q38	Do you have a condom with you? *IF YES, May I see it?	CONDOM WITH ME BUT YOU CAN'T SEE 1 YES AND CONDOM SEEN 2 NO CONDOM WITH ME 3
Q38.1	IF CONDOM SEEN, BRAND: Can circle more than one brand, if multiple brands seen.	Favorite 1 Durex 2 Pilotos 3 Two to Tango 4 Innotex 5 Vizit 6 Lifestyle 7 Context 8 Desire 9 Gold Circle 10 Indian / No Brand 11 Other_____ 12
Q39	In your opinion, what do you think is a reasonable price (in Tenge) for a condom?	_____ Tenge

No.	Questions	Coding categories
Q40	Have you heard or seen any information about HIV/AIDS in the last 12 months?	YES 1 NO 2
Q40.1	If YES, From what source did you receive this information about the HIV/AIDS virus? READ OPTIONS.	YES NO TV 1 2 Radio 1 2 Newspapers/Magazines 1 2 Leaflets/Posters 1 2 Friend or relative 1 2 Doctor/health worker 1 2 In education places (school) 1 2 Outreach Worker 1 2 Other _____ 1 _____ 2
Q41	Are you currently employed?	YES, FULLTIME 1 YES, OCCASIONAL / PARTTIME WORK 2 NO, NOT LOOKING FOR WORK 3 NO, LOOKING FOR WORK 4
Q42	Do you currently study?	YES 1 NO 2
Q43	Are you married or living in union with someone?	YES 1 NO 2
Q44	How many years of education did you receive?	ELEMENTARY (UP TO 7 FORMS) OR NONE 1 INCOMPLETE HIGH (8-9 FORMS) 2 PUBLIC HIGH 3 SPECIAL HIGH (TECHNICAL, PEDAGOGICAL, MEDICAL, ETC.) 4 INCOMPLETE HIGHER 5 HIGHER 6
Q45	We also want to know what you think about drug use in this area. In your opinion, how common is injection drug use in this area? 'AREA' REFERS TO THE UNIT WHERE INTERVIEW CONDUCTED.	VERY COMMON 1 SOMEWHAT COMMON 2 NOT VERY COMMON 3 DOES NOT OCCUR IN THIS AREA 4 DON'T KNOW 5

No.	Questions	Coding categories
Q46	In your opinion, do people who inject drugs socialize here at this place?	YES 1 NO 2 DON'T KNOW 3
Q47	Have you heard of any place in Almaty where people who inject drugs can exchange used syringes for new?	YES 1 NO 2
Q48	Now we would like to ask you some questions about your own experience with injecting drugs. Your answers are completely confidential. Have you ever injected drugs?	YES 1 NEVER INJECTED DRUGS 2 REFUSED TO ANSWER 3
IF EVER INJECTED DRUGS CONTINUE. IF NEVER INJECTED DRUGS, GO TO Q60.		
Q49	IF YES, When did you last inject drugs? IF NO, CIRCLE CODE 9. IF CODE 5 or higher (OVER 6 MONTHS AGO) SKIP to Q60	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2 WITHIN PAST 2-3 MONTHS 3 WITHIN PAST 4-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5 OVER A YEAR AGO 6
Q50	With whom do you usually inject drugs? READ OPTIONS	Individually 1 Usually with the same group 2 With different groups 3 Depends on circumstances 4
Q51	Which drug do you inject most often?	RAW OPIUM (HANKA) 1 HEROIN 2 OTHER_____ 3
Q52	Where did you get the syringe you used the last time you injected drugs?	PHARMACY 1 PURCHASED SOMEWHERE ELSE 2 TRUST POINT 3 FRIEND 4 OTHER 5 DON'T KNOW/REMEMBER 6
Q53	Did you share a syringe the last time you injected drugs?	YES 1 NO 2 DON'T KNOW/REMEMBER 3

No.	Questions	Coding categories																				
Q54	During the last 4 weeks, did you..... READ EACH QUESTION	<table style="width:100%; border:none;"> <tr> <td></td> <td style="text-align:right">YES</td> <td style="text-align:right">NO</td> <td style="text-align:right">DK</td> </tr> <tr> <td style="text-align:right">Share a syringe with other IDU</td> <td style="text-align:right">1</td> <td style="text-align:right">2</td> <td style="text-align:right">8</td> </tr> <tr> <td style="text-align:right">Take drugs from common reservoir</td> <td style="text-align:right">1</td> <td style="text-align:right">2</td> <td style="text-align:right">8</td> </tr> <tr> <td style="text-align:right">Use ready made drug solution without boiling</td> <td style="text-align:right">1</td> <td style="text-align:right">2</td> <td style="text-align:right">8</td> </tr> <tr> <td style="text-align:right">Exchange used for new syringe</td> <td style="text-align:right">1</td> <td style="text-align:right">2</td> <td style="text-align:right">8</td> </tr> </table>		YES	NO	DK	Share a syringe with other IDU	1	2	8	Take drugs from common reservoir	1	2	8	Use ready made drug solution without boiling	1	2	8	Exchange used for new syringe	1	2	8
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Q55	How many times did you inject drugs yesterday? How many different syringes did you use yesterday?	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">_____</td> </tr> <tr> <td style="text-align:right">_____</td> </tr> </table>	_____	_____																		

Q56	In the past four weeks, with about how many different people did you share a syringe? Of those, how many were people you shared a syringe with for the first time?	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">TOTAL: _____</td> </tr> <tr> <td style="text-align:right">NEW: _____</td> </tr> </table>	TOTAL: _____	NEW: _____																		
TOTAL: _____																						
NEW: _____																						
Q57	Can you get new syringes whenever you want?	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">ALWAYS</td> <td style="text-align:right">1</td> </tr> <tr> <td style="text-align:right">SOMETIMES</td> <td style="text-align:right">2</td> </tr> <tr> <td style="text-align:right">NEVER</td> <td style="text-align:right">3</td> </tr> </table>	ALWAYS	1	SOMETIMES	2	NEVER	3														
ALWAYS	1																					
SOMETIMES	2																					
NEVER	3																					
Q58	IF 'SOMETIMES' or 'NEVER', why not always? DO NOT PROMPT RESPONDENT.	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">NO MONEY</td> <td style="text-align:right">1</td> </tr> <tr> <td style="text-align:right">EXCHANGE STATION TOO FAR AWAY</td> <td style="text-align:right">2</td> </tr> <tr> <td style="text-align:right">KIOSK OR DRUG STORE TOO FAR AWAY</td> <td style="text-align:right">3</td> </tr> <tr> <td style="text-align:right">POLICE MENACE</td> <td style="text-align:right">4</td> </tr> <tr> <td style="text-align:right">I DON'T THINK IT IS NECESSARY TO GET NEW SYRINGES</td> <td style="text-align:right">5</td> </tr> <tr> <td style="text-align:right">OTHER _____</td> <td style="text-align:right">6</td> </tr> </table>	NO MONEY	1	EXCHANGE STATION TOO FAR AWAY	2	KIOSK OR DRUG STORE TOO FAR AWAY	3	POLICE MENACE	4	I DON'T THINK IT IS NECESSARY TO GET NEW SYRINGES	5	OTHER _____	6								
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POLICE MENACE	4																					
I DON'T THINK IT IS NECESSARY TO GET NEW SYRINGES	5																					
OTHER _____	6																					
Q59	How long have you been injecting drugs? IF LESS THAN A YEAR, NUMBER OF MONTHS	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">NUMBER OF YEARS</td> <td style="text-align:right">_____</td> </tr> <tr> <td style="text-align:right">NUMBER OF MONTHS</td> <td style="text-align:right">_____</td> </tr> </table>	NUMBER OF YEARS	_____	NUMBER OF MONTHS	_____																
NUMBER OF YEARS	_____																					
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ASK OF ALL RESPONDENTS, REGARDLESS OF REPORTED DRUG USE.																						
Q60	Have you ever been detained by the police for injecting drugs?	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">YES</td> <td style="text-align:right">1</td> </tr> <tr> <td style="text-align:right">NO</td> <td style="text-align:right">2</td> </tr> </table>	YES	1	NO	2																
YES	1																					
NO	2																					
Q61	IF YES, Do you think your detainment was registered with the police?	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">YES</td> <td style="text-align:right">1</td> </tr> <tr> <td style="text-align:right">NO</td> <td style="text-align:right">2</td> </tr> </table>	YES	1	NO	2																
YES	1																					
NO	2																					
Q62	Do you think you are currently registered with the police as a drug user? IF YES, When do you think you were registered as a drug user?	<table style="width:100%; border:none;"> <tr> <td style="text-align:right">YES</td> <td style="text-align:right">1</td> </tr> <tr> <td style="text-align:right">NO</td> <td style="text-align:right">2</td> </tr> <tr> <td style="text-align:right">MONTH _____</td> <td style="text-align:right">YEAR _____</td> </tr> </table>	YES	1	NO	2	MONTH _____	YEAR _____														
YES	1																					
NO	2																					
MONTH _____	YEAR _____																					

No.	Questions	Coding categories																												
Q63	Have you ever gone to a narcologist or a narcologist dispensary for injecting drugs?	YES 1 NO 2																												
Q64	IF YES, Have you ever been registered with a narcology dispensary as a drug user?	YES 1 NO 2																												
Q65	IF YES, Do you think you are currently registered with the narcologist dispensary as a drug user? IF YES, when were you registered?	YES 1 NO 2 MONTH _____ YEAR _____																												
Q66	Do you think that HIV/AIDS is a problem in Almaty?	SERIOUS PROBLEM 1 SOMEWHAT OF A PROBLEM 2 NOT A PROBLEM AT ALL 3 DON'T KNOW 4																												
AIDS is a growing health problem in Almaty. It is important that we find out how knowledgeable people are about how the virus that causes is transmitted. I would like to ask you your opinion about how the virus that causes AIDS is transmitted.																														
Q67	Is it possible to become infected with HIV/AIDS through..... READ EACH QUESTION	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>Sexual contact without condom</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Injecting drugs with shared syringe</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Eating from common dish</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Swimming in common pool</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Insect bite</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>Handshake</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	Sexual contact without condom	1	2	8	Injecting drugs with shared syringe	1	2	8	Eating from common dish	1	2	8	Swimming in common pool	1	2	8	Insect bite	1	2	8	Handshake	1	2	8
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Handshake	1	2	8																											
Q68	What ways can people avoid or reduce their chances of getting infected with HIV? Any other ways? DO <u>NOT</u> READ OUT THE ANSWERS. CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.	USE CONDOMS 1 HAVE FEWER PARTNERS 2 BOTH PARTNERS HAVE NO OTHER PARTNERS 3 NO CASUAL SEX 4 NO SEX AT ALL 5 NO COMMERCIAL SEX 6 AVOID SHARING NEEDLES 7 AVOID BLOOD TRANSFUSIONS 8 OTHER (SPECIFY) _____ 9 DON'T KNOW ANY 10																												
Q69	In your opinion, how effective are condoms in preventing STIs including HIV?	Very effective 1 Somewhat effective 2 Not very effective 3 No effective at all 4 Don't know 5																												

No.	Questions	Coding categories
Q70	In your opinion, how likely do you think you are of contracting the HIV/AIDS virus?	Very likely 1 Somewhat likely 2 Not very likely 3 No risk 4 Don't know 5
Q71	Can a person who looks healthy be infected with the AIDS virus?	YES 1 NO 2 DON'T KNOW 3
Q72	Where in Almaty can a person have blood drawn from a vein an HIV test?	Center of AIDS 1 Venerological/Dermatological Dispensary 2 Clinic / Hospital 3 Don't Know 4 Other _____ 5
Q73	How many times have you had blood drawn from your vein for an HIV test in the last 12 months?	NUMBER OF TIMES TESTED ____ ____ Not tested in last 12 months 0
Q74	The last time you were tested for HIV, was it voluntary or obligatory? That is, was it your choice to be tested or were you obliged to be tested.	VOLUNTARY 1 OBLIGATORY 2
Q75	Last time you were tested for HIV, did you receive explanation about ways of transmission and other information about HIV (counseling)?	YES 1 NO 2
Q76	Would you be interested in getting an HIV test voluntarily if it will be anonymous?	YES 1 NO 2
Q77	Have you ever heard of diseases or infections that can be transmitted through sexual intercourse (STDs)?	YES 1 NO 2

No.	Questions	Coding categories
Q78	<p>If YES: What signs and symptoms would lead you to think that someone has such a disease or infection?</p> <p>Any others?</p> <p>(CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE. DO NOT READ OUT THE SYMPTOMS.)</p>	<p>LOWER ABDOMINAL PAIN 1</p> <p>DISCHARGE FROM VAGINA (WOMAN) /PENIS (MAN) 2</p> <p>ITCHING IN GENITAL AREA 3</p> <p>BURNING PAIN ON URINATION 4</p> <p>PAIN DURING INTERCOURSE 5</p> <p>GENITAL ULCERS/OPEN SORES 6</p> <p>INFLAMMATION IN GENITAL AREA 7</p> <p>BLOOD IN URINE 8</p> <p>FAILURE TO PASS URINE 9</p> <p>LOSS OF WEIGHT 10</p> <p>INABILITY TO CONCEIVE (WOMAN) / IMPOTENCE (MAN) 11</p> <p>NO SYMPTOMS 12</p> <p>DON'T KNOW 13</p> <p>REFUSED 14</p> <p>OTHER (SPECIFY)_____15</p>
ASK WOMEN ONLY:		
Q79	Have you received money in exchange for sex in the past 3 months?	<p>YES 1</p> <p>NO 2</p> <p>Respondent is male 9</p>
Q80	IF YES, How many different places have you gone to look for clients in the last 4 weeks?	_____
Q81	<p>IF YES, Where in the city do you usually go to look for clients?</p> <p>CAN RECORD UP TO 3 DISTRICT CODES.</p>	<p>Code of Units:</p> <p>_____</p> <p>_____</p> <p>_____</p>
Q82	Last time you received money in exchange for sex, did you use a condom?	<p>YES 1</p> <p>NO 2</p>
Q83	If YES, who suggested using a condom?	<p>Myself 1</p> <p>My partner 2</p> <p>My partner and I 3</p> <p>Do not remember 4</p>

No.	Questions	Coding categories															
Q84	If NO, why did you not use a condom?	Partner protested 1 I do not like condoms 2 I trust my partner 3 I am afraid my partner suspects me 4 Another contraceptive 5 Condoms are too expensive 6 Did not have them at hand 7 Condoms do not protect against STDs/AIDS 8 Low quality condoms / condoms break 9 Other _____ 10															
Q85	In the past 4 weeks, have you had any symptoms....	<table border="1"> <thead> <tr> <th><u>SYMPTOMS</u></th> <th><u>YES</u></th> <th><u>NO</u></th> </tr> </thead> <tbody> <tr> <td>Lower abdominal pain (not dependent on menstruation)?</td> <td>1</td> <td>2</td> </tr> <tr> <td>Unusual discharge?</td> <td>1</td> <td>2</td> </tr> <tr> <td>Sores?</td> <td>1</td> <td>2</td> </tr> </tbody> </table>	<u>SYMPTOMS</u>	<u>YES</u>	<u>NO</u>	Lower abdominal pain (not dependent on menstruation)?	1	2	Unusual discharge?	1	2	Sores?	1	2			
<u>SYMPTOMS</u>	<u>YES</u>	<u>NO</u>															
Lower abdominal pain (not dependent on menstruation)?	1	2															
Unusual discharge?	1	2															
Sores?	1	2															
Q86	IF ANY SYMPTOMS: Did you receive treatment for these symptoms in the past 4 weeks from. . .	<table border="1"> <thead> <tr> <th></th> <th><u>YES</u></th> <th><u>NO</u></th> </tr> </thead> <tbody> <tr> <td>SELF TREATMENT?</td> <td>1</td> <td>2</td> </tr> <tr> <td>PRIVATE PHYSICIAN OR CLINIC?</td> <td>1</td> <td>2</td> </tr> <tr> <td>PUBLIC CLINIC OR HOSPITAL?</td> <td>1</td> <td>2</td> </tr> <tr> <td>DID NOT RECEIVE TREATMENT?</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		<u>YES</u>	<u>NO</u>	SELF TREATMENT?	1	2	PRIVATE PHYSICIAN OR CLINIC?	1	2	PUBLIC CLINIC OR HOSPITAL?	1	2	DID NOT RECEIVE TREATMENT?	1	2
	<u>YES</u>	<u>NO</u>															
SELF TREATMENT?	1	2															
PRIVATE PHYSICIAN OR CLINIC?	1	2															
PUBLIC CLINIC OR HOSPITAL?	1	2															
DID NOT RECEIVE TREATMENT?	1	2															
ASK MEN ONLY:																	
Q87	Have you given money or other gifts to anyone in exchange for sexual service in the past 3 months?	YES 1 NO 2 DON'T REMEMBER 3 Respondent Women 9															
Q88	Have you had sex with a man in the past 4 weeks?	YES 1 NO 2 DON'T REMEMBER 3															
Q89	In the past 4 weeks, have you had.....	<table border="1"> <thead> <tr> <th><u>SYMPTOMS</u></th> <th><u>YES</u></th> <th><u>NO</u></th> </tr> </thead> <tbody> <tr> <td>Pain on urination?</td> <td>1</td> <td>2</td> </tr> <tr> <td>Unusual discharge?</td> <td>1</td> <td>2</td> </tr> <tr> <td>Sores?</td> <td>1</td> <td>2</td> </tr> </tbody> </table>	<u>SYMPTOMS</u>	<u>YES</u>	<u>NO</u>	Pain on urination?	1	2	Unusual discharge?	1	2	Sores?	1	2			
<u>SYMPTOMS</u>	<u>YES</u>	<u>NO</u>															
Pain on urination?	1	2															
Unusual discharge?	1	2															
Sores?	1	2															
Q90	IF ANY SYMPTOMS: Did you receive treatment for these symptoms in the past 4 weeks from. . .	<table border="1"> <thead> <tr> <th></th> <th><u>YES</u></th> <th><u>NO</u></th> </tr> </thead> <tbody> <tr> <td>SELF TREATMENT?</td> <td>1</td> <td>2</td> </tr> <tr> <td>PRIVATE PHYSICIAN OR CLINIC?</td> <td>1</td> <td>2</td> </tr> <tr> <td>PUBLIC CLINIC OR HOSPITAL?</td> <td>1</td> <td>2</td> </tr> <tr> <td>DID NOT RECEIVE TREATMENT?</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		<u>YES</u>	<u>NO</u>	SELF TREATMENT?	1	2	PRIVATE PHYSICIAN OR CLINIC?	1	2	PUBLIC CLINIC OR HOSPITAL?	1	2	DID NOT RECEIVE TREATMENT?	1	2
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PUBLIC CLINIC OR HOSPITAL?	1	2															
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**АНКЕТА КЛЮЧЕВОГО ИНФОРМАНТА
2003 г**

№	Вопросы	Категории кодирования
K1	Город	Алматы 1 Караганды 2 Ташкент 3 Ош 4
K2	Место проведения интервью	Участок в городе ____ ____ ____
K3	Номер интервьюера /Номер ключевого информанта	____ ____ / ____ ____ ____
K4	Дата (день, месяц, год)	____ ____ / ____ ____ / ____ ____
K5	Пол ключевого информанта	МУЖСКОЙ 1 ЖЕНСКИЙ 2
K6	Тип ключевого информанта:	ВВЕДИТЕ КОД: ____ ____
	ВОДИТЕЛЬ ТАКСИ 1	
	ВОДИТЕЛЬ ОБЩЕСТВЕННОГО ТРАНСПОРТА 2	БАРМЕН/ОФИЦИАНТ 16
	ДАЛЬНОБОЙЩИК 3	РАБОТНИК ГОСТИНИЦЫ 17
	РАБОТНИК (-ЦА) КОММЕРЧЕСКОГО СЕКСА (РКС) 4	РАБОТНИК БАНИ/САУНЫ 18
	КЛИЕНТ РКС 5	БОМЖ 19
	СУТЕНЕР 6	БЕЗРАБОТНЫЙ 20
	ПОТРЕБИТЕЛЬ ИНЪЕКЦИОННЫХ НАРКОТИКОВ 7	ИНОГОРОДНИЙ (-ЯЯ) 21
	РАБОТНИК НПО / ОБЩЕСТВЕННОЙ ОРГАНИЗАЦИИ 8	ДВОРНИК 22
	РАБОТНИК СПИД ЦЕНТРА, НАРКОДИСПАНСЕРА, КОЖНО-ВЕНЕРОЛОГИЧЕСКОГО ДИСПАНСЕРА 9	УБОРЩИК (-ЦА) ПОДЪЕЗДОВ 23
	РАБОТНИК СКОРОЙ ПОМОЩИ 10	РАБОТНИК КСК 24
	МИЛИЦИОНЕР / ПОЛИЦЕЙСКИЙ 11	МОЛОДЕЖЬ 25
	РАБОТНИК ЗДРАВООХРАНЕНИЯ / АПТЕК 12	ЖИТЕЛЬ ОБЩЕЖИТИЯ 26
	ПРОДАВЕЦ ЛАРЬКА / МАГАЗИНА 13	ЖИТЕЛЬ РАЙОНА 27
	ТОРГОВЕЦ / РАБОТНИК НА БАЗАРЕ 14	
	УЛИЧНЫЙ ТОРГОВЕЦ 15	ДРУГОЕ _____ 50

№	Вопросы	Категории кодирования
	<p>Здравствуйте. Я представляю Центр Изучения Общественного Мнения в Алматы и принимаю участие в исследовании по поиску мест, где требуется осуществлять программы здравоохранения. Целью нашего исследования является определение мест, где люди могут найти новых сексуальных партнеров, а также мест, где можно встретить потребителей инъекционных наркотиков. СПИД может стать большой проблемой, если люди не будут знать, как уменьшить риск инфицирования. Я хотел (а) бы задать Вам несколько вопросов. Пожалуйста, назовите и укажите адреса мест, где люди встречают новых половых партнеров, и где мы можем найти потребителей инъекционных наркотиков для осуществления программ по профилактике СПИДа. Нам не нужна информация о частных жилищах. Мы интересуемся только общественно доступными местами. После того, как Вы назовете эти места, мы посетим их и узнаем о возможности осуществления профилактических программ. На ответы Вы потратите от 5 до 15 минут. Мы не будем спрашивать Вашего имени. Мы не будем Вас беспокоить в будущем. Ваши ответы никоим образом на Вас не отразятся. Ваше участие полностью добровольно. Вы можете отказаться отвечать на отдельные вопросы и от интервью в целом. Некоторые вопросы могут Вас смутить. Возможно, Вы не получите прямую выгоду от исследования, но через несколько месяцев в Алматы начнется новая программа в сфере здравоохранения.</p> <p>Если у Вас возникли какие-либо вопросы, Вы сможете связаться с Жанар Аликуловой по тел. 796484 в Алматы, ответственной за проведение исследования,.</p>	
К7	<p>Вы согласны отвечать на вопросы? *ЕСЛИ НЕТ, ПРЕКРАТИТЕ ИНТЕРВЬЮ.</p>	<p>ДА 1 НЕТ 2</p>
К8	<p>Сколько Вам лет? *ЗАВЕРШИТЕ ИНТЕРВЬЮ, ЕСЛИ РЕСПОНДЕНТ МЛАДШЕ 18 ЛЕТ</p>	<p>Точный возраст _____</p>
К9	<p>Мы бы хотели узнать места, посещаемые людьми с целью знакомства с новыми половыми партнерами. Это поможет в планировании программ по профилактике СПИДа и увеличении доступности презервативов. Конкретно, мы бы хотели знать:</p> <ul style="list-style-type: none"> • В каких местах проводит время молодежь, где молодые люди могут познакомиться с новыми половыми партнерами? • В каких местах можно встретить женщин или мужчин, предлагающих сексуальные услуги за вознаграждение? • В какие места ходят одинокие мужчины, приезжие, сезонные рабочие для поиска новых половых партнеров? • В каких местах люди встречают новых половых партнеров <u>в Вашем районе и вне этого района</u>? В какие места <u>Вашего района</u> могут прийти люди из других районов для поиска новых половых партнеров. <p>К9А. Знаете ли Вы такие места? Да ----- 1 Нет ----- 2</p> <p>К9Б. ЕСЛИ Да, то назовите такие места (А) в 10 минутах ходьбы отсюда, (Б) более 10 минут ходьбы отсюда.</p> <p>ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.</p>	
К10	<p>Что Вы думаете о проблеме наркотиков в Вашем районе? Имеет ли место употребление инъекционных наркотиков в этом районе?</p>	<p>ДА 1 НЕТ 2</p>

№	Вопросы	Категории кодирования
K11	За последние 4 недели видели ли Вы выброшенные использованные шприцы в Вашем районе?	ДА 1 НЕТ 2
K12	В каких местах поблизости отсюда можно найти использованные шприцы? ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.	
K13	В каких местах поблизости отсюда можно встретить потребителей инъекционных наркотиков? ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.	
K14	Поблизости отсюда знакомятся ли со своими клиентами женщины, оказывающие сексуальные услуги?	ДА 1 НЕТ 2
K15	В каких местах можно найти женщин, оказывающих сексуальные услуги? ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА	
K16	Количество мест, указанных ключевым информантом в 10 минутах ходьбы отсюда Количество мест, указанных ключевым информантом более 10 минут ходьбы отсюда	____ _ ____ _

ПРЕДВАРИТЕЛЬНЫЙ СПИСОК СООБЩЕННЫХ МЕСТ. ИСПОЛЬЗУЯ ЭТОТ СПИСОК, СПРОСИТЕ РЕСПОНДЕНТА

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где больше людей встречают новых половых партнеров?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше потребителей инъекционных наркотиков или использованные шприцы?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше женщины, оказывающих сексуальные услуги?

ПОСЛЕ ТОГО, КАК ВЫ ОПРЕДЕЛИЛИ МЕСТА, ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО МЕСТА, УАЗАННОГО В СПИСКЕ

	В 10 минутах ходьбы отсюда	Более 10 минут ходьбы отсюда
1. _____	1	2
2. _____	1	2
3. _____	1	2
4. _____	1	2
5. _____	1	2
6. _____	1	2
7. _____	1	2
8. _____	1	2
9. _____	1	2
10. _____	1	2

**БЛАНК ОТКАЗА КЛЮЧЕВОГО ИНФОРМАНТА
2003 г**

№	Вопросы	Категории кодирования
K1	Город	Алматы 1 Караганды 2 Ташкент 3 Ош 4
K2	Место проведения интервью	Участок в городе _____
K3	Номер интервьюера	_____
K4	Дата (день, месяц, год)	___ / ___ / ___
K5	Пол ключевого информанта	МУЖСКОЙ 1 ЖЕНСКИЙ 2
K6	Тип ключевого информанта:	ВВЕДИТЕ КОД: _____
	ВОДИТЕЛЬ ТАКСИ 1 ВОДИТЕЛЬ ОБЩЕСТВЕННОГО ТРАНСПОРТА 2 ДАЛЬНОБОЙЩИК 3 РАБОТНИК (-ЦА) КОММЕРЧЕСКОГО СЕКСА (РКС) 4 КЛИЕНТ РКС 5 СУТЕНЕР 6 ПОТРЕБИТЕЛЬ ИНЪЕКЦИОННЫХ НАРКОТИКОВ 7 РАБОТНИК НПО /ОБЩЕСТВЕННОЙ ОРГАНИЗАЦИИ 8 РАБОТНИК СПИД ЦЕНТРА, НАРКОДИСПАНСЕРА, КОЖНО- ВЕНЕРОЛОГИЧЕСКОГО ДИСПАНСЕРА 9 РАБОТНИК СКОРОЙ ПОМОЩИ 10 МИЛИЦИОНЕР / ПОЛИЦЕЙСКИЙ 11 РАБОТНИК ЗДРАВООХРАНЕНИЯ / АПТЕК 12 ПРОДАВЕЦ ЛАРЬКА / МАГАЗИНА 13 ТОРГОВЕЦ / РАБОТНИК НА БАЗАРЕ 14 УЛИЧНЫЙ ТОРГОВЕЦ 15	БАРМЕН/ОФИЦИАНТ 16 РАБОТНИК ГОСТИНИЦЫ 17 РАБОТНИК БАНИ/САУНЫ 18 БОМЖ 19 БЕЗРАБОТНЫЙ 20 ИНОГОРОДНИЙ (-ЯЯ) 21 ДВОРНИК 22 УБОРЩИК (-ЦА) ПОДЪЕЗДОВ 23 РАБОТНИК КСК 24 МОЛОДЕЖЬ 25 ЖИТЕЛЬ ОБЩЕЖИТИЯ 26 ЖИТЕЛЬ РАЙОНА 27 НЕ ОПРЕДЕЛЕН ТИП ИНФОРМАНТА 30 ДРУГОЕ _____ 50

**БЛАНК МЕСТА
2003 г**

S1	Город	Алматы 1 Караганды 2 Ташкент 3 Ош 4															
S2	Место проведения интервью	Номер участка _____															
S3	Номер интервьюера / Номер ключевого информанта	_____ / _____															
S4	Номер места в анкете	_____															
S5	Название места																
S6	Названо как приоритетное место...	в 10 минутах ходьбы отсюда 1 более 10 минут ходьбы отсюда 2															
S7	Адрес этого места и как его найти																
S8	Где расположено это место	Номер участка _____															
S9	ТИП МЕСТА:	*ВВЕДИТЕ КОД : _____															
	01 БАР / КАФЕ / РЕСТОРАН 02 НОЧНОЙ КЛУБ / ДИСКОТЕКА 03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУБ 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛУБ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИРА/ДОМ 12 ПОДВАЛ / ЧЕРДАК 13 ЛЕСТНИЧНАЯ ПЛОЩАДКА / ПОДЪЕЗД ДОМА 14 НЕИСПОЛЬЗУЕМОЕ / БРОШЕННОЕ ЗДАНИЕ	15 ТЕРРИТОРИЯ ШКОЛЫ 16 ТЕРРИТОРИЯ КОЛЛЕДЖА / ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ 17 ТЕРРИТОРИЯ ВУЗА 18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ 19 АВТОВОКЗАЛ 20 АЭРОПОРТ 21 СТОЯНКА ГРУЗОВИКОВ 22 СТОЯНКА ТАКСИ 23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД 25 РЫНОК 26 ПАРК / СКВЕР 27 ДРУГОЕ _____															
S10	В этом месте...	<table border="0"> <tr> <td>Люди встречают новых половых партнеров</td> <td>да</td> <td>нет</td> </tr> <tr> <td>Можно найти потребителей инъекционных наркотиков</td> <td>1</td> <td>2</td> </tr> <tr> <td>Можно найти использованные шприцы</td> <td>1</td> <td>2</td> </tr> <tr> <td>Можно встретить женщин, оказывающих сексуальные услуги</td> <td>1</td> <td>2</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> </tr> </table>	Люди встречают новых половых партнеров	да	нет	Можно найти потребителей инъекционных наркотиков	1	2	Можно найти использованные шприцы	1	2	Можно встретить женщин, оказывающих сексуальные услуги	1	2		1	2
Люди встречают новых половых партнеров	да	нет															
Можно найти потребителей инъекционных наркотиков	1	2															
Можно найти использованные шприцы	1	2															
Можно встретить женщин, оказывающих сексуальные услуги	1	2															
	1	2															

**ФОРМА ОЦЕНКИ МЕСТА
2003 г**

Номер _____

№	Вопросы	Категории кодирования															
V1	Город	АЛМАТЫ 1 КАРАГАНДЫ 2 ТАШКЕНТ 3 ОШ 4															
V2	Расположение места	Код участка _____															
V3	Идентификационный номер места в списке	_____															
V3.1	Сколько ключевых информантов назвали это место?	_____															
V4	Название места	_____															
V5	Точный адрес	_____															
V6	Находится ли это место не более 10 минут ходьбы от..... ПРОЧИТАЙТЕ СПИСОК ОБВЕДИТЕ ОДИН КОД ДЛЯ КАЖДОГО ВАРИАНТА	<table border="0"> <tr> <td></td> <td align="right">Да</td> <td align="right">Нет</td> </tr> <tr> <td>Загруженной транспортом дороги</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>Остановки общественного транспорта</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>Стоянки грузового транспорта</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>Станции метро</td> <td align="right">1</td> <td align="right">2</td> </tr> </table>		Да	Нет	Загруженной транспортом дороги	1	2	Остановки общественного транспорта	1	2	Стоянки грузового транспорта	1	2	Станции метро	1	2
	Да	Нет															
Загруженной транспортом дороги	1	2															
Остановки общественного транспорта	1	2															
Стоянки грузового транспорта	1	2															
Станции метро	1	2															
V7	ТИП МЕСТА: 01 БАР / КАФЕ / РЕСТОРАН 02 НОЧНОЙ КЛУБ / ДИСКОТЕКА 03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУБ 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛУБ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИРА/ДОМ 12 ПОДВАЛ / ЧЕРДАК 13 ЛЕСТНИЧНАЯ ПЛОЩАДКА / ПОДЪЕЗД ДОМА 14 НЕИСПОЛЬЗУЕМОЕ / БРОШЕННОЕ ЗДАНИЕ	*ВВЕДИТЕ КОД: _____ 15 ТЕРРИТОРИЯ ШКОЛЫ 16 ТЕРРИТОРИЯ КОЛЛЕДЖА / ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ 17 ТЕРРИТОРИЯ ВУЗА 18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ 19 АВТОВОКЗАЛ 20 АЭРОПОРТ 21 СТОЯНКА ГРУЗОВИКОВ 22 СТОЯНКА ТАКСИ 23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД 25 РЫНОК 26 ПАРК / СКВЕР 27 ДРУГОЕ _____															
V9	Номер интервьюера	_____															
V10	Дата (ДЕНЬ/МЕСЯЦ)	_____/____/____															

№	Вопросы	Категории кодирования
V11	День недели	ПОНЕДЕЛЬНИК 1 ВТОРНИК 2 СРЕДА 3 ЧЕТВЕРГ 4 ПЯТНИЦА 5 СУББОТА 6 ВОСКРЕСЕНЬЕ 7
V12	Время начала интервью (ПО 24-ЧАСОВОЙ СИСТЕМЕ)	_____ : _____
V13	Количество людей находящихся на месте на момент прибытия. <u>Интервьюер</u> : нужно посчитать количество на момент Вашего прибытия на место	МУЖЧИН: _____ ЖЕНЩИН: _____
V13	Количество использованных шприцев, обнаруженных интервьюером на месте	_____
V14	Пол респондента	МУЖСКОЙ 1 ЖЕНСКИЙ 2
<p>Здравствуйте. Я работаю в Центре Изучения Общественного Мнения. Мы собираем информацию о том, где в городе необходимо осуществлять программы по здравоохранению. Поэтому я хочу задать Вам несколько вопросов об этом месте и о людях сюда приходящих. Интервью займет у Вас от 15 до 30 минут. Я не буду спрашивать Вашего имени или любую другую информацию на Вас указывающую. Ваше участие является добровольным, и Вы можете не отвечать на отдельные вопросы или отказаться от интервью. Возможно, Вы будете смущены некоторыми вопросами. Может быть Вы не получите прямой выгоды от настоящего исследования, но данная Вами информация поможет в планировании программ по здравоохранению.</p> <p>Данное исследование проводится во многих местах нашего города. Вся полученная информация об этом месте будет анализироваться только в обобщенном виде вместе с информацией из других мест. Мы хотели бы быть уверенными в том, что Вам больше 17 лет.</p> <p>Ниже приведены имя и контактный телефон человека, отвечающего за данное исследование. Если у Вас есть вопросы, Вы можете обратиться к Жанар Аликуловой, Центр Изучения Общественного Мнения в Алматы по тел.: 79-64-84.</p>		
V15	Вы согласны участвовать?	ДА 1 НЕТ 2
V16	Сколько Вам лет? * ЗАВЕРШИТЕ ИНТЕРВЬЮ, ЕСЛИ РЕСПОНДЕНТ МЛАДШЕ 18 ЛЕТ	Точный возраст _____
V17	Сколько лет прошло с тех пор, как оно стало местом для проведения времени?	МЕНЕЕ ОДНОГО ГОДА 0 От 1 до 2 лет 1 От 3 до 5 лет 2 От 6 до 10 лет 3 БОЛЕЕ 10 лет 4 НЕ ПРИМЕНИМО 9

№	Вопросы	Категории кодирования			
V18	Чем здесь занимаются люди? ПРОЧИТАЙТЕ СПИСОК ОБВЕДИТЕ ОДИН КОД ДЛЯ КАЖДОГО ВИДА ДЕЯТЕЛЬНОСТИ		ДА	НЕТ	3/0
		Пьют пиво	1	2	8
		Пьют крепкие алкогольные напитки	1	2	8
		Смотрят телевизор и видео	1	2	8
		Танцуют	1	2	8
		Слушают музыку	1	2	8
		Игры (компьютерные, автоматы)	1	2	8
		Едят Смотрят стриптиз шоу	1 1	2 2	8 8
V19	Мне сказали, что люди знакомятся с половыми партнерами в местах подобных этому. Действительно ли ЗАЧИТАЙТЕ СПИСОК		да	нет	3/0
		Мужчины встречают здесь новых сексуальных партнеров – женщин?	1	2	8
		Женщины встречают здесь новых сексуальных партнеров?	1	2	8
		Мужчины встречают здесь новых сексуальных партнеров – мужчин?	1	2	8
		Помогает ли кто-нибудь здесь людям знакомиться?	1	2	8
Работающие тут люди встречают здесь новых сексуальных партнеров?	1	2	8		
V20	Знакомятся ли здесь женщины, оказывающие сексуальные услуги, со своими клиентами?		Да	1	
			Нет	2	
			Не знаю	8	
V21	Если ДА, Сколько лет прошло с того времени, как в этом месте женщины, оказывающие сексуальные услуги, начали искать клиентов?		Менее одного года	0	
			От 1 до 2 лет	1	
			От 3 до 5 лет	2	
			От 6 до 10 лет	3	
			Более 10 лет	4	
	Не знаю	8			
ПРОЧИТАЙТЕ: Давайте поговорим подробнее о тех, кто приходит сюда в "часы пик".					
V22	На ваш взгляд, среди <u>мужчин</u> , приходящих сюда в "часы пик", какую часть составляют...	Никто	<u>Некто</u> <u>рые</u>	<u>Большинств</u> <u>о/ Почти все</u>	
	(a) Безработные	0	1	2	
	(b) Студенты	0	1	2	
	(c) Младше 18 лет	0	1	2	
	(d) Живут в 10 минутах и меньше ходьбы отсюда	0	1	2	
	(e) Жители другого района	0	1	2	
	(f) Приезжают сюда на машине или такси	0	1	2	
	(g) Приезжают сюда на общественном транспорте	0	1	2	
	(h) Приходят сюда хотя бы раз в неделю	0	1	2	
	(i) Пьют здесь алкогольные напитки	0	1	2	
	(j) Находят здесь новых половых партнеров	0	1	2	
	(k) Вероятно являются людьми, употребляющими инъекционные наркотики	0	1	2	
	(l) Вероятно являются гомосексуалистами (геями)	0	1	2	
(m) Вероятно являются клиентами женщин, предлагающих секс за деньги	0	1	2		

№	Вопросы	Категории кодирования				
V24	На ваш взгляд, среди женщин, приходящих сюда в "часы пик", какую часть составляют...	Никто	Некто рые	Большинство/ Почти все		
	(a) Безработные	0	1	2		
	(b) Студенты	0	1	2		
	(c) Младше 18 лет	0	1	2		
	(d) Живут в 10 минутах ходьбы отсюда	0	1	2		
	(e) Жители другого района	0	1	2		
	(f) Приезжают сюда на машине или такси	0	1	2		
	(g) Приезжают сюда на общественном транспорте	0	1	2		
	(h) Приходят сюда хотя бы раз в неделю	0	1	2		
	(i) Пьют здесь алкогольные напитки	0	1	2		
	(j) Находят здесь новых половых партнеров	0	1	2		
V25	Укажите, пожалуйста, "часы пик" типичные для данного места за последние два месяца? СПРОСИТЕ О ДНЯХ И ВРЕМЕНИ СУТОК И ОТМЕТЬТЕ НУЖНЫЕ ВАРИАНТЫ МОЖНО ОТМЕТИТЬ НЕСКОЛЬКО ОТВЕТОВ	Утро 6-11	День 11-17	Вечер 17-22	Ночь 22-6	
		ПН	1	2	3	4
		ВТ	1	2	3	4
		СР	1	2	3	4
		ЧТ	1	2	3	4
		ПТ	1	2	3	4
		СБ	1	2	3	4
		ВС	1	2	3	4
V26	Назовите, пожалуйста, приблизительное количество людей (мужчин и женщин), посещающих данное место в часы пик. ПРИ НЕОБХОДИМОСТИ, ЗАЧИТАЙТЕ ВАРИАНТЫ	< 10	1	251-300	8	
		11-25	2	301-350	9	
		26-50	3	351-400	10	
		51-100	4	401-450	11	
		101-150	5	451-500	12	
		151-200	6	> 500	13	
		201-250	7			
V27	Оцените, пожалуйста, приблизительное количество мужчин и женщин, посещающих данное место в часы пик.	Мужчин _____ Женщин _____				
V28	Укажите наиболее посещаемые периоды?	Да Нет				
		ЗИМА 1 2				
		ВЕСНА 1 2				
		ЛЕТО 1 2				
		ОСЕНЬ 1 2				
ПРАЗДНИКИ 1 2						
V29	Проводилась ли здесь какие-либо мероприятия/действия по профилактике ВИЧ/СПИД?	ДА 1 НЕТ 2				
		Если да, то какие?				
		Лекции/семинары 1				
		Брошюры/листочки 2				
		Плакаты 3				
		Раздача одноразовых шприцов 4 Раздача презервативов 5				
V30	Были ли здесь доступны презервативы в течение последних 12 месяцев?	ВСЕГДА 1				
		ИНОГДА 2				
		НИКОГДА 3				
		НЕ ЗНАЮ 8				

№	Вопросы	Категории кодирования
V31.1	Есть ли здесь сегодня в наличии презервативы? Если ДА, могу ли я их увидеть?	ДА, НО ВЫ НЕ МОЖЕТЕ ИХ УВИДЕТЬ 1 ДА, ПРЕЗЕРВАТИВЫ ПОКАЗАНЫ 2
V31.2	Назовите общее количество марок/производителей?	НЕТ 3
V31.3	Назовите марки этих презервативов?	КОЛИЧЕСТВО МАРОК/ПРОИЗВОДИТЕЛЕЙ ПРЕЗЕРВАТИВОВ: _____ Назовите марки этих презервативов: _____
V32	Можно ли ночью найти /купить презервативы недалеко от этого места (не более 10 минут ходьбы отсюда)?	ДА 1 НЕТ 2 НЕ ЗНАЮ 8
V34	Вы бы хотели, чтобы здесь продавались презервативы?	ДА 1 НЕТ 2 НЕ ПРИМЕНИМО 9
V35	Что Вы думаете о проблеме наркомании в этом районе? Насколько распространено употребление наркотиков в этом районе?	ОЧЕНЬ РАСПРОСТРАНЕНО 1 ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО 2 НЕ ОЧЕНЬ РАСПРОСТРАНЕНО 3 ВООБЩЕ НЕТ В ЭТОМ РАЙОНЕ 4
V36	Видели ли Вы использованные иглы или шприцы внутри или около этого места за последние 3 месяца?	Да 1 Нет 2
V37	Встречаются ли в этом месте люди, употребляющие инъекционные наркотики?	Да 1 Нет 2
V38	Сколько времени прошло с тех пор, как в этом месте можно встретить людей, употребляющих инъекционные наркотики СПАСИБО ЗА ПОМОЩЬ, ДО СВИДАНИЯ!	Менее одного года 0 От 1 до 2 лет 1 От 3 до 5 лет 2 От 6 до 10 лет 3 Более 10 лет 4 Не знаю 8
V39	Наблюдение: Признаки деятельности по профилактике СПИДа, замеченные интервьюером на месте	КОЛ-ВО ИМЕЮЩИХСЯ ПЛАКАТОВ (СПИД) _____ КОЛ-ВО БРОШЮР НА УЧАСТКЕ (СПИД) _____ КОЛИЧЕСТВО ПРЕЗЕРВАТИВОВ, КОТОРОЕ МОЖНО УВИДЕТЬ _____

Нумерацию в анкете обязательно потом посмотри!!!!!!!!!!!!!!!!!!!!

БЛАНК ОТКАЗА ПО ФОРМЕ ОЦЕНКИ МЕСТА 2003 Г

Номер _____

№	Вопросы	Категории кодирования
B1	Город	АЛМАТЫ 1 КАРАГАНДЫ 2 Ташкент 3 Ош 4
B2	Расположение места	Код участка _____
B3	Идентификационный номер места в списке	_____
B4	Сколько ключевых информантов назвали это место?	_____
B5	Название места	_____
B6	Точный адрес	
B7	Результат проверки места	МЕСТО НЕ НАЙДЕНО/НЕПРАВИЛЬНЫЙ АДРЕС 1 МЕСТО НАЙДЕНО, НО В ИНТЕРВЬЮ ОТКАЗАНО 2 МЕСТО ВРЕМЕННО ЗАКРЫТО 3 МЕСТО ЗАКРЫТО ПОСТОЯННО/ ИЛИ БОЛЬШЕ НЕ СУЩЕСТВУЕТ 4 МЕСТО УЖЕ НАЗЫВАЛОСЬ/ДУБЛИРУЕТСЯ 5
B8	ТИП МЕСТА: 01 БАР / КАФЕ / РЕСТОРАН 02 НОЧНОЙ КЛУБ / ДИСКОТЕКА 03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУБ 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛУБ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИРА/ДОМ 12 ПОДВАЛ / ЧЕРДАК 13 ЛЕСТНИЧНАЯ ПЛОЩАДКА / ПОДЪЕЗД ДОМА 14 НЕИСПОЛЬЗУЕМОЕ / БРОШЕННОЕ ЗДАНИЕ	*ВВЕДИТЕ КОД : _____ 15 ТЕРРИТОРИЯ ШКОЛЫ 16 ТЕРРИТОРИЯ КОЛЛЕДЖА / ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ 17 ТЕРРИТОРИЯ ВУЗА 18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ 19 АВТОВОКЗАЛ 20 АЭРОПОРТ 21 СТОЯНКА ГРУЗОВИКОВ 22 СТОЯНКА ТАКСИ 23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД 25 РЫНОК 26 ПАРК / СКВЕР 27 ДРУГОЕ _____
B9	Номер интервьюера	_____
B10	Дата (ДЕНЬ/МЕСЯЦ)	____/____

ИНДИВИДУАЛЬНАЯ АНКЕТА 2003 г**Q1. Название города:**

1. Алматы
2. Караганды
3. Ташкент
4. Ош
- 5.

Q2. Пол интервьюера и номер:

1. Мужской 2. Женский Индивидуальный номер интервьюера ____ ____

Q3. Последовательный номер индивидуального интервью на месте: ____ ____**Q4. Название и идентификационный номер места: _____****Q4.1. Расположение места. Код участка: _____****Q5. Дата (День/Месяц/Год) ____ __/____ __/____ __****Q6. Время суток: (24-часовая система) ____ __ : ____ __**

Интервьюер: необходимо заполнить перед каждым интервью.

Q7. Количество людей находящихся на месте во время интервью:

Интервьюер: необходимо заполнить перед каждым интервью.

МУЖЧИН: ____ ____ ЖЕНЩИН: ____ ____

Q8. Пол респондента:

1. МУЖСКОЙ
2. ЖЕНСКИЙ

Q9. Мнение интервьюера, является ли респондент наркозависимым или предоставляет сексуальные услуги за деньги:

1. ТОЛЬКО НАРКОЗАВИСИМЫЙ (-АЯ)
2. ТОЛЬКО ПРЕДОСТ. СЕКС. УСЛУГИ
3. И ТО И ДРУГОЕ
4. НИ ТО И НИ ДРУГОЕ

Здравствуйте. Я работаю в Центре Изучения Общественного Мнения. Мы собираем информацию для разработки и внедрения программ по здравоохранению, включая профилактические программы по ВИЧ/СПИДу и другим заболеваниям. Для этого мы бы хотели задать Вам несколько вопросов относительно вашего поведения, включая несколько интимных вопросов о сексуальном поведении. Интервью продлится от 20 до 30 минут. Мы не будем спрашивать Вашего имени. Мы не будем Вас беспокоить в будущем. Ваши ответы никоим образом на Вас не отразятся. Ваше участие полностью добровольно. Вы можете отказаться отвечать на отдельные вопросы и от интервью в целом. Некоторые вопросы могут Вас смутить. Возможно, Вы не получите прямую выгоду от исследования, но полученная в ходе этого исследования информация поможет лучше спланировать и осуществлять программы по здравоохранению.

Вся полученная информация будет анализироваться только в обобщенном виде вместе с ответами многих людей, которых мы опрашиваем. Если у Вас возникли какие-либо вопросы, Вы сможете связаться с Жанар Аликуловой, ответственной за проведение исследования в Алматы, по тел. 796484.

Q10. Вы согласны участвовать? Интервьюер: если нет, то прекратите интервью

1. ДА
2. НЕТ

Q11. Сколько вам лет? ____ ____

Интервьюер: если респондент младше 18 лет, то прекратите интервью

Q12. Вы живете в Алматы?

1. ДА
2. НЕТ → переход к вопросу Q12.2

Q12.1. Если ДА, то в каком микрорайоне или части города Вы проживаете?

Микрорайон или перекрестки улиц _____ Код участка _____

Q12.2. Если за пределами Алматы, то где?

1. АЛМАТИНСКАЯ ОБЛАСТЬ
2. ДРУГАЯ ОБЛАСТЬ КАЗАХСТАНА
3. ДРУГАЯ СТРАНА СРЕДНЕЙ АЗИИ
4. ДРУГАЯ СТРАНА

Q12.3. Как далеко Вы живете от данного места (места опроса)? Расстояние:

1. 10 минут ходьбы и меньше
2. Более 10 минут ходьбы

Q13. Как долго Вы здесь /там/ живете?

КОЛИЧЕСТВО ЛЕТ ____ ____

МЕНЕЕ ОДНОГО ГОДА 0

ВСЮ ЖИЗНЬ 97

Q14. Сколько ночей Вы провели за пределами города за последние три месяца?

КОЛИЧЕСТВО НОЧЕЙ: ____ ____

Q15. Как часто Вы приходите в это место? Интервьюер: ТОЛЬКО ОДИН ОТВЕТ

1. КАЖДЫЙ ДЕНЬ
2. 4-6 РАЗ В НЕДЕЛЮ
3. 2-3 РАЗА В НЕДЕЛЮ
4. ОДИН РАЗ В НЕДЕЛЮ
5. 2-3 РАЗА В МЕСЯЦ
6. ОДИН РАЗ В МЕСЯЦ
7. МЕНЕЕ ОДНОГО РАЗА В МЕСЯЦ
8. ЭТО МОЙ ПЕРВЫЙ ВИЗИТ

Q16. Сколько раз за последние 7 суток, включая сегодня, Вы посещали это место?

Количество дней (от 1 до 7) _____

Q17.Когда Вы пришли сюда впервые?

1. ЭТО МОЙ ПЕРВЫЙ ВИЗИТ
2. НЕ БОЛЕЕ 4 НЕДЕЛЬ НАЗАД
3. НЕ БОЛЕЕ 2-6 МЕСЯЦЕВ НАЗАД
4. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД
5. БОЛЕЕ ГОДА НАЗАД

Q18.Как Вы добрались до этого места сегодня? *Интервьюер: ТОЛЬКО ОДИН ОТВЕТ*

1. Пешком
2. На машине
3. На общественном транспорте

Q19.Некоторые люди встречают новых сексуальных партнеров в местах подобных этому. Как Вы считаете, встречают ли люди здесь новых сексуальных партнеров, то есть людей, с которыми они еще никогда не занимались сексом?

1. ДА
2. НЕТ

Q20.Какая цель Вашего прихода в данное место? *Интервьюер: ПРОЧИТАЙТЕ СПИСОК.И***ОБВЕДИТЕ ОДИН КОД ДЛЯ КАЖДОГО ВАРИАНТА**

	Да	Нет
Употребление алкогольных напитков	1	2
Встреча/поиск нового полового партнера	1	2
Встреча/общение с друзьями	1	2

Q21.Вы когда-нибудь познакомились здесь с человеком, который стал Вашим новым сексуальным партнером?

1. ДА
2. НЕТ → переход к вопросу Q24

Q22.Когда Вы в последний раз познакомились здесь с новым сексуальным партнером?

1. НЕ БОЛЕЕ 24 ЧАСОВ НАЗАД
2. НЕ БОЛЕЕ 7 ДНЕЙ НАЗАД
3. НЕ БОЛЕЕ 2-4 НЕДЕЛЬ НАЗАД
4. НЕ БОЛЕЕ 2-3 МЕСЯЦЕВ НАЗАД
5. НЕ БОЛЕЕ 4-6 МЕСЯЦЕВ НАЗАД
6. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД
7. БОЛЕЕ ГОДА НАЗАД

Q23.Когда Вы в последний раз занимались сексом с этим новым партнером, пользовались ли Вы презервативом?

1. ДА
2. НЕТ
3. НЕ ПОМНЮ

Q24. Сейчас я бы хотел спросить Вас о людях, с которыми Вы вступали в половые отношения за последние 4 недели. Вспомните, со сколькими разными людьми Вы занимались сексом за последние 4 недели?

ВСЕГО ЗА 4 НЕДЕЛИ _____

НЕ БЫЛО ПОЛОВЫХ ПАРТНЕРОВ 0

Q25. Сколько из этих людей являлись новыми половыми партнерами за последние 4 недели?

КОЛИЧЕСТВО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ ____ ____

НЕ БЫЛО НОВЫХ ПОЛОВЫХ ПАРТНЕРОВ 0

Q26. В последний раз, когда Вы занимались сексом с одним из этих новых партнеров, Вы пользовались презервативом?

1. ДА → переход к вопросу Q28

2. НЕТ

НЕ БЫЛО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ 9 → переход к вопросу Q29

Q27. Если Нет, то почему Вы не использовали презерватив со своим новым последним половым партнером?

Интервьюер: не зачитывать список предлагаемых ответов. Возможно несколько вариантов ответов.

1. Партнер был против.

2. Я не люблю использовать презервативы

3. Я доверяю своему партнеру

4. Я боюсь подозрений со стороны партнера

5. Использую другие контрацептивы

6. Презервативы очень дорогие

7. Не имел(а) при себе презерватива

8. Презервативы не защищают от инфекций передающихся половым путем /СПИДа

9. Низкое качество презервативов/презервативы рвутся

10. Другое _____

Q28. Как часто Вы использовали презервативы со своими новыми половыми партнерами за последние 4 недели?

1. Всегда

2. Иногда

3. Никогда

Q29. Примерно сколько новых половых партнеров у Вас было в течение последних 12 месяцев?

КОЛИЧЕСТВО ____ ____ ____

НЕ БЫЛО НОВЫХ ПОЛОВЫХ ПАРТНЕРОВ 0

Q30. У Вас есть постоянный половой партнер(ы), то есть тот (те), с которым Вы вступали в половые отношения как минимум ежемесячно в течение последнего года, или более? Это может быть супруг(а), любовник(ца) или кто-то еще.

1. ДА, У МЕНЯ ЕСТЬ РЕГУЛЯРНЫЙ(Е) ПАРТНЕР(Ы)

2. НЕТ РЕГУЛЯРНОГО ПАРТНЕРА → переход к вопросу Q32

Q31.Использовали ли Вы презерватив при последнем половом акте с Вашим постоянным половым партнером?

1. ДА
2. НЕТ

Q32.За последние 12 месяцев рвался ли у Вас презерватив?

1. ДА
2. НЕТ
3. Не использую презервативы
4. Не было половых партнеров в течение последних 12 месяцев.

Q33.Сколько у Вас было половых партнеров, включая регулярных, новых и других партнеров в течение последних 12 месяцев?

КОЛИЧЕСТВО ____ ____ ____

НЕ БЫЛО ПОЛОВЫХ ПАРТНЕРОВ 0

Q34.Из них назовите, пожалуйста, самый молодой возраст и самый старший возраст?

Интервьюер: если был только один половой партнер, то нужно поставить возраст в двух позициях, если вообще не было партнеров, то поставить код 97 в двух позициях.

Молодой возраст: ____ ____ ____

Старший возраст: ____ ____ ____

Q35.Когда вы пользовались презервативом в последний раз?

1. НЕ БОЛЕЕ 24 ЧАСОВ НАЗАД
2. НЕ БОЛЕЕ НЕДЕЛИ НЕЗАД
3. НЕ БОЛЕЕ 4 НЕДЕЛЬ НАЗАД
4. НЕ БОЛЕЕ 2-6 МЕСЯЦЕВ НАЗАД
5. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД
6. БОЛЕЕ ГОДА НАЗАД
7. НИКОГДА НЕ ПОЛЬЗОВАЛСЯ(ЛАСЬ) ПРЕЗЕРВАТИВОМ → переход к вопросу Q38

Q36.Где Вы взяли презерватив, который использовали в последний раз?

1. В МАГАЗИНЕ
2. В АПТЕКЕ
3. В КИОСКЕ
4. ПРЕЗЕРВАТИВ БЫЛ У ПАРТНЕРА
5. У ДРУГА
6. ПОЛУЧИЛ БЕСПЛАТНО
7. В Баре/ночном клубе/ресторане/гостинице
8. ДРУГОЕ

Q37. Какой марки был презерватив, который Вы использовали последний раз?

Интервьюер: Только один ответ.

1. Favorite
2. Durex
3. Pilotos
4. Two to Tango
5. Innotex
6. Vizia
7. Lifestyle
8. Context
9. Desire
10. Gold Circle
11. Индийские
12. Другие _____
13. Не знаю/не помню

Q38. У Вас есть с собой презерватив?

1. ПРЕЗЕРВАТИВ ЕСТЬ, НО Я ЕГО НЕ ПОКАЖУ → переход к вопросу Q39
2. ДА, И ПРЕЗЕРВАТИВ ПОКАЗАН
3. ПРЕЗЕРВАТИВА С СОБОЙ НЕТ → переход к вопросу Q39

Q38.1. ЕСЛИ ДА, Могу ли я посмотреть? Если презерватив показан, то назовите его марку?

Интервьюер: Возможно, несколько вариантов ответов, если респондент показал презервативы разных марок

1. Favorite
2. Durex
3. Pilotos
4. Two to Tango
5. Innotex
6. Vizia
7. Lifestyle
8. Context
9. Desire
10. Gold Circle
11. Индийские
12. Другие _____

Q39. По Вашему мнению, какая цена презерватива является приемлемой? Укажите цену в тенге за один презерватив.

Цена _____ тенге

Q40. Слышали ли Вы или видели какую-либо информацию о ВИЧ/ СПИДе за последние 12 месяцев?

1. ДА
2. НЕТ → переход к вопросу Q41

Q40.1. Если ДА, то из каких источников Вы получили эту информацию?

Интервьюер: прочитайте список. ОБВЕДИТЕ ОДИН КОД ДЛЯ КАЖДОГО ВАРИАНТА

	Да	Нет
Телевидение	1	2
Радио	1	2
Газеты/Журналы	1	2
Плакаты/Брошюры	1	2
От друзей или родственников	1	2
От врача/работника здравоохранения	1	2
В учебных заведениях	1	2
От аутрич работника	1	2
Другое	1	2

Q41. Работаете ли Вы в настоящее время?

1. ДА, ПОЛНАЯ ЗАНЯТОСТЬ
2. ДА, СЛУЧАЙНАЯ РАБОТА / НЕПОЛНАЯ ЗАНЯТОСТЬ
3. НЕТ, И НЕ ИЩУ РАБОТУ
4. НЕТ, ИЩУ РАБОТУ

Q42. Учитесь ли Вы в настоящее время?

1. ДА
2. НЕТ

Q43. Состоите ли Вы с кем-либо в браке (зарегистрированном или незарегистрированном)?

1. ДА
2. НЕТ

Q44. Ваш уровень образования?

1. НАЧАЛЬНОЕ (ДО 7 КЛАССОВ) ИЛИ НИКАКОГО
2. НЕЗАКОНЧЕННОЕ СРЕДНЕЕ (8-9 КЛАССОВ)
3. СРЕДНЕЕ
4. СРЕДНЕЕ СПЕЦИАЛЬНОЕ
5. НЕЗАКОНЧЕНОЕ ВЫСШЕЕ
6. ВЫСШЕЕ

Q45. Мы бы так же хотели знать о том, что Вы думаете о потреблении наркотиков в этом районе. По Вашему мнению, как сильно распространено потребление инъекционных наркотиков в этом районе? «РАЙОН» ОБОЗНАЧАЕТ УЧАСТОК, ГДЕ ПРОВОДИТСЯ ИНТЕРВЬЮ

1. ОЧЕНЬ РАСПРОСТРАНЕНО
2. ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО
3. НЕ ОЧЕНЬ РАСПРОСТРАНЕНО
4. НЕ РАСПРОСТРАНЕНО ВОООЩЕ
5. НЕ ЗНАЮ

Q46.Как Вы считаете, приходят ли сюда люди, употребляющие инъекционные наркотики?

1. ДА
2. НЕТ
3. НЕ ЗНАЮ

Q47.Знаете ли Вы что-нибудь о месте (местах) в Алматы, где потребители инъекционных наркотиков могут обменять использованные шприцы на новые?

1. ДА
2. НЕТ

Q48.А теперь мы хотели бы задать Вам несколько вопросов о Вашем собственном опыте потребления инъекционных наркотиков. Ваши ответы будут сохранены в конфиденциальности. Вы когда-нибудь употребляли наркотики путем инъекций?

1. ДА
2. НИКОГДА НЕ УПОТРЕБЛЯЛ ИНЪЕКЦИОННЫЕ НАРКОТИКИ → переход к вопросу Q60
3. ОТКАЗ

Q49.ЕСЛИ ДА: Когда Вы в последний раз употребляли наркотики путем инъекций?

1. НЕ БОЛЕЕ 7 ДНЕЙ НАЗАД
2. НЕ БОЛЕЕ 2-4 НЕДЕЛЬ НАЗАД
3. НЕ БОЛЕЕ 2-3 МЕСЯЦЕВ НАЗАД
4. НЕ БОЛЕЕ 4-6 МЕСЯЦЕВ НАЗАД
5. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД → переход к вопросу Q60
6. БОЛЕЕ ГОДА НАЗАД → переход к вопросу Q60

Q50.С кем Вы преимущественно употребляете инъекционные наркотики?

Интервьюер: ПРОЧИТАЙТЕ ВАРИАНТЫ . Только один ответ.

1. Индивидуально
2. В постоянной группе
3. В случайной группе
4. Зависит от обстоятельств

Q51.Какие наркотики Вы принимаете путем инъекции наиболее часто?

Интервьюер: Возможно несколько ответов.

1. ХАНКА (СЫРОЙ ОПИУМ)
2. ГЕРОИН
3. ДРУГОЕ _____

Q52.Откуда был шприц, когда Вы употребляли наркотики путем инъекций в последний раз?

1. КУПИЛ В АПТЕКЕ
2. КУПИЛ В ДРУГОМ МЕСТЕ
3. ПОЛУЧИЛ В ПУНКТЕ ОБМЕНА ШПРИЦЕВ
4. ИСПОЛЬЗОВАЛ ШПРИЦ ДРУГА/ЗНАКОМОГО
5. ДРУГОЕ
6. НЕ ЗНАЮ/НЕ ПОМНЮ

Q53.В последний раз, когда Вы употребляли наркотики путем инъекций, пользовались ли Вы общей иглой или шприцем?

1. ДА
2. НЕТ
3. НЕ ЗНАЮ/НЕ ПОМНЮ

Q54. За последние 4 недели Вам доводилось ...Интервьюер: *ПРОЧИТАЙТЕ КАЖДЫЙ ВОПРОС И ПОЛУЧИТЕ НА НИХ ОТВЕТЫ.*

	ДА	НЕТ	Не знаю
Пользоваться общим шприцем вместе с другими потребителями наркотиков	1	2	8
Забирать наркотики из общей емкости	1	2	8
Пользоваться готовым раствором без его кипячения	1	2	8
Обменивать использованный шприц на новый	1	2	8

Q55. Сколько раз Вы употребляли инъекционные наркотики вчера? _____**Сколько разных шприцов Вы использовали вчера?** _____**Q56. Со сколькими людьми Вам пришлось пользоваться общим шприцем за последние четыре недели?** ВСЕГО: _____**С кем из них Вы делали это впервые?** КОЛИЧЕСТВО НОВЫХ: _____**Q57. Вы можете достать новый шприц в любой момент, когда Вам это необходимо?**

1. ВСЕГДА → переход к вопросу Q59
2. ИНОГДА
3. НИКОГДА

Q58. ЕСЛИ «ИНОГДА» или «НИКОГДА», то почему не всегда?Интервьюер: *ВАРИАНТЫ НЕ ПРЕДЛАГАТЬ*

1. НЕТ ДЕНЕГ
2. ПУНКТ ОБМЕНА ШПРИЦЕВ НАХОДИТСЯ ДАЛЕКО
3. КИОСК ИЛИ АПТЕКА НАХОДЯТСЯ ДАЛЕКО
4. БОЯЗНЬ ПОЛИЦИИ
5. НЕ СЧИТАЮ НЕОБХОДИМЫМ РИОБРЕТАТЬ НОВЫЕ ШПРИЦЫ
6. ДРУГОЕ _____

Q59. Сколько лет Вы употребляете инъекционные наркотики?

КОЛИЧЕСТВО ЛЕТ _____ КОЛИЧЕСТВО МЕСЯЦЕВ _____

ИНТЕРВЬЮЕР: СПРАШИВАТЬ У ВСЕХ РЕСПОНДЕНТОВ НЕЗАВИСИМО ОТ ТОГО, ПОТРЕБЛЯЮТ ОНИ НАРКОТИКИ ИЛИ НЕТ**Q60. Вас когда-нибудь задерживала полиция за потребление инъекционных наркотиков?**

1. ДА
2. НЕТ → переход к вопросу Q63

Q61. ЕСЛИ ДА, как Вы считаете, было ли Ваше задержание зарегистрировано?

1. ДА
2. НЕТ → переход к вопросу Q63

Q62. ЕСЛИ ДА, как Вы считаете, в настоящее время Вы состоите на учете в полиции как наркопотребитель?

1. ДА
2. НЕТ → переход к вопросу Q63

ЕСЛИ ДА, с какого времени Вы состоите на учете в полиции как наркопотребитель?

МЕСЯЦ _____, ГОД _____

Q63. Вы когда-нибудь обращались или Вас приводили к наркологу или в наркологический диспансер за потребление наркотиков?

1. ДА
2. НЕТ → переход к вопросу Q66

Q64.ЕСЛИ ДА, то Вы когда-нибудь состояли на учете в наркологическом диспансере?

1. ДА
2. НЕТ → переход к вопросу Q66

Q65.ЕСЛИ ДА, в настоящее время Вы состоите на учете в наркологическом диспансере?

1. ДА
2. НЕТ → переход к вопросу Q66

ЕСЛИ ДА, с какого времени Вы состоите на учете в наркологическом диспансере?

МЕСЯЦ _____, ГОД _____

Q66.По Вашему мнению, ВИЧ/СПИД является ли проблемой в городе Алматы?

1. Серьезная проблема
2. Незначительная проблема
3. Это не проблема
4. Не знаю

Проблема СПИДа в Алматы становится все более актуальной. Поэтому нам важно оценить уровень знаний о ВИЧ/СПИДе и путях его передачи. По Вашему мнению, как можно заразиться ВИЧ/СПИДом?

Q67.Можно ли заразиться ВИЧ/СПИДом ...

Интервьюер: ПРОЧИТАЙТЕ КАЖДЫЙ ВОПРОС И ПОЛУЧИТЕ НА НИХ ОТВЕТЫ

	ДА	НЕТ	Не знаю
При половом контакте без презерватива	1	2	8
При употреблении наркотиков общим шприцом	1	2	8
При пользовании общей посуды для приема пищи	1	2	8
При купании в общем бассейне	1	2	8
При укусе насекомого	1	2	8
При рукопожатии	1	2	8

Q68.Как можно снизить риск или избежать заражения ВИЧ/СПИДом? Какие способы Вы знаете?

Интервьюер: не зачитывайте ответы. Возможно несколько ответов.

1. ИСПОЛЬЗОВАТЬ ПРЕЗЕРВАТИВЫ
2. ИМЕТЬ НЕБОЛЬШОЕ КОЛИЧЕСТВО ПОЛОВЫХ ПАРТНЕРОВ
3. ОБА ПАРТНЕРА ДОЛЖНЫ СОХРАНЯТЬ ВЕРНОСТЬ ДРУГ ДРУГУ
4. ИЗБЕГАТЬ СЛУЧАЙНЫХ ПОЛОВЫХ СВЯЗЕЙ
5. ОТКАЗАТЬСЯ ОТ СЕКСА ВООБЩЕ
6. ОТКАЗАТЬСЯ ОТ УСЛУГ КОММЕРЧЕСКОГО СЕКСА
7. ИЗБЕГАТЬ СОВМЕСТНОГО ИСПОЛЬЗОВАНИЯ ШПРИЦЕВ
8. ИЗБЕГАТЬ ПЕРЕЛИВАНИЯ КРОВИ
9. ДРУГОЕ (УКАЗАТЬ) _____
10. НЕ ЗНАЮ

Q69. По Вашему мнению, насколько эффективны презервативы для защиты от инфекций передающихся половым путем включая ВИЧ?

1. Очень эффективны
2. Иногда эффективны
3. Не очень эффективны
4. Не эффективны вообще
5. Не знаю

Q70. По Вашему мнению, какая вероятность Вашего заражения вирусом СПИДа?

1. Очень высока
2. Не очень высока
3. Низкая вероятность
4. Нет такого риска
5. Не знаю

Q71. Может ли человек, имеющий здоровый вид, быть инфицированным ВИЧ/СПИДом?

1. ДА
2. НЕТ
3. НЕ ЗНАЮ

Q72. Где в Алматы можно сдать кровь из вены на ВИЧ?

Интервьюер: не зачитывайте ответы. Возможно несколько ответов.

1. Центры СПИД
2. Кожно-венерологический диспансер
3. Больница/поликлиника
4. Не знаю/Не помню
5. Другое _____

Q73. Сколько раз Вы сдавали кровь из вены на ВИЧ/СПИД за последние 12 месяцев?

КОЛИЧЕСТВО ТЕСТОВ ____ ____

НЕ СДАВАЛ (А) КРОВЬ ИЗ ВЕНЫ НА ВИЧ/СПИД 0 → переход к вопросу Q76

Q74. Ваша последняя проверка на ВИЧ/ СПИД была добровольной или обязательной (по направлению)? То есть, было ли это Вашим выбором или Вас к этому обязали?

1. ДОБРОВОЛЬНАЯ
2. ОБЯЗАТЕЛЬНАЯ

Q75. При последней сдаче крови на ВИЧ объясняли ли Вам пути заражения и давали другую информацию о ВИЧ?

1. ДА
2. НЕТ

Q76. Хотели бы Вы пройти тест на ВИЧ, если бы это было по-настоящему анонимно?

1. ДА
2. НЕТ

Q77.Слышали ли Вы когда-либо об инфекциях передающихся половым путем?

1. ДА
2. НЕТ → переход к вопросу Q79 ИЛИ Q87

Q78.Если ДА, то, какие признаки и симптомы заставили бы Вас думать о наличии инфекций передающихся половым путем? Интервьюер: НЕ ЗАЧИТЫВАЙТЕ ОТВЕТЫ. ВОЗМОЖНО НЕСКОЛЬКО ВАРИАНТОВ ОТВЕТОВ

1. Боли внизу живота
2. Выделения из влагалища/пениса
3. Зуд в области гениталий
4. Боли при мочеиспускании
5. Боли во время полового акта
6. Язвы на гениталиях
7. Воспаления в области гениталий
8. Кровь в моче
9. Нарушения мочеиспускания
10. Потеря веса
11. Импотенция/Бесплодие
12. Нет симптомов
13. Не знаю
14. Отказ от ответа
15. Другое (запишите) _____

ВОПРОСЫ ТОЛЬКО ДЛЯ ЖЕНЩИН:

Q79.Вступали ли Вы в сексуальные отношения за деньги или другое материальное вознаграждение в течение последних 3 месяцев?

1. ДА
2. НЕТ → переход к вопросу Q85

РЕСПОНДЕНТ-МУЖЧИНА 9

Q80.ЕСЛИ ДА, укажите, пожалуйста, количество мест, где Вы искали клиентов в течение последних четырех недель.Количество мест _____

Q81.ЕСЛИ ДА, из этих мест укажите названия тех мест, где Вы чаще всего искали клиентов? Для кодов: Идентификация мест по участкам.

Места:

- 1 _____
- 2 _____
- 3 _____

Q82.В последний раз, когда Вы вступали в сексуальные отношения за деньги или другое материальное вознаграждение использовали ли Вы презерватив?

1. ДА
2. НЕТ → переход к вопросу Q84

Q83.ЕСЛИ ДА, кто принял решение об использовании презерватива?

1. Я
 2. Мой партнер
 3. Мой партнер и Я
 4. Не помню
- переход к вопросу Q85

Q84.ЕСЛИ НЕТ, кто был против использования презерватива?

1. Партнер был против
2. Я не люблю использовать презервативы
3. Я доверяю своему партнеру
4. Я боюсь подозрений со стороны партнера
5. Использую другие контрацептивы
6. Презервативы очень дорогие
7. Не имел(а) при себе презерватива
8. Презервативы не защищают от ИППП/СПИД
9. Низкое качество презервативов/презервативы рвутся
10. Другое _____

Q85.Не замечали ли Вы у себя в последние 4 недели такие симптомы.....

Симптомы	ДА	НЕТ
Боли внизу живота, не связанные с менструацией	1	2
Необычные выделения	1	2
Язвочки	1	2

Q86.Если у Вас были какие-либо из вышеназванных симптомов, то получали ли вы лечение за последние 4 недели?

	ДА	НЕТ
Лечилась самостоятельно	1	2
У частнопрактикующего врача	1	2
Поликлиника/Больница	1	2
Не лечилась	1	2

ВОПРОСЫ ТОЛЬКО ДЛЯ МУЖЧИН:**Q87.Платили ли Вы кому-нибудь деньги или делали материальное вознаграждение в другой форме за сексуальные услуги в течение последних 3 месяцев?**

1. ДА
2. НЕТ
3. НЕ ПОМНЮ

РЕСПОНДЕНТ-ЖЕНЩИНА 9

Q88.Занимались ли Вы сексом с мужчиной в течение последних 4-х недель?

1. ДА
2. НЕТ
3. НЕ ПОМНЮ

Q89.Не замечали ли Вы у себя в последние 4 недели такие симптомы.....

Симптомы	ДА	НЕТ
Боли при мочеиспускании	1	2
Необычные выделения	1	2
Язвочки	1	2

Q90.Если у Вас были какие-либо из вышеназванных симптомов, то получали ли вы лечение за последние 4 недели?

	ДА	НЕТ
Лечилась самостоятельно	1	2
У частнопрактикующего врача	1	2
Поликлиника/Больница	1	2
Не лечилась	1	2

СПАСИБО ЗА ВАШЕ УЧАСТИЕ!

Appendix 4 – Maps

Figure A1. Interviews Completed at Sites in Almaty

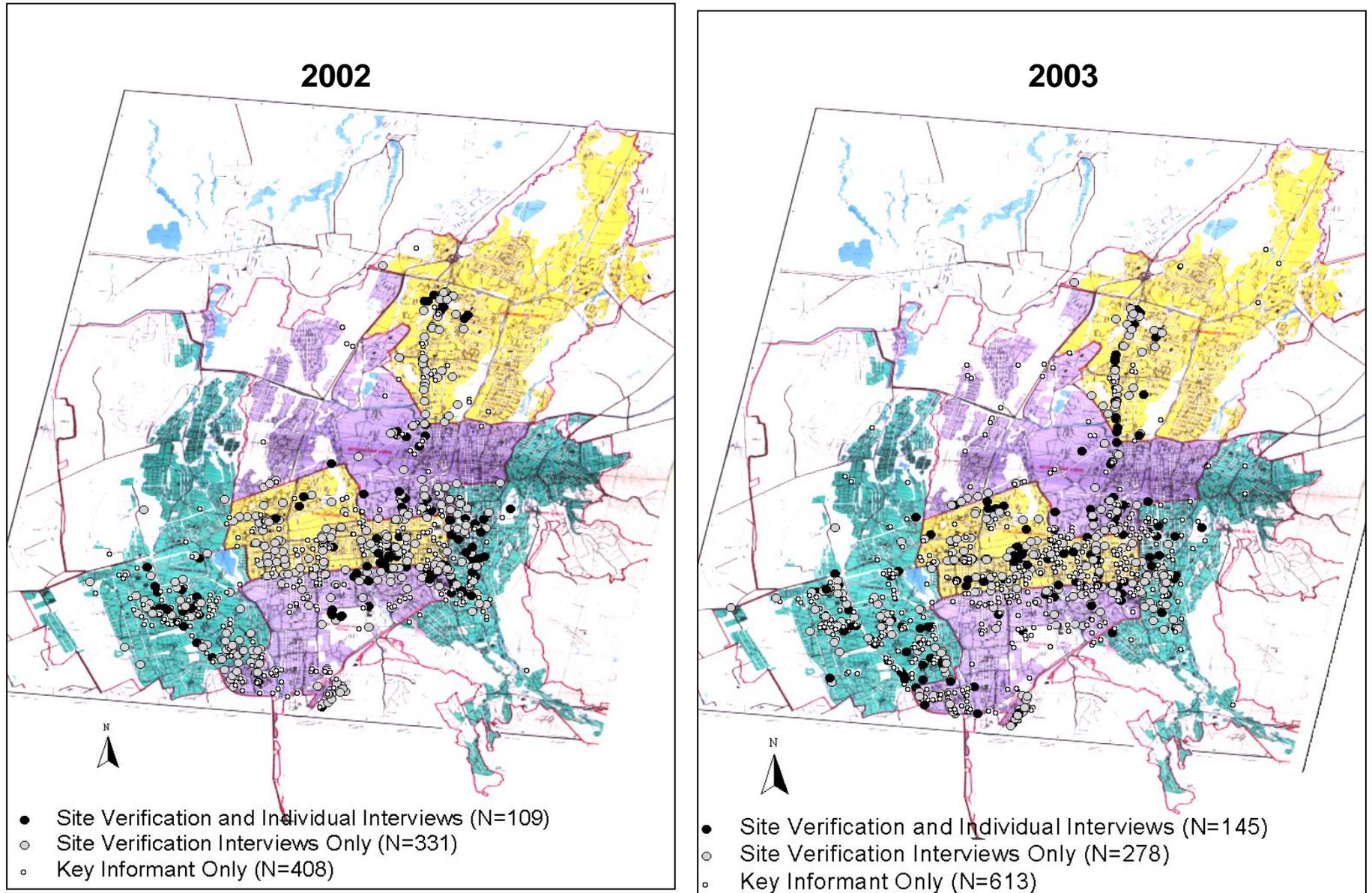


Figure A2. Condoms Seen at Site on Day of Interview in Almaty

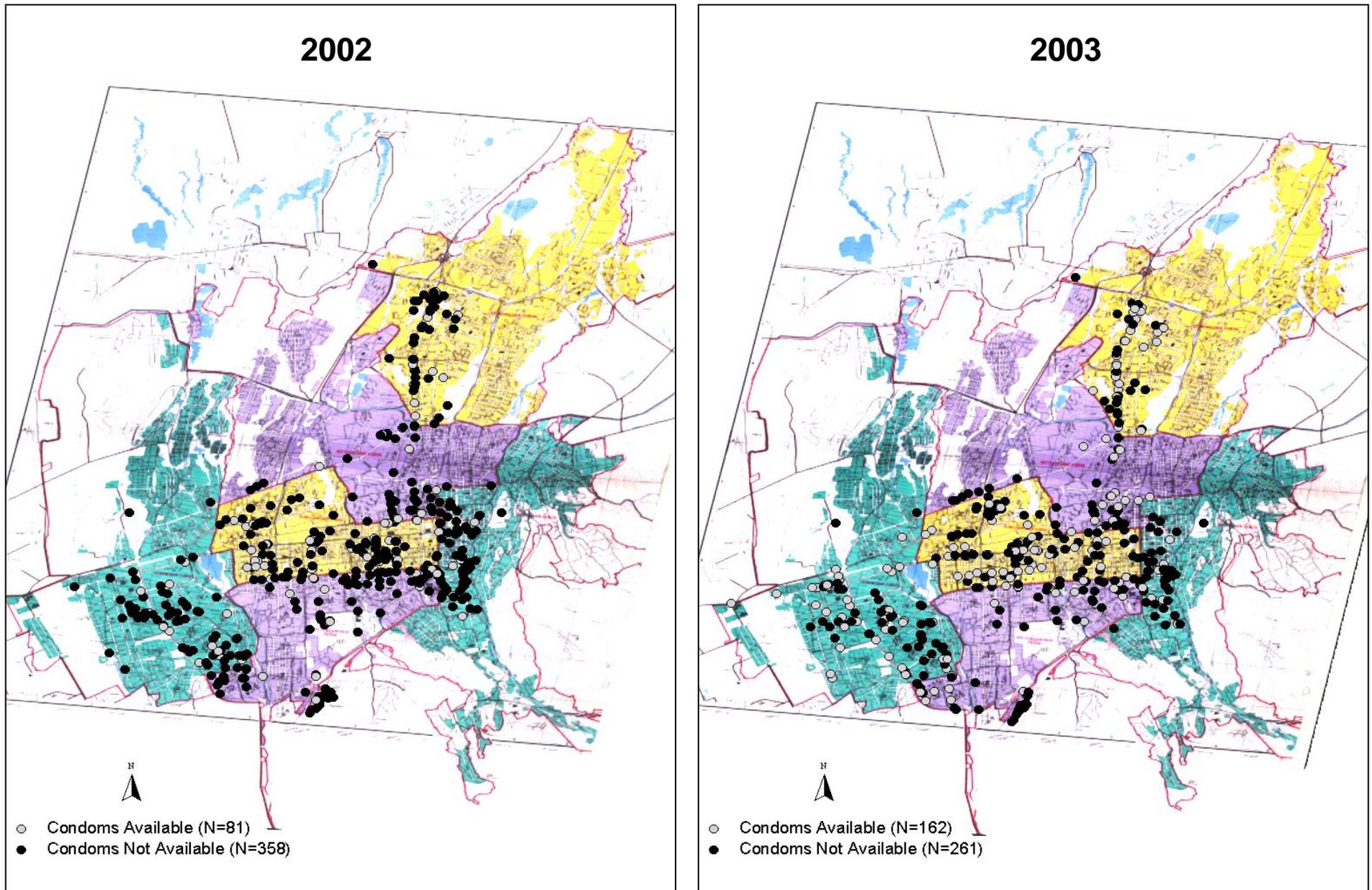


Figure A3. Priority Sites in Almaty

