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Characteristics, High-Risk Behaviors and Knowledge of STI/HIV/AIDS, and Prevalence of HIV, Syphilis and Hepatitis among Injecting Drug Users in Kutaisi, Georgia: 2007

Report on a Behavioral Surveillance Survey with a Biomarker Component for the SHIP Project



Save the Children



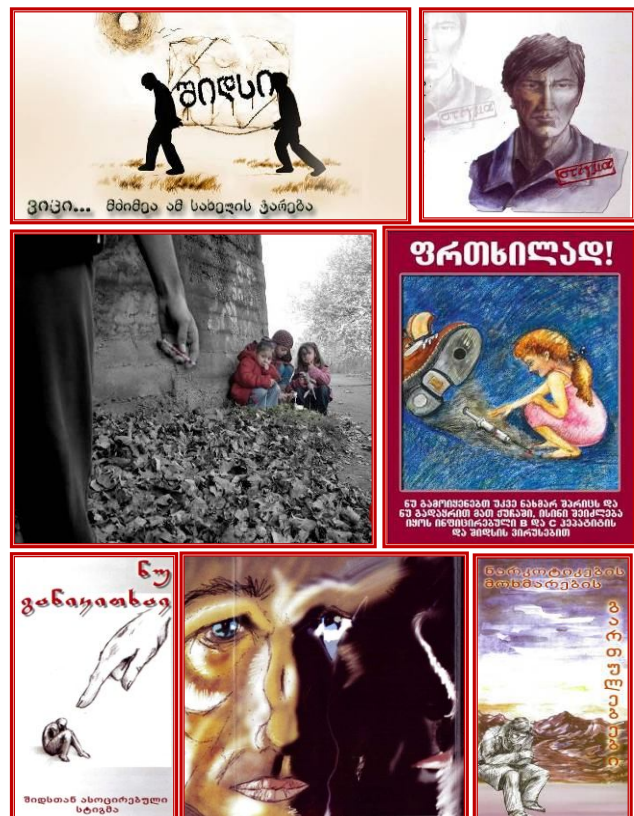
Bemoni Public Union



Tanadgoma – Center for Information and Counseling on Reproductive Health



Infectious Diseases, AIDS and Clinical Immunology Research Center



April 2008

The STI/HIV Prevention (SHIP) Project is being implemented in partnership with Program for Appropriate Technology in Health (PATH), Tanadgoma and Bemoni Public Union, with close collaboration with the Infectious Diseases, AIDS and Clinical Immunology Research Center, and the Research Institute on Addiction.

This study was funded by the United States Agency for International Development (USAID) within the framework of Save the Children's STI/HIV Prevention (SHIP) Project (Cooperative Agreement 114-A-00-02-00095-00). The opinions expressed in this report do not necessarily reflect the views and/or opinions of USAID.

Authors:

Larry Dershem, Ph.D., Design, Monitoring & Evaluation Advisor, Save the Children, Georgia Country Office, Tbilisi, Georgia

Mzia Tabatadze, MD., MPH, SHIP Project Manager, Save the Children, Georgia Country Office

Tamar Sirbiladze, M.D., Bemoni Public Union, Tbilisi, Georgia

Lela Tavzarashvili, M.D., Bemoni Public Union, Tbilisi, Georgia

Tea Tsagareli, M.D., SHIP Project Director, Save the Children, Georgia Country Office, Tbilisi, Georgia

Interviewers:

Bemoni Public Union: Tamar Chichinadze

Tanadgoma Batumi : Zaza Babunashvili

Laboratory Diagnostics:

Manana Gvaberidze, MS.: AIDS Center, Head of Serology and Virology Laboratory

Natia Dvali: AIDS Center, Lab Physician, Serology and Virology Laboratory

Translator (English to Georgian)

Rusudan Tsitsishvili

Art Work

Art on the cover page and in the report are original works of art included in the pamphlets, leaflets and brochures used in the Information, Education and Communication component of the SHIP project.

Acknowledgements

This behavioral and biomarker surveillance survey and report are the culmination of contributions made by numerous individuals, organizations and institutions, from inception and throughout the entire process of planning, fieldwork, data analysis, writing and editing. Each of the contributions has been invaluable. Furthermore, the United States Agency for International Development (USAID) has provided the necessary funds that allowed this important study to take place.

The early phases of planning the surveys relied heavily upon the professional work and insightful knowledge that Bemoni Public Union (BPU), the AIDS Center, and the Research Institute on Addiction - all collaborating with Save the Children's STI/HIV Prevention (SHIP) Project - have regarding injecting drug users (IDUs) in Georgia. Their work over the years has laid the foundation for this study. Building upon this foundation, Dr. Gina Dallabetta, who worked with Family Health International during this time period (and is now with the Bill & Melinda Gates Foundation), led the SHIP Project through a process that provided a number of insights about IDUs. This helped inform the research protocols that were eventually used. Gina's advice and guidance has not only been a great learning experience for all involved, but has been crucial in establishing the systematic methodology that is both non-coercive and anonymous.

The SHIP Project would like to acknowledge the contribution of the Oxfam/Novib funded project, "HIV/AIDS, Gender and Education" that generously agreed to provide its Mobile Laboratory for blood withdrawal procedures during the survey.

One of the most demanding aspects of the initiative was the fieldwork. All the staff of Tanadgoma and Bemoni contributed enormous amounts of time in preparation, interviewing, and taking blood specimens. Moreover, all persons involved in these activities did it with compassion and concern for protecting the rights of IDUs. ACT-Research was hired to assist with quality control of data collection processes, database development, data entry and cleaning.

If all were told, the number of authors on the report would fill one page. Many people have read and reread drafts of the report and made worthy contributions; nonetheless, any flaws that remain in the report are solely of the authors.

Translating any document, especially a report written with technical health and statistical expressions, is challenging. Nonetheless, Rusudan Tsitsishvili has provided a high-quality version of the report in Georgian, which will make the report accessible to a wide Georgian audience interested in understanding how to improve services and treatment for IDUs.

Ultimately, the SHIP Project must recognize those who were willing to give of their time, stories, and blood to make this report possible – the IDUs. It is from their willingness to share in this endeavor that a positive, healthy future for all the people of Georgia will be possible.

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Acronyms

AIDS – Acquired Immune Deficiency Syndrome
AIDS Center – Infectious Diseases, AIDS & Clinical Immunology Research Center
BPU – Bemoni Public Union
BSS – Behavioral Surveillance Survey
ELISA – Enzyme Linked Immunosorbent Assay
CSP – Commercial (male or female) Sex Partner
FSW – Female Sex Worker
GEL – Georgian Lari (exchange rate of 1.6GEL=1USD in October 2007)
HBV –Hepatitis B Virus
HCV – Hepatitis C Virus
HIV – Human Immunodeficiency Virus
IDP – Internally Displaced Person
IDUs – Injecting Drug Users
MSM – Men who have Sex with Men
NGO – Non-Government Organization
RDS – Respondent Driven Sampling
RIA – Research Institute on Addiction
RPR – Rapid Plasma Reagent
SC – Save the Children
SHIP – STI/HIV Prevention
SPSS – Statistical Package for the Social Sciences
STI – Sexually Transmitted Infections
TPHA – <i>Treponema pallidum</i> Hemagglutination Assay
UNAIDS – The Joint United Nations Programme on AIDS
VCT – Voluntary Counseling and Testing

Definitions

Anonymous-linked testing – testing where no names are taken but results are linked to a number that only the participant knows.

Consistent condom use – use of condoms every time during sexual relations with individuals in high-risk situations (e.g., using condoms every time with occasional/causal sexual partners;

with sex workers; or, if condom user has HIV or other STI, with their regular sexual partner, such as spouse or steady girlfriend/boyfriend).

Drug paraphernalia/equipment – bottle, spoon, boiling pan, container, and/or cotton filter.

“Extreme need” with/without help – this is a form of self-treatment used in Georgia among IDUs that is similar to the practice referred to as “cold turkey” in the US; that is, a complete self-termination of drug use. “Extreme need with help” is when a family member or friend assists the IDU with the complete self-termination of drug use.

Gathering place – a setting where a group of IDUs meet to inject drugs that may or may not involve the sharing of needle/syringes or injecting equipment. Also, this setting may change periodically.

High-risk behavior – any behavior that puts an individual or individuals at increased risk of contracting STIs/HIV or transmitting STIs/HIV to another individual (e.g., having multiple sex partners without using condoms consistently; sharing used non-sterile needles, syringes or other devices used to prepare the drug among IDUs).

Non-regular (occasional/casual) sex partner – a sex partner for less than one year who is not a spouse, live-in partner or sex worker.

Regular (permanent) sex partner – a spouse, live-in partner or sex partner for one year or more.

Sharing needles and/or injecting equipment – reusing needles, syringes or other injecting equipment with other IDUs without properly sterilizing the equipment.

SHIP Partners – Tanadgoma and Bemoni Public Union, with close collaboration with the Infectious Diseases, AIDS & Clinical Immunology Research Center (AIDS Center), and Research Institute on Addiction (or Narcology Institute).

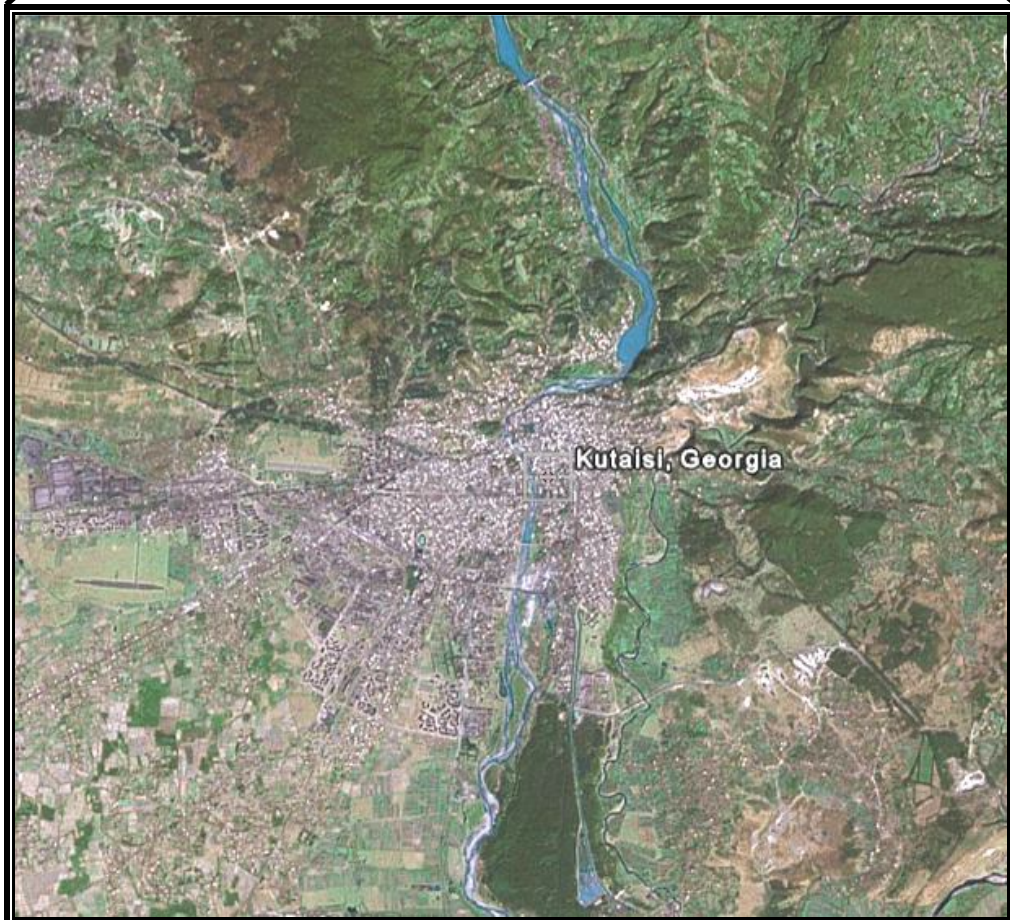
“Switched drugs” – this refers to the substitution of one drug for another. More often, drug substitution occurs when the usual drug injected is not available, or the IDU cannot afford it.

Location

Figure 1: Map of Georgia; population - 4.4 million.



Figure 2: Imereti Regional Center, Kutaisi: population – 190,000.



Overview

This report presents the findings from the behavioral surveillance survey (BSS) conducted in Kutaisi, Georgia among injecting drug users (IDUs). This study will serve as a baseline measurement of the prevalence of different risk behaviors of IDUs for the STI/HIV Prevention (SHIP) Project and other HIV/AIDS prevention activities in Kutaisi but will also provide needed comparative data to similar studies conducted in Tbilisi and Batumi.

This BSS used a chain-referral method of respondent driven sampling (RDS). Six (6) IDUs, referred to as “seeds,” started the snowball sampling process. Within one week a total of 200 IDUs had been recruited. In addition, 24 IDUs heard about the study and participated as volunteers. Interviewing was conducted in Tanadgoma’s office in Kutaisi.

Interviewing was conducted from 8 October to 13 October 2007. Interviews were conducted face-to-face by trained staff from Bemoni Public Union (BPU) and Tanadgoma’s Batumi branch. The interviews were conducted in Georgian. Questions were asked regarding high-risk behaviors, knowledge of STIs and HIV/AIDS, and use of health services. In addition, each IDU was asked to provide a blood specimen for an anonymous-linked test for syphilis, Hepatitis C (HCV), Hepatitis B (HBV) and HIV.

IDUs were exclusively men in this study.

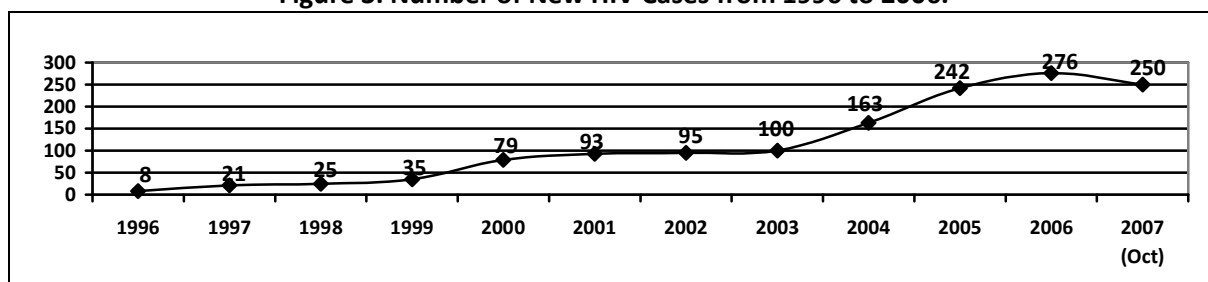
Introduction

According to the 2002 Census, Georgia’s population is 4.4 million in a geographical area of 70,000-sq. km., bounded by the Black Sea, Russia, Azerbaijan, Armenia and Turkey. Much of the social structure supporting the health care system became increasingly dysfunctional after the collapse of the former Soviet system but recently improvements are being made due to structural reforms funded by foreign assistance. However, the years of neglect and drastic budget cuts in the healthcare sector resulted in a general deterioration in the overall health status of the Georgian population. Transparent borders, allowing drugs to move freely throughout the region, along with liberalization of sexual taboos (including gender-based norms) traditional to Georgians, and chronic poverty has led to increased levels of high-risk behaviors for female sex workers (FSWs) and injecting drug users (IDUs). This, in turn, has led to the acceleration in the spread of sexually transmitted infections (STIs) and HIV. The incidence of HIV has grown relatively slowly and is at this time primarily concentrated among IDUs. The wide availability of drugs, combined with the complex factors motivating demand, and the lack of educational interventions to reduce demand, is likely to mean that IDU trends will continue in an upward direction for the foreseeable future. Also, the exponential growth in STIs, particularly among young people, is alarming in that STIs are a co-factor in the sexual transmission of HIV, and the same risk behaviors perpetuate both infections.

WHO experts indicate that Georgia may be on the verge of an HIV/AIDS outbreak, if adequate preventive measures are not taken. At present, Georgia falls within the category of countries classified as low HIV prevalence, defined by UNAIDS as having less than 5% infection in all groups, with a concentrated epidemic among high-risk groups, which includes IDUs and FSWs. The first HIV diagnosis in Georgia was made in 1989.

The trend since 1996 has been an increase in the number of HIV/AIDS cases (see Figure 3). The two major increases were 1999-2000 and 2003-2004. However, in general, STI/HIV data suffer from weak surveillance systems in Georgia, which is likely to have resulted in widespread under-reporting. Moreover, the anecdotal reports of recent increases in the rate of STIs indicate a future potential for HIV to spread more rapidly among a wider population through sexual contact.

Figure 3: Number of New HIV Cases from 1996 to 2006.



As of 9 October 2007 there was a total of 1,406 HIV registered cases; 1074 are males and 332 are females, the vast majority of infected persons is 29 to 40 years of age.¹ The actual number of persons living with HIV in Georgia may be closer to 3,500 persons.² IDUs account for 60.7% of the registered HIV cases in Georgia; heterosexual contacts for 32.3% (1/3 of these heterosexual contacts were with known IDUs); homo/bi-sexual contacts for 2.8%; 0.8% were blood recipients; 2.0% was from vertical transmission; and 1.4% was from unknown causes.³ A total of 176 cases HIV/AIDS have been registered in the Imereti Region.

Governmental and non-governmental organizations in Georgia, as well as the international donor community, have responded to the early HIV epidemic with pilot interventions. Despite the political support for such interventions, an effective comprehensive system of prevention is yet to be established in Georgia or the Caucasus region as a whole.

Even though Georgia is considered a low prevalence country for HIV/AIDS, there is a great danger in equating low prevalence with low priority for HIV prevention. After the Rose revolution in early 2003, the economy has been growing, but that has not yet translated into significantly improved socio-economic conditions or employment opportunities for the population at large. This environment provides for the conditions for greater HIV transmission due to increased high-risk behaviors, such as drug use. Moreover, with national and regional budgets mostly in the red this means few resources for prevention and care.

The Setting – Kutaisi

Kutaisi is the second largest city in Georgia with a population of 190,000.⁴ It is the regional center of the Imereti Region, lying 220 kilometers from Tbilisi, the capital of Georgia. It is situated along the banks of the Rioni River bordered on the north side by the Samguruli Range of the North Caucasus Mountains and on the west by the Colchis Plain. Kutaisi is within a sub-tropical zone. In the Soviet period, Kutaisi was an industrial center, which has collapsed since Georgia's independence from the Soviet Union in 1991.

According to the US Department of State, Georgia is believed to be a secondary transit route for heroin smuggled from Afghanistan.⁵ Drugs are brought into Georgia through trucks destined for Tbilisi. From Tbilisi the drugs are shipped west to the Black Sea ports of Batumi, Poti, and Sukhumi (Abkhazia) via the main road through Kutaisi.

¹ Infectious Diseases, AIDS and Clinical Immunology Research Center, http://aidscenter.ge/epidsituation_eng.html.

² Infectious Diseases, AIDS and Clinical Immunology Research Center, http://aidscenter.ge/epidsituation_eng.html.

³ Infectious Diseases, AIDS and Clinical Immunology Research Center, http://aidscenter.ge/epidsituation_eng.html.

⁴ State Department of Statistics, <<http://www.statistics.ge/>>.

⁵ International Narcotics Control Strategy Report, March 2004, Georgia, United States Department of State.

Behavioral Surveillance Survey (BSS)

Table 1 below presents a summary of findings from the BSS. This table shows the findings based on various indicators for male IDUs in Kutaisi compared with IDUs in Tbilisi in 2006. The analyses includes a breakdown by four age groups for each indicator, which is presented in the data tables in the appendix; however, due to brevity of presentation a discussion of all age group similarities and/or differences will not be discussed.

Table 1: Summary of key indicators for IDUs in Kutaisi and Tbilisi.

Key Indicators	Prevalence		
	Kutaisi 2007 (n=200 males)	Tbilisi 2006 (n=274 males)	Batumi 2006 (n= 195)
Biomarker			
Reactive syphilis serology (RPR, TPHA with ELISA confirmation)	4.5% (9/198)	2.2% (6/274)	5.6% (11/195)
Hepatitis C	57.8% (111/192)	64.6% (177/274)	76.4% (149/195)
Hepatitis B	7.0% (14/199)	3.3% (9/273)	2.6% (5/195)
HIV (ELISA with Western Blot confirmation)	1.0% (2/197)	0.0% (0/274)	3.6% (7/195)
Demographic Characteristics			
Median age	31.0 yrs	30 yrs	28.0 yrs
Level of education	63% Secondary/voc. (125/200)	54% University (148/274) 30% Secondary (81/274)	57% Secondary (112/195) 40% University (74/195)
Marital status	49% Married (98/200) 47% Never married (93/200)	48% Never married (132/274) 42% Married (115/274)	60% Married (116/195) 33% Never married (64/195)
Drug Use			
Median age of 1 st drug use	17 yrs	15 yrs	16 yrs
Median age of 1 st injecting	21 yrs	19 yrs	18 yrs
Most frequent drug injected last week	46.2% Opium (42/91) 37.4% Buprenorphine (subutex) (34/91) 30.8% Heroin (28/91)	80% Buprenorphine (subutex) (189/236) 50% Antihistamine (189/236) 38.1% Heroin (90/236)	96.9% Heroin (189/195) 39.0% Subutex (75/195)
Sexual Risk Behavior			
Median age at 1 st sex	15 yrs (200)	15 yrs (273)	15.0 yrs (195)
Had <i>regular</i> sex partner in previous year	74.2% (141/190)	80.3% (220/274)	81.2% (147/181)
Used condom at last sex with regular partner	15.6% (22/141)	31.8% (70/220)	12.2% (18/148)
Had " <i>occasional</i> " sex partner in previous year	63.2% (120/190)	57.8% (141/244)	37.6% (68/181)
Used condom at last sex with casual/occasional partner	50.0% (60/120)	67.6% (94/139)	57.6% (38/66)
Had sex with <i>paid-for</i> sex worker(s) in the previous year	42.6% (81/190)	29.8% (73/245)	23.9% (43/180)
Used condom at last sex with sex worker	75.3% (61/81)	96.1% (49/51)	80.6% (29/36)
Median # of sex partners (regular, casual, sex worker) last year	4.0 partners (190)	3.0 partners (220)	2.0 partners (184)

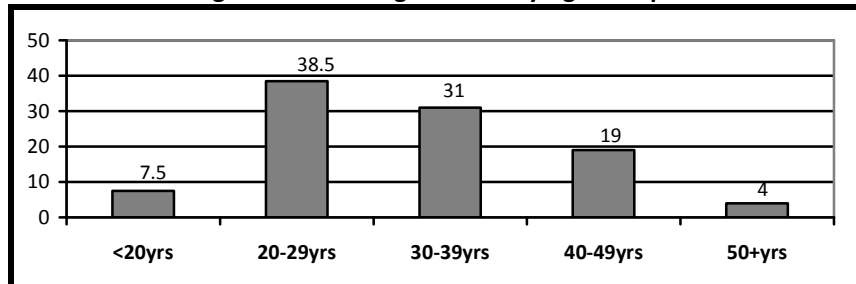
Characteristics, High-Risk Behaviors and Knowledge of STI/HIV/AIDS of Injecting Drug Users in Kutaisi, Georgia: 2007

Key Indicators	Prevalence		
	Kutaisi 2007 (n=200 males)	Tbilisi 2006 (n=274 males)	Batumi 2006 (n= 195)
Drug Use Risk Behavior			
Ever used a previously used needle/syringe	54.5% (109/200)	38.3% (105/274)	64.1% (125/195)
Shared needle/syringe in the last week	3.6% (4/109)	9.0% (8/89)	12.1% (15/124)
Percent that tried to clean the used needle/syringe	100% (4/4)	100% (8/8)	100% (13/13)
Primary method to clean used needle/syringe	100% Water (4/4)	100% Water (7/7)	100% Water (13/13)
Used shared injecting equipment in the last week	91.1% (82/90)	43.2% (99/229)	69.8% (136/195)
Use solution from a shared container in the last week	83.3% (75/90)	21.8% (50/229)	54.3% (106/195)
Can get/buy new/unused needle/syringes when needed	98.5% (197/200)	100% (274/274)	97.4% (190/195)
Location to get new needles/syringes	97.0% Pharmacy (194/200)	99.6% Pharmacy (273/274)	98.9% Pharmacy (193/195)
STI/HIV Awareness and Knowledge			
Aware of HIV	97.5% (195/200)	98.9% (271/274)	91.8% (179/195)
Know person that has/had HIV	16.5% (33/200)	38.3% (105/274)	35.4% (69/195)
Main source of information about HIV/AIDS	96% TV (191/200) 71% Mag./Journal (142/200)	94% TV (258/274) 62% Mag./Journal (170/274)	99.5% TV (194/195) 79% Magazine (154/195)
Correctly identify six means of transmitting HIV	6.5% (13/200)	37.6% (103/274)	31.8% (62/195)
Voluntary Counseling and Testing			
Voluntary HIV testing is available in the community	44.5% (89/200)	86.5% (237/274)	54.5% (104/191)
Had voluntary HIV test and received results	15.5% (31/200)	25.5% (70/274)	27.2% (53/195)
Social Influences and Treatment			
Person with major influence to continue injecting drugs	91% Nobody (181/200)	71% Nobody (193/273)	80.0% Nobody (156/195)
Person with major influence to stop injecting drugs	School mates (195/200)	School mates (114/274)	Parents (59.5%)
Percent that have never received treatment for drug use	80.5% (161/200)	72.2% (195/270)	53.3% (104/195)
Percent that started treatment but quit	19.0% (38/200)	18.9% (51/270)	44.6% (87/195)

Characteristics

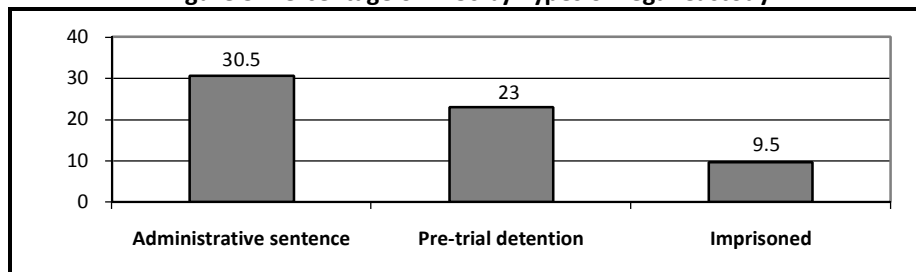
- All (100%) of IDUs interviewed in Kutaisi were male and were, on average, 31 years of age.

Figure 4: Percentage of IDUs by Age Groups.



- Seventy percent of IDUs were between 20-39 years of age.
- Virtually all (99%) IDUs are ethnic Georgians.
- Slightly less than two-thirds (63%) have completed secondary or vocational schooling, with 30% completing university studies.
- IDUs were either married (49%) or had never been married (47%). The remaining IDUs were divorced. On average, married IDUs were in their mid-twenties when they got married.
- The vast majority (85%) of single IDUs lives with their parents, whereas virtually all (86%) married IDUs live with their spouses.
- Only 3% are internally displaced persons (IDPs).
- Kutaisi is home for all IDUs.
- Almost 1 in 3 (31%) IDU has been detained in administrative custody for drug use.
- One in four (23%) has been imprisoned before trial because of drug use.
- One in 10 (10%) reported ever being imprisoned due to drug use.

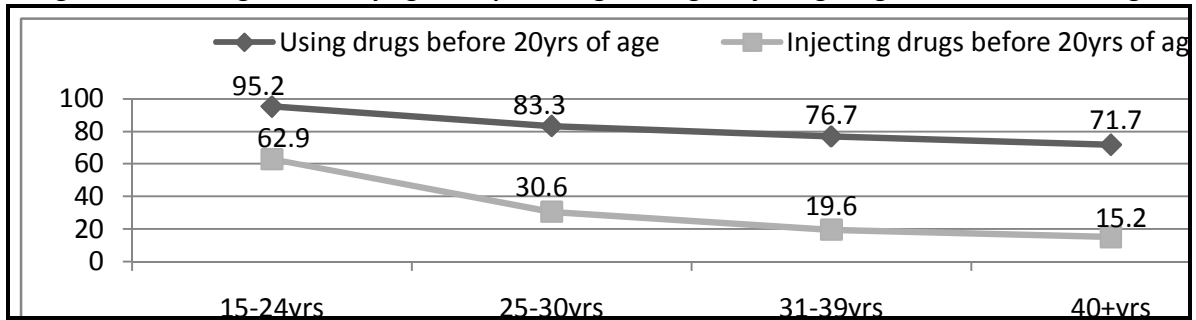
Figure 5: Percentage of IDUs by Types of Legal Custody



Drug Use

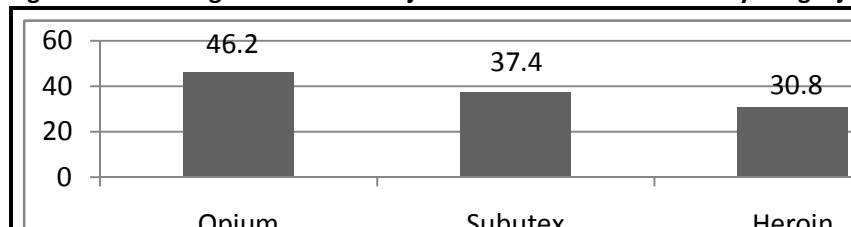
- Two-thirds (66%) of IDUs began using drugs between 15 and 19 years of age.
- However, most (66%) IDUs first injected drugs 20 years of age or older.
- The age of first injection among IDUs appears to be getting younger; that is, 63% of IDUs 15-24 began injecting drugs before they were 20 years of age, compared to 31%, 20% and 15% for each of the three older age groups.
- Slightly more than one-third (38%) of IDUs regularly inject in a group, which have, on average, 4 members.
- The percentage of IDUs who injected in the previous week was 46.2%.
- Of the IDUs who injected in the previous week, on average, 1.5 drugs were injected per IDU.

Figure 6: Percentage of IDUs by Age Group that Began Using & Injecting Drugs before 20 Years of Age.



- Slightly more than one-half (59.3%) of IDUs injected in locations other than Kutaisi in the previous year. And, about one-quarter (26.6%) of IDUs injected outside of Georgia in the previous year.
- Three drugs of choice for injecting in the previous week were opium (46.2%), subutex⁶ (37.4%) and heroin (30.8%).

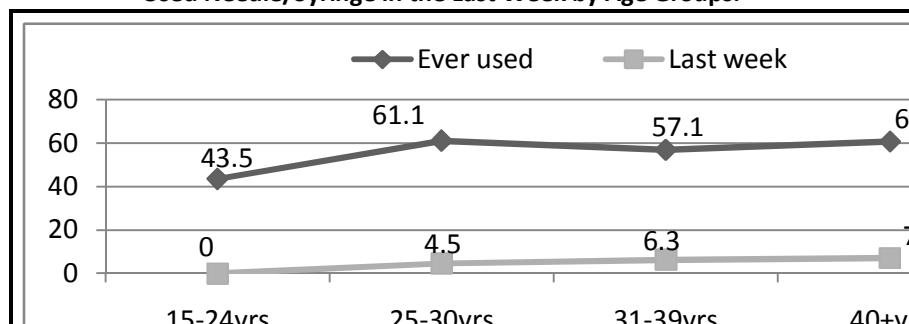
Figure 7: Percentage of IDUs Who Injected in the Previous Week by Drug Injected.



Drug Use Risk Behavior

- The percentage of IDUs who had ever used a previously used needle/syringe was quite high: 54.5%.
- The age group with the lowest proportion of ever using a previously used needle/syringe was the youngest, 15 to 19 year olds (43.5%), with about 60% of IDUs in the other age groups having done so.
- Of those IDUs who had ever used a previously used needle/syringe and had injected in the previous week, only 4% (4/109) had shared a needle/syringe in the previous week.

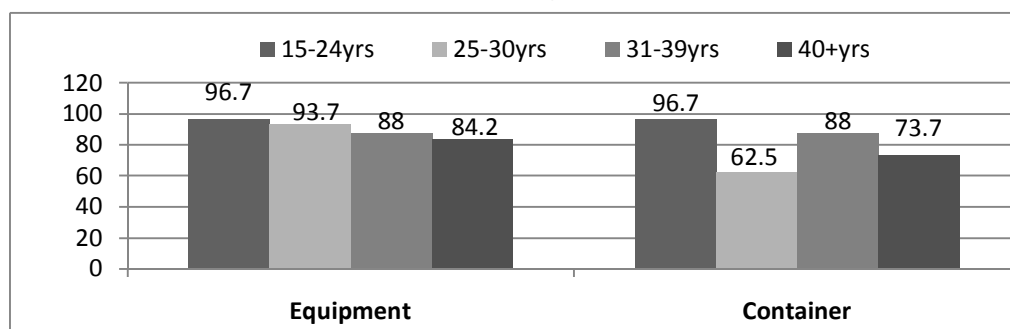
Figure 8: Percentage of IDUs Who Have Ever Used a Previously Used Needle/Syringe and Used a Previously Used Needle/Syringe in the Last Week by Age Groups.



⁶ Subutex (Buprenorphine) is used for the treatment of opioid addiction. It is increasingly considered to be an alternative to methadone in the maintenance and eventual detoxification of heroin addicts, and also in the treatment of cocaine addiction. These sublingual (under-the-tongue) buprenorphine tablets are crushed and injected.

- Of the IDUs who used a previously used needle/syringe, all of them attempted to consistently “clean” it, however, using just water.
- When a needle/syringe was shared, it was always with a drug “buddy.”
- A small percentage (16%) of IDUs used previously used needle/syringes that had been left in a “gathering place.”
- The vast majority (82%) of IDUs disposed of their needle/syringes in a garbage bin; however, a minority reported throwing theirs in the toilets or the river, with only a few reported throwing them on the ground.
- Sharing injection equipment (i.e., bottle, spoon, container or cotton/filter) is quite prevalent since 82 (or 91%) of 90 IDUs that had injected in the last week had done so with shared equipment. Sharing equipment was highest for the youngest age group (96.7%).

Figure 9: Percentage of IDUs Sharing Injection Equipment or Container in the Previous Week by Age Groups.

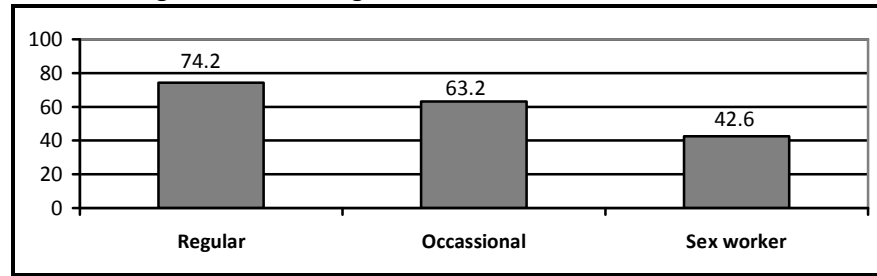


- Another high-risk practice, taking a drug solution from a shared container, is also high in that 75 (or 83%) of the 90 IDUs who had injected in the previous week had shared a container. Again, sharing a container was highest among the youngest age group.
- Effectively all (98.5%) IDUs reported that they could obtain new needle/syringes when they needed them—thus, availability and access is not a problem—and practically all IDUs obtain their needles/syringes from a pharmacy.

Sexual Behavior

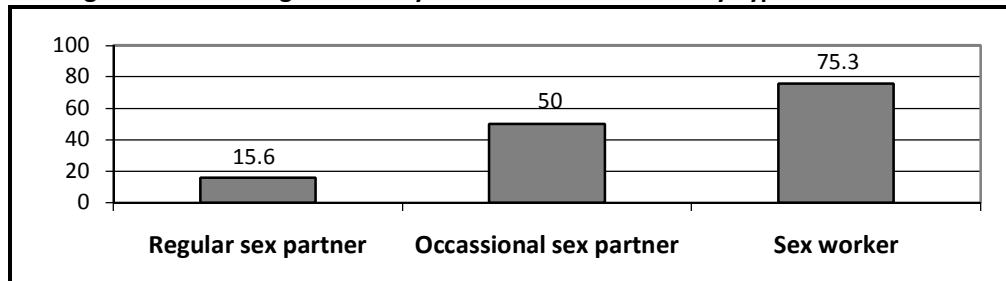
- All IDUs reported having sex at least once in their life. On average (median), their first sex occurred at 15 years of age.
- Virtually all (96% or 190 of 198) IDUs reported being sexually active in the previous 12 months. Two IDUs refused to answer this question.
- **Regular sex partner** (spouse, *girlfriend or lover*) – A clear majority (74% or 141 of 190) of IDUs reported having a regular sex partner in the last 12 months. Only 15% (or 22 of 141) of these IDUs though reported using a condom at last sex with their regular partner. Consistent (always) use of a condom was practiced by even fewer IDUs, only 3.5%. A very small percentage of these IDUs, 1.4%, reported that their regular sex partner injects drugs.
- **Occasional sex partner** (a sex partner for less than one year who is not a spouse, live-in partner or sex worker) – Almost two-thirds (63% or 120 of 190) of IDUs reported having sex with an occasional sex partner in the last 12 months. Of them, 50% (60) of IDUs used a condom at last sex with their occasional partner. Consistent use of a condom with an occasional sex partner was practiced by 30% (36 of 120) of these IDUs. The majority (54%) of these IDUs were uncertain if their occasional partner(s) injected drugs.

Figure 10: Percentage of IDUs with Various Sex Partners.



- **Sex worker (prostitute)** – About 2 of 5 (43% or 81 of 190) IDUs had had sex with a prostitute in the last 12 months, with 75% (61) of them using a condom at last sex with the sex workers. Slightly more than one-half (53% or 43 of 81) reported consistent (always) use of a condom with a prostitute. When asked, the vast majority (79% or 64) of these IDUs were uncertain if the prostitute injected drugs.

Figure 11: Percentage of IDUs by Condom Use at Last Sex by Type of Sex Partner.



HIV Knowledge and Voluntary Counseling & Testing

- Ninety-eight percent of IDUs in all studies were aware of HIV.
- When asked to correctly answer six key questions on HIV transmission, only 7% of IDUs could.
- The proportion of IDUs who stated that HIV testing was available in their community was 45% overall; however, 60% of IDUs 31-39 years of age stated it was.
- Almost all (96%) IDUs receive information about HIV/AIDS from T.V. The other major source of information about HIV/AIDS was magazines/journals.
- Approximately 1 in 5 (22%) of IDUs received information about condoms and 1 in 4 (24%) received written material on AIDS in the previous year.
- Very few (8%) of IDUs had heard or seen information about a needle exchange program. At the time of the study no needle exchange program was available in Kutaisi; thus, these few IDUs may be referring to such programs in the capital, Tbilisi.
- Slightly less than one-half (45%) of IDUs were aware of HIV testing in the community.
- Forty-five percent of IDUs were aware of HIV testing in the community; only 16% have had a test and received the results.

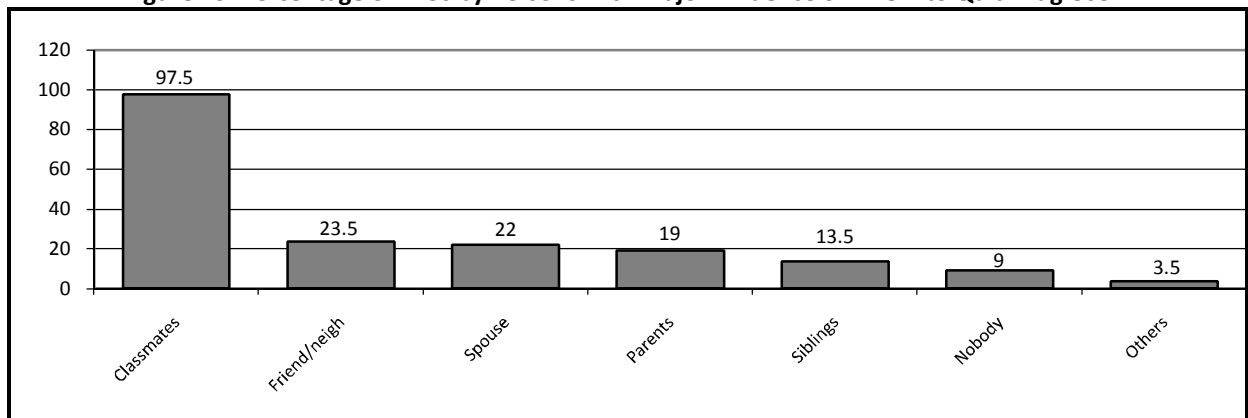
Figure 12: Percentage of IDUs Receiving Treatment.



Treatment and Social Influences

- The proportion of IDUs who have not received treatment, 81%, is high. For those few IDUs who did receive treatment (20% or 39 or 200), the most frequent type of treatment received was consultation at a health center.
- Overall, IDUs that received treatments received it in primarily two locations: at home (32%) or abroad (32%).

Figure 13: Percentage of IDUs by Persons with Major Influence on Them to Quit Drug Use.

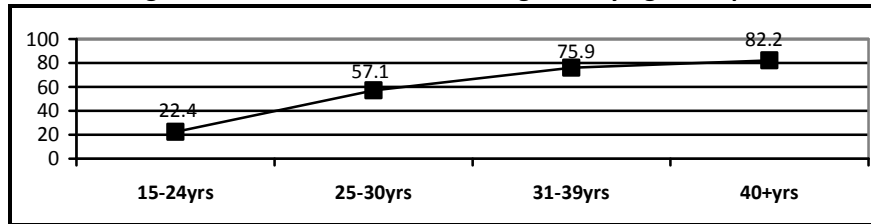


- Practically all (91%) of IDUs cite that there is no major social influence on them to keep using drugs. Conversely, 98% of IDUs mentioned that there is a major social influence on them to stop using and injecting drugs, which are school classmates.

Biomarker

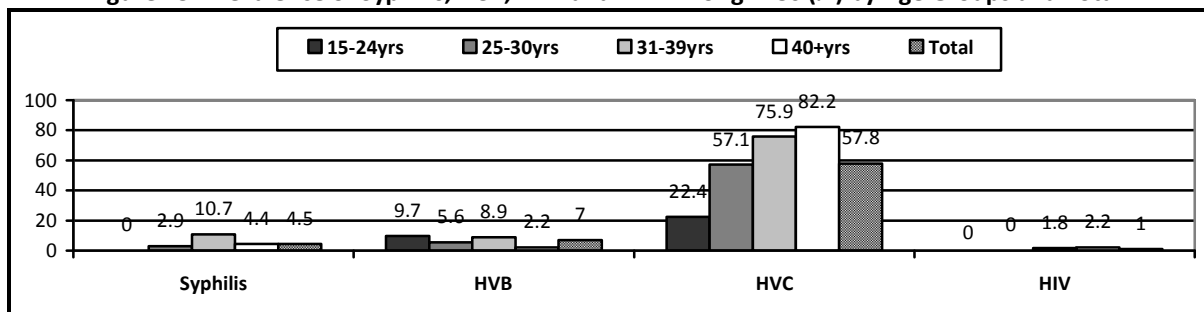
- The prevalence of syphilis was 4.5% overall and ranged from a low of 0% in those IDUs 15-24 years of age to a high of 10.7% for IDUs 31-39 years of age.
- Hepatitis C was confirmed in 111 (57.8%) of the 192 IDUs tested. The prevalence of Hepatitis C steadily increased by age, ranging from a low of 22% for IDUs 15-24 years of age to 82% for those IDUs 40+ years of age.

Figure 14: Prevalence of HCV Among IDUs by Age Groups.



- Hepatitis B was confirmed in 7% (14 or 199) IDUs. Conversely, the lowest prevalence of Hepatitis B, 2%, was confirmed in the oldest IDUs (40+ years) with the highest rate (9.7%) found in the youngest age group (15-24 years).
- The prevalence of HIV was 1% (or 2 of 197) IDUs tested. The two IDUs who tested positive for HIV, one was 31 years of age and the other was 42 years of age.

Figure 15: Prevalence of Syphilis, HCV, HBV and HIV Among IDUs (%) by Age Groups and Total.



Kutaisi IDU Portrait - Giorgi

In Kutaisi, there are IDUs of various ages and backgrounds that use different types of drugs and have different sexual behaviors. Moreover, they do not all have similar high-risk injecting practices. Nevertheless, despite the plurality of IDUs, it is important when possible to put a “face” on all the data and statistics presented. Thus, the IDU Portrait presented below is meant to illustrate a typical IDU in Kutaisi.

Giorgi is 31 years of age, married, and has a secondary education. He began using drugs after finishing school (17 years of age) and has been injecting drugs for the last fourteen years. He began using drugs because of curiosity and to “fit in” with his friends. Of the various drugs available on the streets, Giorgi prefers injecting Opium and intermittently, heroin or subutex. It is not uncommon for him to inject with needles and syringes used by others, especially his friends whom he trusts. When he does, he only uses water to clean the needle and syringe. Besides using shared needles, almost always he shares injecting equipment and commonly uses a drug mixture that has been prepared in a container shared by others.

Giorgi was 15 years of age when he first had sexual intercourse, and in the last year he has had sexual intercourse with four different partners. These sex partners include his regular sex partner, but also casual ones and sex workers. With sex workers, he most likely will have protected sex using a condom; however, he will less frequently use a condom with his casual partner, and rarely use a condom with his regular partner.

Generally, he is knowledgeable about HIV/AIDS, which he has heard about from watching TV. He is aware that HIV/AIDS is spread through sexual contact and that using a condom can prevent its transmission. Also, Giorgi is aware that having sex with only one faithful partner and switching to non-injecting drugs prevents the spread of the HIV virus. Despite knowing these prevention methods, he still uses previously used needles and syringes, shares injecting equipment and has unprotected sex with multiple partners, and continues injecting.

Giorgi is not sure that voluntary testing of HIV/AIDS is available in his community, he has not taken the test, nor has he sought treatment for his drug use. He does not believe that any one person has a major influence on him continuing his drug use; then again, he acknowledges that his classmates might have the greatest influence on him quitting.

Conclusions and Recommendations

1. This BSS is the fourth set of behavioral surveillance surveys undertaken simultaneously among FSWs, IDUs, and MSM samples in different regions of Georgia by the SHIP Project. Conducted repeatedly over time, the BSSs will provide reliable prevalence rates for HIV, STI, Hepatitis B and C, and behavioral risk trends among high-risk groups, which is important in establishing strategies, guiding interventions, and provide policymakers with evidence-based information on intervention successes as well as areas that need continued focus. Similar studies should be conducted at regular intervals to monitor and evaluate the HIV prevalence and risk behaviors of IDUs.
2. Multiple behaviors of the IDUs are putting them at risk for HIV infection, including shared drug solutions, needles, syringes and other injecting equipment; contamination of drug solution during distribution; and unprotected sex. Interventions must address all potential risk behaviors. The relative emphasis of messages promoting behavior change may be different for sub-populations of IDUs, such as occasional drug users versus the more regular drug users. For occasional drug users, interventions emphasizing discontinuation of injecting drug use might be a feasible, whereas addressing the norms and rituals around injecting drugs is important for more regular drug users.
3. Drug use and high-risk behaviors are often practiced in Kutaisi. There is a significant amount of sharing of injecting equipment and other paraphernalia reported by the respondents. The percentage of IDUs who had ever used a previously used needle/syringe was quite high, 54.5%, and almost 91% of IDUs reported that had injected in the last week had done so with shared equipment. Sharing equipment was highest for the youngest age group (96.7%). Another high-risk practice, taking a drug solution from a shared container, is also high (83%). Again, sharing a container was highest among the youngest age group. The education programs for IDUs should be continuously targeted for minimizing sharing injecting equipment among IDUs. IDUs who are not able to quit their injecting behaviors should be given knowledge about proper cleaning of used needles in order to minimize the spread of infection among the injectors.
4. In addition to high-risk drug using practices, there are several findings in the BSS that indicate high-risk behavior for sexual transmission of HIV. Almost one-half of IDUs had visited sex workers in the past year of which one-quarter reported unprotected sex when they did so. Unprotected sex was more common among youngest IDUs who were also more likely to share injection equipment and use solution from a shared container. Because of these dual HIV infection risks and their quick path to HIV infection, interventions should prioritize this young vulnerable group. Inadequate practice of consistent condom use with different sexual partners might increase HIV infection among their sex partners as they might bridge the infection. Therefore, IDUs should be encouraged towards correct and consistent condom use with different sexual partners through

education programs. The continuing reluctance to inconsistently use condoms needs to be addressed through social marketing and outreach to clients.

5. Behavior change communication interventions should be targeted at drug users and their families. Involving IDUs in the development of relevant messages and the distribution of these messages within their networks will increase the effectiveness of the message. While television was cited as the main source of HIV/AIDS information, television information campaigns on IDUs for the general public can increase stigmatization. Specific and explicit HIV prevention messages and materials for IDUs are best done at the interpersonal level through drug-user social networks.
6. Voluntary HIV counseling and testing (VCT) should be enhanced, with adequate pre- and post-test counseling. Pilot testing of rapid testing procedures for validity and client acceptability might increase the number of individuals getting HIV testing. Since access to VCT services is low, promoting the service and ensuring its availability should be a priority activity of the HIV prevention programs and creating awareness in the community about the location of VCT. VCT services should be made available through sites that provide other HIV prevention services to IDUs. Less than 16% of respondents in Kutaisi had had a voluntary HIV test and received the results. Often, IDUs at high-risk of HIV infection often do not want to know their status. VCT promotion and outreach needs to focus on individuals with the highest risk and provide them with convincing information of the benefits of knowing their HIV status and effective treatment.
7. The proportion of IDUs who have not received treatment for drug use is high (81%). For those few IDUs who did receive treatment (20%), the most frequent type of treatment received was consultation at a health center. One of the reasons cited for low treatment of drug use is the economic condition of IDUs. Therefore, provision should be made to make treatments economically and physically accessible to IDUs.
8. Hepatitis B and C are prevalent infections among IDUs. Hepatitis C was confirmed in almost two-thirds of the tested respondents. The prevalence of Hepatitis C steadily increased by age, ranging from a low of 22% for IDUs 15-24 years of age to 82% for those IDUs 40+ years of age. Educational material should also address issues related to these diseases. In addition, there should be complementary integration of efforts to prevent the spread of HIV and Hepatitis B and C, with, at a minimum, some cross training of personnel on transmission issues, counseling issues and referral network lists. Hepatitis B and C are well known by the IDU community, and linking HIV to the same risks of transmission will enhance prevention efforts.
9. IEC activities should focus on increasing IDUs' knowledge of HIV/AIDS prevention and control, as well as correcting common misconceptions. Equipping the IDUs with correct information would be the first step in paving the way to adoption of positive behaviors.
10. In order to create a more supportive environment for risk reduction, policy and legislative concerns should be addressed. In the short-term, public health officials and NGOs should negotiate with local authorities for a more pragmatic and flexible application of laws and regulations. This would include, for example, a dramatic decrease in the risk of arrest for IDUs if they are found carrying a needle, or to provide "free passage" for outreach workers and peer educators. In parallel, there should be a review of existing laws and regulations that impede effective implementation of HIV prevention strategies.
11. Preventive interventions must be addressed to the general public in order to raise their awareness on HIV transmission and associated risks.

Appendix of Data Tables

Table 2: Area coverage of the Kutaisi, Georgia, behavioral surveillance survey (BSS).

Study	2007
Location	Kutaisi
Date of interviews	8-13 October
Location of interview (n)	
At organizations office	100% (200)
At home	0.0% (0)
Recruitment (n)	
Seeds	6
RDS method	170
Volunteer (from word of mouth)	24
Rejection rate	
Total recruited or volunteered	240
Total rejected	40
Total completed	200
Blood sample	199

Table 3: Demographic characteristics of IDU study participants in Kutaisi.

Characteristics Year (n)	Males 2007 (n=200)
Age Mean Age (years) Median Age (years)	31.7 yrs (200) 31.0 yrs (200)
Age Groups <20yrs 20 – 29 yrs 30 – 39 yrs 40 – 49 yrs 50+ yrs	7.5% (15) 38.5% (77) 31.0% (62) 19.0% (38) 4.0% (8)
Ethnicity Georgian Armenian Russian Other	99.0% (198) 0.0% (0) 2.0% (2) 0.0% (0)
Level of Education None Primary Secondary/vocational Incomplete higher Higher No response	0.0% (0) 0.0% (0) 62.5% (125) 7.0% (14) 30.0% (60) 0.5% (1)
Internally Displaced Person Yes No No response	3.0% (6) 97.0% (194) 0.0% (0)
Present living place Kutaisi (yrs lived in Kutaisi) Another town/city in Georgia Russia (Moscow)	100% (200) mean= 9.1 yrs median= 6.0 yrs 0.0% (0) 0.0% (0)
Within the last 12 months, have you left Kutaisi for more than one month? Yes No No response	42.0% (84) 57.5% (115) 0.5% (1)
Have you ever been detained in administrative sentence because of your drug use? Yes No	30.5% (61) 69.5% (139)
Have you ever been imprisoned before trial because of your drug use? Yes No	23.0% (46) 77.0% (154)
Have you ever been imprisoned because of your drug use? Yes No	9.5% (19) 90.5% (181)

Table 4: Living arrangements by marital status of male IDUs.

Marital Status	Never married	Married	Divorced/separated	Widower
Percentage (n)	46.5% (93)	49.0% (98)	4.5% (9)	0.0% (0)
Mean age (in yrs)	26.7 yrs	36.4 yrs	33.0 yrs	---
Age at marriage (yrs)				
Mean	---	23.9 (96)	21.1 (8)	---
Median	---	22.0 (96)	21.0 (8)	---
With whom do you live now?				
With spouse/a partner	1.1% (1)	85.7% (84)	0.0% (0)	---
Married, with another female	0.0% (0)	0.0% (0)	0.0% (0)	---
Married not living with spouse but another female	0.0% (0)	0.0% (0)	0.0% (0)	---
Alone	10.8% (10)	4.1% (4)	66.7% (6)	---
Living with parents	84.9% (79)	7.1% (7)	33.3% (3)	---
Other	3.2% (3)	3.1% (3)	0.0% (0)	---
Refused to answer	0.0% (0)	0.0% (0)	0.0% (0)	---

Table 5: Drug use.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Mean yrs using drugs	14.4 (200)	4.8 (62)	19.5 (36)	16.7 (56)	27.4 (46)
Median yrs using drugs	14.0 (200)	4.0 (62)	11.0 (36)	17.0 (56)	28.5 (46)
Standard Deviation	9.4	2.6	3.2	4.0	5.9
Age at first drug use					
<15 yrs	16.5% (33)	22.6% (14)	13.9% (5)	7.1% (4)	21.7% (10)
15 – 19 yrs	66.0% (132)	72.6% (45)	69.4% (25)	69.6% (39)	50.0% (23)
20 – 24 yrs	13.0% (26)	4.8% (3)	13.9% (5)	16.1% (9)	19.6% (9)
25+ yrs	4.5% (9)	---	2.8% (1)	7.1% (4)	8.7% (4)
Mean yrs injecting drugs	8.5 (200)	2.2 (62)	5.8 (36)	10.0 (56)	17.1 (46)
Median yrs injecting drugs	6.0 (200)	1.8 (62)	5.0 (36)	10.0 (56)	16.5 (46)
Standard Deviation	7.6	1.5	3.4	5.9	8.0
Age at first injecting (%)					
<15 yrs	1.0% (2)	1.6% (1)	0.0% (0)	0.0% (0)	2.2% (1)
15 – 19 yrs	33.0% (66)	61.3% (38)	30.6% (11)	19.6% (11)	13.0% (6)
20 – 24 yrs	30.5% (61)	37.1% (23)	41.7% (15)	26.8% (15)	17.4% (8)
25+ yrs	35.5% (71)	---	27.8% (10)	53.6% (30)	67.4% (31)
% injected in the last week					
Yes	45.5% (91/200)	50.0% (31/62)	44.4% (16/36)	44.6% (25/56)	41.3% (19/46)
No	54.5% (109/200)	50.0% (31/62)	55.6% (20/36)	55.4% (31/56)	58.7% (27/46)
If yes, # of drugs injected last week:	(91)	(31)	(16)	(25)	(19)
1	63.7% (58/91)	71.0% (22/31)	75.0% (12/16)	56.0% (14/25)	52.6% (10/19)
2	29.7% (27/91)	25.8% (8/31)	6.3% (1/16)	36.0% (9/25)	47.4% (9/19)
3	4.4% (4/91)	3.2% (1/31)	12.5% (2/16)	4.0% (1/25)	0.0% (0/19)
4	2.2% (2/91)	0.0% (0/31)	6.3% (1/16)	4.0% (1/25)	0.0% (0/19)
Mean	1.5	1.3	1.5	1.6	1.5
Member of a regular injecting group					
Yes	38.0% (76)	48.4% (30)	41.7% (15)	35.7% (20)	23.9% (11)
<i>Range of members</i>	2-15 (71)	2-15 (30)	2-6 (13)	2-6 (17)	3-5 (11)
<i>Mean # of members</i>	4 (71)	4.7 (30)	3.2 (13)	3.6 (17)	3.6 (11)
No	60.0% (120)	48.4% (30)	58.3% (21)	60.7% (34)	76.1% (35)
No response	2.0% (4)	3.2% (2)	0.0% (0)	3.6% (2)	0.0% (0)
Injected in other locations(city/town/country) in previous 12 months	59.3% (118/199)	58.1% (36/62)	72.2% (26/36)	65.5% (36/55)	43.5% (20/46)
Mean # locations (if yes)	(1.8)	(1.5)	(1.9)	(2.0)	(1.7)
<i>% of IDUs who injected outside Georgia</i>	26.6% (53/199)	27.4% (17/62)	27.8% (10/36)	29.1% (16/55)	21.7% (10/46)
Share needles/syringes in other locations	16.1% (19/118)	19.4% (7/36)	15.4% (4/26)	13.9% (5/36)	15.0% (3/20)
Allow someone else to use your needles/syringes in other locations	11.2% (13/116)	13.9% (5/36)	3.8% (1/26)	11.4% (4/35)	15.8% (3/19)

Table 6: Drugs used in the last week.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Used drugs last week					
Yes	49.5% (99/200)	54.8% (34/62)	52.8% (19/36)	48.2% (27/56)	41.3% (19/46)
Drug used in last week					
Marijuana	39.4% (39/99)	41.2% (14/34)	52.6% (10/19)	37.0% (10/27)	26.3% (5/19)
Opium	38.4% (38/99)	35.3% (12/34)	31.6% (6/19)	40.7% (11/27)	41.7% (9/19)
Heroin	25.3% (25/99)	17.6% (6/34)	15.8% (3/19)	40.7% (11/27)	26.3% (5/19)
Subutex	15.2% (15/99)	14.7% (5/34)	21.1% (4/19)	11.1% (3/27)	15.8% (3/19)
Antihistamine	7.1% (7/99)	5.9% (2/34)	10.5% (2/19)	7.4% (2/27)	5.3% (1/19)
Actifed	5.0% (5/99)	8.8% (3/34)	5.3% (1/19)	0.0% (0/27)	5.3% (1/19)
Antidepressants (Coaxial)	3.0% (3/99)	2.9% (1/34)	5.3% (1/19)	3.7% (1/27)	0.0% (0/19)
Venti	2.0% (2/99)	8.8% (3/34)	5.3% (1/19)	0.0% (0/27)	5.3% (1/19)
Morphine	2.0% (2/99)	2.9% (1/34)	0.0% (0/19)	3.7% (1/27)	0.0% (0/19)
Diasepam	2.0% (2/99)	0.0% (0/34)	0.0% (0/19)	3.7% (1/27)	5.3% (1/19)
Methadone	1.0% (1/99)	0.0% (0/34)	0.0% (0/19)	3.7% (1/27)	0.0% (0/19)
Cocaine	1.0% (1/99)	0.0% (0/34)	0.0% (0/19)	3.7% (1/27)	0.0% (0/19)
Poppy	1.0% (1/99)	2.9% (1/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Cyclodol	1.0% (1/99)	0.0% (0/34)	0.0% (0/19)	3.7% (1/27)	0.0% (0/19)
Tranquilizers	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Codeine	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Tramadol	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Barbiturates	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Caffeine	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Valium	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Ecstasy	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Inhalants	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Other opiates	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Buprenorphine <i>Subutex</i>	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Combination	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Other	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Amphetamine	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
LSD	0.0% (0/99)	0.0% (0/34)	0.0% (0/19)	0.0% (0/27)	0.0% (0/19)
Mean # of drugs used last week	1.5 (99)	1.4 (34)	1.6 (19)	1.6 (27)	1.4 (19)

Table 7: Drugs injected in the last week.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Injected drugs last week					
Yes	45.5% (91/200)	50.0% (31/62)	44.4% (16/36)	44.6% (25/56)	41.3% (19/46)
Drug injected last week					
Opium	46.2% (42/91)	41.9% (13/31)	50.0% (8/16)	44.0% (11/25)	52.6% (10/19)
Subutex	37.4% (34/91)	32.3% (10/31)	43.8% (7/16)	36.0% (9/25)	42.1% (8/19)
Heroin	30.8% (28/91)	19.4% (6/31)	25.0% (4/16)	52.0% (13/25)	26.3% (5/19)
Antihistamine	7.7% (7/91)	6.5% (2/31)	12.5% (2/16)	8.0% (2/25)	5.3% (1/19)
Actifed	5.5% (5/91)	9.7% (3/31)	0.0% (1/16)	0.0% (0/25)	10.5% (2/19)
Antidepressants (Coaxial)	3.3% (3/91)	3.2% (1/31)	6.3% (1/16)	4.0% (1/25)	0.0% (0/19)
Venti	2.2% (2/91)	3.2% (1/31)	0.0% (0/16)	0.0% (0/25)	5.3% (1/19)
Morphine	2.2% (2/91)	3.2% (1/31)	0.0% (0/16)	4.0% (1/25)	0.0% (0/19)
Methadone	1.1% (1/91)	0.0% (0/31)	0.0% (0/16)	4.0% (1/25)	0.0% (0/19)
Cocaine	1.1% (1/91)	0.0% (0/31)	0.0% (0/16)	4.0% (1/25)	0.0% (0/19)
Poppy	1.1% (1/91)	3.2% (1/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Cyclodol	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Marijuana	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Diasepam	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Tranquilizers	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Codeine	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Tramadol	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Barbiturates	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Caffeine	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Valium	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Ecstasy	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Inhalants	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Other opiates	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Buprenorphine <i>Subutex</i>	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Combination	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Other	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Amphetamine	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
LSD	0.0% (0/91)	0.0% (0/31)	0.0% (0/16)	0.0% (0/25)	0.0% (0/19)
Mean # of drugs injected last week	1.5 (91)	1.3 (31)	1.5 (16)	1.6 (25)	1.5 (19)

Table 8: Switched drugs in the last month.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Switched drugs in last month					
Yes	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
If yes, from which drug?					
Heroin	---	---	---	---	---
Opium	---	---	---	---	---
Codeine	---	---	---	---	---
Buprenorphine (<i>subutex</i>)	---	---	---	---	---
Methadone	---	---	---	---	---
Marijuana	---	---	---	---	---
Tramadol	---	---	---	---	---
Morphine	---	---	---	---	---
Ephedrine	---	---	---	---	---
Cocaine	---	---	---	---	---
Other	---	---	---	---	---
Refuse to answer	---	---	---	---	---
If yes, to which drug?					
Opium	---	---	---	---	---
Heroin	---	---	---	---	---
Buprenorphine (<i>subutex</i>)	---	---	---	---	---
Marijuana	---	---	---	---	---
Codeine	---	---	---	---	---
Methadone	---	---	---	---	---
Whatever is available	---	---	---	---	---
Morphine	---	---	---	---	---
Pervitine (homemade)	---	---	---	---	---
Ephedrine	---	---	---	---	---
Tramadol	---	---	---	---	---
Diazepam	---	---	---	---	---
Poppy	---	---	---	---	---
Other	---	---	---	---	---
Refuse to answer	---	---	---	---	---

Table 9: HIV/AIDS knowledge and testing.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Aware of HIV	97.5% (195/200)	96.8% (60/62)	100% (36/36)	96.4% (54/56)	97.8% (45/46)
Know Person with HIV/AIDS					
Yes	16.5% (33/200)	9.7% (6/62)	13.9% (5/36)	21.4% (12/56)	21.7% (10/46)
<i>Close friend or relative</i>	18.2% (6/33)	33.3 (2/6)	20.0% (1/5)	25.0% (3/12)	0.0% (0/10)
Key HIV/AIDS Knowledge					
Correct condom use	84.5% (169/200)	85.5% (53/62)	86.1% (31/36)	85.7% (48/56)	80.4% (37/46)
One faithful partner	74.5% (149/200)	66.1% (41/62)	77.8% (28/36)	80.4% (45/56)	76.1% (35/46)
Abstinence	53.5% (107/200)	46.8% (29/62)	55.6% (20/36)	55.4% (31/56)	58.7% (27/46)
Mosquito bites (no)	35.5% (71/200)	38.7% (24/62)	30.6% (11/36)	44.6% (25/56)	37.0% (17/46)
Meal-sharing (no)	51.5% (103/200)	25.8% (16/62)	19.4% (7/36)	39.3% (22/56)	32.6% (15/46)
Switching to non-injecting drugs	58.0% (116/200)	53.2% (33/62)	44.4% (16/36)	66.1% (37/56)	65.2% (30/46)
All Six Items Correct	6.5% (13/200)	1.6% (1/62)	13.9% (5/36)	1.8% (1/56)	13.0% (6/46)
More HIV/AIDS Knowledge					
Injecting w/used needle	98.0% (196/200)	98.4% (61/62)	97.2% (35/36)	100% (56/56)	95.7% (44/46)
Pregnant woman to fetus	89.0% (178/200)	82.3% (51/62)	94.4% (34/36)	91.1% (51/56)	91.3% (42/46)
Breastfeeding	52.0% (104/200)	48.4% (30/62)	50.0% (18/36)	55.4% (31/56)	54.3% (25/46)
HIV Testing in Community	44.5% (89/200)	46.8% (29/62)	33.3% (12/36)	58.9% (33/56)	32.6% (15/46)
Had Voluntary HIV Test and Received Results	15.5% (31/200)	14.5% (9/62)	22.2% (8/36)	19.6% (11/56)	6.5% (3/46)

Table 10: Sexual behavior and reported STIs.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Ever Had Sex (%)	100% (200/200)	100% (62/62)	100% (36/36)	100% (56/56)	100% (46/46)
Mean Age at 1st Sex (yrs)	15.7 (200)	15.3 (62)	15.0 (36)	15.8 (56)	16.5 (46)
Median Age at 1st Sex (yrs)	15.0 (200)	15.3 (62)	15.0 (36)	16.0 (56)	16.0 (46)
Sexually Active, Last 12 Months	96.0% (190/198) 2 missing	100% (62/62)	100% (35/35) 1 missing	96.4% (53/55) 1 missing	87.0% (40/46)
Regular sex partner					
Had Regular Sex Partner, 12 Mths.	74.2% (141/190)	53.2% (33/62)	80.0% (28/35)	86.8% (46/53)	85.0% (34/40)
Mean # regular sex partners, 12 Mths.	1.4 (143)	1.5 (33)	1.5 (28)	1.2 (46)	1.3 (34)
Median # regular sex partners, 12 Mths.	1.0 (143)	1.0 (33)	1.0 (28)	1.0 (46)	1.0 (34)
Sex worker (gave payment)					
Had sex worker partner, 12 Mths. (%)	42.6% (81/190)	62.9% (39/62)	51.4% (18/35)	35.9% (19/53)	12.5% (5/40)
Mean # sex work partners, 12 Mths.	4.9 (82)	5.0 (39)	5.8 (18)	4.7 (19)	1.6 (5)
Med. # sex work partners, 12 Mths.	3.0 (82)	4.0 (39)	3.0 (18)	3.0 (19)	1.0 (5)
Occasional sex partner					
Had occasional sex partner, 12 Mths.	63.2% (120/190)	74.2% (46/62)	74.3% (26/35)	50.9% (27/53)	52.5% (21/40)
Mean # occasional sex partners, 12 Mths.	3.8 (120)	4.2 (46)	4.4 (26)	2.9 (27)	3.5 (21)
Med. # occasional sex partners, 12 Mths.	3.0 (120)	3.0 (46)	3.0 (26)	2.0 (27)	2.0 (21)
Urethral discharge in last 12 months					
Yes	13.0% (26/200)	8.1% (5/62)	22.2% (8/36)	16.1% (9/56)	8.7% (4/46)
Genital ulcer in last 12 months					
Yes	3.0% (6/200)	1.6% (1/62)	5.6% (2/36)	1.8% (1/56)	4.3% (2/46)

Table 11: Condom use by total and age groups.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Ever use male condom	59.5% (119/200)	90.3% (56/62)	63.9% (23/36)	48.2% (27/56)	28.3% (13/46)
Regular sex partner					
Condom use at last sex with regular sex partner	15.6% (22/141)	27.3% (9/33)	14.3% (4/28)	8.7% (4/46)	14.7% (5/34)
Consistent condom use with regular sex partner, 12 months (n)					
Always	3.5% (5/141)	9.1% (3/33)	3.6% (1/28)	2.2% (1/46)	0.0% (0/34)
Almost always	7.1% (10/141)	12.1% (4/33)	10.7% (3/28)	4.3% (2/46)	2.9% (1/34)
Sometimes	13.5% (19/141)	21.2% (7/33)	10.7% (3/28)	6.5% (3/46)	17.6% (6/34)
Never	75.2% (106/141)	57.6% (19/33)	71.4% (20/28)	87.0% (40/46)	79.4% (27/34)
Don't know	0.7% (1/141)	0.0% (0/33)	3.6% (1/28)	0.0% (0/46)	0.0% (0/34)
Regular partner injects drugs:					
Yes	1.4% (2/141)	3.0% (1/33)	0.0% (0/28)	0.0% (0/46)	2.9% (1/34)
Don't know	1.4% (2/141)	3.0% (1/33)	0.0% (0/28)	0.0% (0/46)	2.9% (1/34)
Occasional sex partner					
Condom use at last sex with occasional sex partner	50.0% (60/120)	58.7% (27/46)	57.7% (15/26)	48.1% (13/27)	23.8% (5/21)
Consistent condom use with occasional sex partner, 12 months					
Always	30.0% (36/120)	28.3% (13/46)	38.5% (10/26)	33.3% (9/27)	19.0% (4/21)
Almost always	19.2% (23/120)	30.4% (14/46)	15.4% (4/26)	14.8% (4/27)	4.8% (1/21)
Sometimes	20.0% (24/120)	26.1% (12/46)	19.2% (5/26)	14.8% (4/27)	14.3% (3/21)
Never	30.8% (37/120)	15.2% (7/46)	26.9% (7/26)	37.0% (10/27)	61.9% (13/21)
Occasional sex partner injects drugs:					
Yes	1.7% (2/120)	0.0% (0/46)	3.8% (1/26)	3.7% (1/27)	0.0% (0/21)
Don't know	54.2% (65/120)	60.9% (28/46)	50.0% (13/26)	48.1% (13/27)	52.4% (11/21)
Sex worker (gave payment)					
Condom use at last sex with commercial sex partner	75.3% (61/81)	79.5% (31/39)	61.1% (11/18)	84.2% (16/19)	60.0% (3/5)
Consistent condom use with commercial sex partner, 12 months					
Always	53.1% (43/81)	56.4% (22/39)	44.4% (8/18)	57.9% (11/19)	40.0% (2/5)
Almost always	11.1% (9/81)	17.9% (7/39)	5.6% (1/18)	5.3% (1/19)	0.0% (0/5)
Sometimes	22.2% (18/81)	20.5% (8/39)	33.3% (7/18)	10.5% (2/19)	40.0% (2/5)
Never	12.3% (10/81)	5.1% (2/39)	16.7% (3/18)	21.1% (4/19)	20.0% (1/5)
No response	1.2% (1/81)	0.0% (0/39)	0.0% (0/18)	5.3% (1/19)	0.0% (0/5)
Commercial sex partner injects drugs:					
Yes	7.4% (6/81)	5.1% (2/39)	11.1% (2/18)	10.5% (2/19)	0.0% (0/5)
Don't know	79.0% (64/81)	82.1% (32/39)	77.8% (15/18)	73.7% (14/19)	80.0% (4/5)

Table 12: Needle/syringe sharing.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Ever used a previously used needle/syringe					
Yes	54.5% (109/200)	43.5% (27/62)	61.1% (22/36)	57.1% (32/56)	60.9% (28/46)
No	45.5% (91/200)	56.5% (35/62)	38.9% (14/36)	42.9% (24/56)	39.1% (18/46)
At last injection used previously used needle/syringe.					
Yes	6.4% (7/109)	7.4% (2/27)	4.5% (1/22)	6.3% (2/32)	7.1% (2/28)
No	93.6% (102/109)	92.6% (25/27)	95.5% (21/22)	93.8% (30/32)	92.9% (26/28)
Shared needle/syringe last week?					
Yes	3.6% (4/109)	0.0% (0/27)	4.5% (1/22)	3.1% (1/32)	7.2% (2/28)
No	44.0% (48/109)	63.0% (17/27)	36.4% (8/22)	34.4% (11/32)	42.9% (12/28)
No response	52.3% (57/109)	37.0% (10/27)	59.1% (13/22)	62.5% (20/32)	50.0% (14/28)
With whom did you share needle/syringe last week?					
Acquaintance/friend	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
A drug "buddy"	100% (4/4)	---	100% (1/1)	100% (1/1)	100% (2/2)
Stranger	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
Drug trafficker	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
Usual sex partner	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
Sex partner not know before	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
How often did you try to clean the used needle/syringe?					
Always	100% (4/4)	---	100% (1/1)	100% (1/1)	100% (2/2)
Almost always	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
Sometimes	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
Once	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
Never	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
Don't know	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/1)	0.0% (0/2)
No response	0.0% (0/4)	---	0.0% (0/1)	0.0% (0/4)	0.0% (0/2)
What was used to clean the needle/syringe?					
With only water (boiled or not)	94.7% (72/76)	88.9% (16/18)	100% (12/12)	91.3% (21/23)	100% (23/23)
Disinfecting solution	1.3% (1/76)	5.6% (1/18)	0.0% (0/12)	0.0% (0/23)	0.0% (0/23)
Water with soda	0.0% (0/76)	0.0% (0/18)	0.0% (0/12)	0.0% (0/23)	0.0% (0/23)
With match/fire	0.0% (0/76)	0.0% (0/18)	0.0% (0/12)	0.0% (0/23)	0.0% (0/23)
Other	4.0% (3/76)	5.6% (1/18)	0.0% (0/12)	8.7% (2/23)	0.0% (0/23)
In the past, have you used previously used needle/syringe left in a "gathering place"?					
Yes	15.5% (31/200)	14.6% (9/62)	13.9% (5/36)	14.3% (8/56)	19.6% (9/46)
Never	81.0% (162/200)	82.3% (51/62)	80.6% (29/36)	83.9% (47/56)	76.1% (35/46)
Don't know	1.0% (2/200)	0.0% (0/62)	0.0% (0/36)	1.8% (1/56)	2.2% (1/46)
Refuse to answer	2.5% (5/200)	3.2% (2/62)	5.6% (2/36)	0.0% (0/56)	2.2% (1/46)
If yes, how often:					
Always	0.0% (0/31)	0.0% (0/9)	0.0% (0/5)	0.0% (0/8)	0.0% (0/9)
Nearly always	9.7% (3/31)	0.0% (0/9)	0.0% (0/5)	0.0% (0/8)	33.3% (3/9)
Sometimes	67.7% (21/31)	44.4% (4/9)	80.0% (3/5)	100% (7/8)	55.6% (5/9)
Once	22.6% (7/31)	55.6% (4/9)	20.0% (2/5)	0.0% (0/8)	11.1% (1/9)

Table 13: Various injection sharing practices.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Injected drugs last week Yes	45.5% (91/200)	50.0% (31/62)	44.4% (16/36)	44.6% (25/56)	41.3% (19/46)
During the last week, used a syringe that had already been filled not in your presence. (1 missing case) Yes	34.4% (31/90)	33.3% (10/30)	43.8% (7/16)	36.0% (9/25)	26.3% (5/19)
No	65.6% (59/90)	66.7% (20/20)	56.3% (9/16)	64.0% (16/25)	73.7% (14/19)
During the last week, used a syringe that had been filled with a solution from a syringe already used by someone else. (1 missing case) Yes	2.2% (2/90)	0.0% (0/30)	0.0% (0/16)	4.0% (1/25)	5.3% (1/19)
No	97.8% (88/90)	100% (30/30)	100% (16/16)	96.0% (24/25)	94.7% (18/19)
Used shared bottle, spoon, boiling pan/glass/container, cotton/filter or water in the last week. (1 missing case) Yes	91.1% (82/90)	96.7% (29/30)	93.7% (15/16)	88.0% (22/25)	84.2% (16/19)
No	8.9% (8/90)	3.3% (1/30)	6.3% (1/16)	12.0% (3/25)	15.8% (3/19)
Did you take solution from a shared container in the last week? (1 missing case) Yes	83.3% (75/90)	96.7% (29/30)	62.5% (10/16)	88.0% (22/25)	73.7% (14/19)
No	16.7% (15/90)	3.3% (1/30)	37.5% (6/16)	12.0% (3/25)	26.3% (5/19)

Table 14: Availability and disposal of needles/syringes.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Can you get/buy new (unused) needles/syringes whenever you need them					
Yes	98.5% (197/200)	98.4% (61/62)	100% (36/36)	98.2% (55/56)	97.8% (45/46)
No	1.5% (3/200)	1.6% (1/62)	0.0% (0/36)	1.8% (1/56)	1.2% (1/46)
Where can you get/buy new (unused) needles/syringes					
Pharmacy	97.0% (194/200)	95.2% (59/62)	100% (36/36)	98.2% (55/56)	95.7% (44/46)
Other IDUs	15.5% (31/200)	11.3% (7/62)	13.9% (5/36)	21.4% (12/56)	15.2% (7/46)
Friends	14.0% (28/200)	14.5% (9/62)	11.1% (4/36)	14.3% (8/56)	15.2% (7/46)
Wholesale drug/salesperson	10.0% (20/200)	6.5% (4/62)	13.9% (5/36)	14.3% (8/56)	6.5% (3/46)
Family/relatives	7.0% (14/200)	6.5% (4/62)	5.6% (2/36)	10.7% (6/56)	4.3% (2/46)
Hospital	3.5% (7/200)	1.6% (1/62)	0.0% (0/36)	7.1% (4/56)	4.3% (2/46)
Medical staff	3.0% (6/200)	3.2% (2/62)	2.8% (1/36)	1.8% (1/56)	4.3% (2/46)
Sex partner	3.0% (6/200)	4.8% (3/62)	0.0% (0/36)	5.4% (3/56)	0.0% (0/46)
Bought in street	1.5% (3/200)	3.2% (2/62)	2.8% (1/36)	0.0% (0/56)	0.0% (0/46)
Shop/store	1.0% (2/200)	1.6% (1/62)	0.0% (0/36)	1.8% (1/56)	0.0% (0/46)
Drug trafficker	0.5% (1/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	2.2% (1/46)
Stolen	0.5% (1/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	2.2% (1/46)
Syringe exchange program	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
When you last threw away the used needle what did you do with it?					
Put into garbage bin	82.0% (164/200)	80.6%(50/62)	80.6%(29/36)	80.4%(45/56)	87.0%(40/46)
Dropped on the ground	3.5% (7/200)	1.6%(1/62)	2.8%(1/36)	7.1%(4/56)	2.2%(1/46)
Other (toilet, river, etc.)	12.5% (25/200)	16.1% (10/62)	13.9% (5/36)	10.7% (6/56)	8.7% (4/46)
No response	2.0% (4/200)	1.6% (1/62)	2.8% (1/36)	1.8% (1/56)	2.2% (1/46)

Table 15: Medical treatment.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Do you currently receive medical treatment, or have had treatment, because you are a drug user?					
Never taken treatment	80.5% (161/200)	95.2% (59/62)	80.6% (29/36)	69.6% (39/56)	73.9% (34/46)
Was in treatment but not now	19.0% (38/200)	4.8% (3/62)	19.4% (7/36)	28.6% (16/56)	26.1% (12/46)
Currently receiving medical treatment	0.5% (1/200)	0.0% (0/62)	0.0% (0/36)	1.8% (1/56)	0.0% (0/46)
Received treatment in past & currently under treatment	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
What kind of treatment or help have you received? (more than 1 response possible)					
	(39)	(3)	(7)	(17)	(12)
Consultations at a health center	51.3% (20/39)	66.6% (2/3)	28.6% (2/7)	52.9% (9/17)	58.3% (7/12)
Detoxification without drugs	15.4% (6/39)	0.0% (0/3)	28.6% (2/7)	11.8% (2/17)	16.7% (2/12)
Detoxification with other drugs	12.8% (5/39)	0.0% (0/3)	14.3% (1/7)	11.8% (2/17)	16.7% (2/12)
“Extreme need” without help	7.7% (3/39)	0.0% (0/3)	14.3% (1/7)	11.8% (2/17)	0.0% (0/12)
Self-treatment groups	7.7% (3/39)	33.3% (1/3)	0.0% (0/7)	0.0% (0/17)	16.6% (2/12)
“Extreme need” with help	5.1% (2/39)	0.0% (0/3)	0.0% (0/7)	5.9% (1/17)	8.3% (1/12)
Detoxification with methadone	0.0% (0/39)	0.0% (0/3)	0.0% (0/7)	0.0% (0/17)	0.0% (0/12)
Substitution with methadone	0.0% (0/39)	0.0% (0/3)	0.0% (0/7)	0.0% (0/17)	0.0% (0/12)
Psycho-social rehab center	0.0% (0/39)	0.0% (0/3)	0.0% (0/7)	0.0% (0/17)	0.0% (0/12)
Where did you take medical treatment?					
	(37)	1 missing		1 missing	
Home	32.4% (12/37)	100% (2/2)	42.9% (3/7)	18.8% (3/16)	33.3% (4/12)
Kutaisi	16.2% (6/37)	0.0% (0/2)	14.3% (1/7)	18.8% (3/16)	16.7% (2/12)
Tbilisi	18.9% (7/37)	0.0% (0/2)	14.3% (1/7)	12.5% (2/16)	33.3% (4/12)
Outside Georgia	32.4% (12/37)	0.0% (0/2)	28.6% (2/7)	50.0% (8/16)	16.7% (2/12)

Table 16: Sources of information about HIV/AIDS.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Sources of information about AIDS					
T.V.	95.5% (191/200)	96.8% (60/62)	97.2% (35/36)	92.9% (52/56)	95.7% (44/46)
Magazines/journals	71.0% (142/200)	61.3% (38/62)	63.9% (23/36)	83.9% (47/56)	73.9% (34/46)
Friends/relatives	40.5% (81/200)	48.4% (30/62)	30.6% (11/36)	48.2% (27/56)	28.3% (13/46)
Booklets, posters	36.5% (73/200)	41.9% (26/62)	38.9% (14/36)	37.5% (21/56)	26.1% (12/46)
Radio	28.0% (56/200)	30.6% (19/62)	11.1% (4/36)	26.8% (15/56)	39.1% (18/46)
Billboards/street advert	19.5% (39/200)	22.6% (14/62)	11.1% (4/36)	26.8% (15/56)	13.0% (6/46)
Healthcare providers	18.0% (36/200)	12.9% (8/62)	22.2% (8/36)	19.6% (11/56)	19.6% (9/46)
NGO representatives	11.5% (23/200)	16.1% (10/62)	8.3% (3/36)	10.7% (6/56)	8.7% (4/46)
School teachers	7.5% (15/200)	19.4% (12/62)	2.8% (1/36)	3.6% (2/56)	0.0% (0/46)
Training programs	5.0% (10/200)	9.7% (6/62)	2.8% (1/36)	1.8% (1/56)	4.3% (2/46)
Social workers	5.0% (10/200)	4.8% (3/62)	2.8% (1/36)	5.4% (3/56)	6.5% (3/46)
Workplace	3.0% (6/200)	1.6% (1/62)	0.0% (0/36)	5.4% (3/56)	4.3% (2/46)
Medical literature	1.0% (2/200)	0.0% (0/62)	2.8 (1/36)	1.8% (1/56)	0.0% (0/46)
Infected person	0.5% (1/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	2.2% (1/46)
Given information in last year on:					
Condoms	22.0% (44/200)	33.9% (21/62)	13.9% (5/36)	21.4% (12/56)	13.0% (6/46)
Written materials on AIDS	23.5% (47/200)	33.9% (21/62)	19.4% (7/36)	17.9% (10/56)	19.6% (9/46)
Consultation with medical professional	8.5% (17/200)	12.9% (8/62)	5.6% (2/36)	8.9% (5/56)	4.3% (2/46)
Sources for information about condoms					
T.V.	94.5% (189/200)	96.8% (60/62)	97.2% (35/36)	96.4% (54/56)	87.0% (40/46)
Magazines/journals	49.5% (99/200)	58.1% (36/62)	50.0% (18/36)	55.4% (31/56)	30.4% (14/46)
Drugstore	31.0% (62/200)	29.0% (18/62)	36.1% (13/36)	32.1% (18/56)	28.3% (13/46)
Friends/neighbors	26.5% (51/200)	41.9% (26/62)	22.2% (8/36)	23.2% (13/56)	8.7% (4/46)
Radio	21.5% (43/200)	33.9% (21/62)	13.9% (5/36)	17.9% (10/56)	15.2% (7/46)
Hospital	11.5% (23/200)	17.7% (11/62)	13.9% (5/36)	8.9% (5/56)	4.3% (2/46)
Health center	9.5% (19/200)	11.3% (7/62)	11.1% (4/36)	10.7% (6/56)	4.3% (2/46)
Street stands	8.5% (17/200)	8.1% (5/62)	11.1% (4/36)	8.9% (5/56)	6.5% (3/46)
NGOs	8.0% (16/200)	9.7% (6/62)	8.3% (3/36)	5.4% (3/56)	8.7% (4/46)
Billboards/notices	7.5% (15/200)	9.7% (6/62)	8.3% (3/36)	7.1% (4/56)	4.3% (2/46)
Medical personnel/volunteers	7.5% (15/200)	11.3% (7/62)	8.3% (3/36)	5.4% (3/56)	4.3% (2/46)
Trainings	4.0% (8/200)	8.1% (5/62)	2.8% (1/36)	3.6% (2/56)	0.0% (0/46)
Video shops	3.5% (7/200)	6.5% (4/62)	0.0% (0/36)	5.4% (3/56)	0.0% (0/46)
Social workers	1.5% (3/200)	1.6% (1/62)	0.0% (0/36)	1.8% (1/56)	2.2% (1/46)
Comic books	1.0% (2/200)	0.0% (0/62)	0.0% (0/36)	3.6% (2/56)	0.0% (0/46)
Heard/seen information about needle exchange program					
	7.5% (15/200)	4.8% (3/62)	11.1% (4/36)	8.9% (5/56)	6.5% (3/46)
Heard/seen information about similar programs					
	2.5% (5/200)	0.0% (0/62)	5.6% (2/36)	3.6% (2/56)	2.2% (1/46)
Two persons with major influence on IDU continuing drug use					
Nobody	90.5% (181/200)	85.5% (53/62)	91.7% (33/36)	92.9% (52/56)	97.1% (43/46)
IDU partner	9.0% (18/200)	12.9% (8/62)	8.3% (3/36)	7.1% (4/56)	6.5% (3/46)
Friend/neighbor	0.5% (1/200)	1.6% (1/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
School/classmates	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
Parents	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
Spouse	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
Siblings	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
My children	0.0% (0/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	0.0% (0/46)
Two persons with major influence on quitting drug use [multiple response]					
School/classmates	97.5% (195/200)	100% (62/62)	100% (36/36)	89.3% (50/56)	76.1% (35/46)
Friend/neighbor	23.5% (47/200)	40.3% (25/62)	11.1% (4/36)	16.1% (9/56)	19.6% (9/46)
Spouse	22.0% (44/200)	1.6% (1/62)	22.2% (8/36)	33.9% (19/56)	34.8% (16/46)
Parents	19.0% (38/200)	11.3% (7/62)	30.6% (11/36)	23.2% (13/56)	15.2% (7/46)
Siblings	13.5% (27/200)	12.9% (8/62)	16.7% (6/36)	14.3% (8/56)	10.9% (5/46)
Nobody	9.0% (18/200)	6.5% (4/62)	8.3% (3/36)	10.7% (6/56)	10.9% (5/46)
My children	2.0% (4/200)	0.0% (0/62)	0.0% (0/36)	0.0% (0/56)	8.7% (4/46)
Needle partner	1.5% (3/200)	0.0% (0/62)	0.0% (0/36)	1.8% (1/56)	4.3% (2/46)

Table 17: STI/HIV prevalence.

N	Total (200)	Age Groups			
		15-24 (n=62)	25-30 (n=36)	31-39 (n=56)	40+ (n=46)
Syphilis (RPR, TPHA with ELISA confirmation)	4.5% (9/198)	0.0% (0/62)	2.9% (1/35)	10.7% (6/56)	4.4% (2/45)
Hepatitis C	57.8% (111/192)	22.4% (13/58)	57.1% (20/35)	75.9% (41/54)	82.2% (37/45)
Hepatitis B	7.0% (14/199)	9.7% (6/62)	5.6% (2/36)	8.9% (5/56)	2.2% (1/45)
HIV (ELISA with Western Blot confirmation)	1.0% (2/197)	0.0% (0/61)	0.0% (0/35)	1.8% (1/56)	2.2% (1/45)

Methodology

The first Behavioral Surveillance Survey (BSS) among IDUs in Kutaisi was conducted between 8 October and 13 October of 2007 to establish baseline prevalence data on high-risk behaviors and STIs and HIV. These BSSs were approved by, and conducted in cooperation with, the Infectious Diseases, AIDS and Clinical Immunology Research Center (AIDS Center), which has been designated by the government as the primary HIV/AIDS research and treatment institution in Georgia. In addition, this study was approved by the Ethical Committee of HIV/AIDS Patients Support Foundation.

Ethical Issues

The survey investigators were cognizant of the fact that individuals participating in this study were at some risk for social harm should they be identified as part of the target group. This survey was designed to provide maximum protection for the participants, yet at the same time provide individual and community benefits. The following ethical issues were taken into consideration:

- Participation in this survey was voluntary. Participants were free to withdraw at any time and were informed that refusal or withdrawal would not affect services they would normally receive.
- No names were recorded. All documentation is anonymous, linked only by a study number.
- The staff engaged in the study was trained in discussing sensitive issues and protecting participants' confidentiality and human rights.
- All individuals identified with a sexually transmitted infection were offered counseling and referred to the Healthy Cabinet clinic for treatment.
- Recruitment of initial "seed" participants was done only by SHIP Partners who have been working with the target groups. Subsequent recruitment of participants was done by participants themselves.

Respondent Driven Sampling

Attempting to survey IDUs with traditional survey methods is problematic, since as a "hidden population" no sampling frame exists.⁷ Moreover, it is imperative to adhere to strict confidentiality and ensure anonymity. At the same time, to achieve valid and reliable results for the SHIP Project's activities, the methodology had to, as much as possible, provide an unbiased (random) and representative sample.

Currently, one of the most accepted methodologies to achieve a relatively unbiased sample with no sampling frame, while allowing for anonymity, is Respondent-Driven Sampling (RDS).⁸ RDS is based on the principle that members of a hidden population are best able to access their own peers, and if incentives are provided, they will recruit a diverse set of individuals.⁹ It utilizes a chain-referral method that produces a relatively independent sample of the initial subjects from which sampling begins. The method is modified with the introduction of an incentive system of secondary rewards for recruiting others into the study. Thus, as a result of

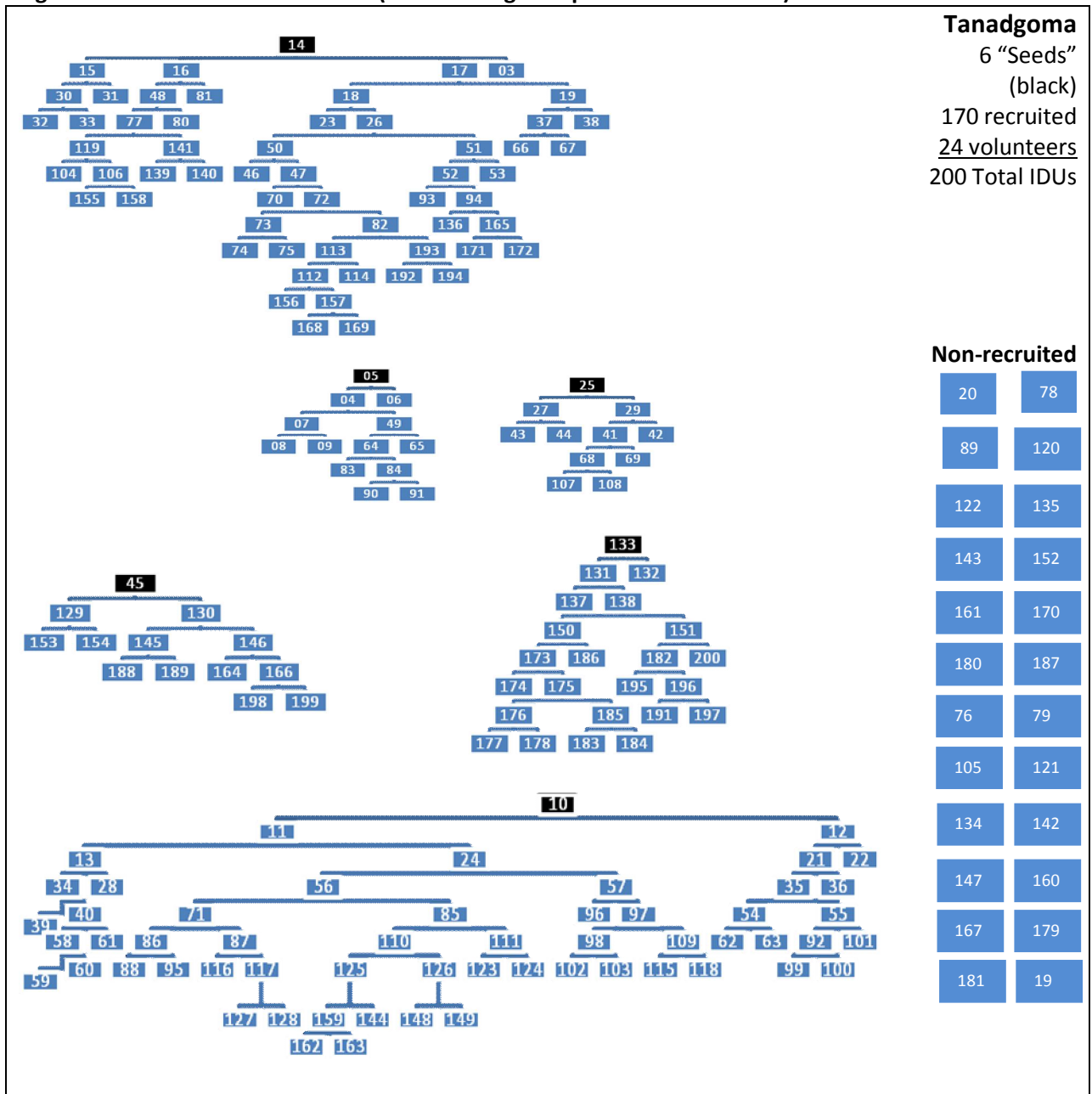
⁷ A sample frame is based on knowing the size, boundaries and distribution of the statistical universe.

⁸ "Respondent-driven sampling: A new approach to the study of hidden populations." *Social Problems*, Volume 44, Number 2, (May) 1997. Douglas D. Heckathorn.

⁹ "Extensions of Respondent-Driven Sampling: A New Approach to the Study of Injecting Drug Users Aged 18-25." *AIDS and Behavior*, Vol.6, No.1, March 2002.

the successive waves of recruitment, it does not matter whether the initial sample is randomly drawn.

Figure 16: IDU Recruitment Chains (dark rectangles represent the “seeds.”)



Data collection

- (1) Tanadgoma’s Kutaisi staff recruited 6 known male IDUs to serve as the “seeds.” In an attempt to diversify the IDUs recruited, each Partner selected “seed” IDUs from different injecting groups, as well as age groups, taking care to avoid selecting individuals from the same group who inject together;
- (2) These seeds were interviewed and then offered a financial incentive of 15 GEL to recruit their IDU peers to take the same interview they had just completed.¹⁰

¹⁰ The exchange rate at the time of the study was 1.60 GEL to 1 USD. Thus, each IDU received the equivalent of about \$9 USD.

- (3) Each IDU recruited was offered an incentive of 10 GEL to recruit up to two other IDUs. Participants were rewarded both for completing the interview and for recruiting his or her peers into the research. These incentives provided a mechanism that created an expanding system of chain-referrals in which subjects recruited more participants, who recruited still more participants, and so forth, forming successive waves of recruitment. Each IDU was limited to two recruits in order to ensure that a broad array of subjects would have an opportunity to recruit, thereby preventing the emergence of semi-professional recruiters, and to preclude turf battles over recruitment rights;
- (4) To ensure that authentic IDUs were recruited and not just individuals wanting some money, a verification procedure was followed in this survey. The verification procedure, conducted by an experienced addictionologist, included a preliminary informal discussion regarding street names of drugs and prices, familiarity with drug preparation and injection techniques, and finally a visual inspection for recent “track” marks. If the interviewer was satisfied with the recruit’s responses, the interview proceeded;
- (5) Subject duplication was overcome by a) having the interviewers record the subject’s gender, age, ethnicity, and physical characteristics, such as height, weight, scars, tattoos, and some biometric measures and b) having the same interviewers conduct all the interviews;
- (6) In Kutaisi, 2 “seeds” accomplished 4 waves, one “seed” accomplished 5 waves, 1 “seed” accomplished 7 waves, one “seed” accomplished 9 waves, and 1 “seed” accomplished 12 waves of recruitment.
- (7) For Batumi, as well as for Kutaisi the minimum sample size was 200 IDUs.

Interviewing occurred in 8-13 October 2007 in Kutaisi. A total number of seed-IDUs recruited was 6. From the 6 seed-IDUs a total of the 210 IDUs were recruited, with an additional 24 IDUs coming independently. However, of the 210 IDUs, 40 persons were not interviewed because they could not be verified as IDUs. Therefore, a total of 200 IDUs (6 “seeds”+ 24 volunteers + 170 recruited IDUs who were verified) were interviewed.

In addition, a tracking system was established during the survey using only identification numbers that provided a way to link the recruiting IDU with the IDUs he had recruited. For example, each IDU was given a coupon with their identification number in sequence, according to when they were interviewed. Any additional IDUs that were recruited by an IDU already interviewed (up to two) were required to accompany their recruiter to the interview site. Identification numbers were given to these recruited IDUs, and these identification numbers were then linked to the recruiter’s identification number.

This linking of IDU recruiter and the recruited IDUs provided additional information on how well the RDS methodology encouraged IDUs to recruit other IDUs who are dissimilar to them either in age, injecting group, or type of drug used. Theoretically, as the number of waves of recruitment increases, the more diverse the IDUs will be from the initial “seeds” recruiters and thus, the more “representative” the sample. Heckathorn, the leading expert in RDS methodology, states that the number of waves necessary to achieve a diverse set of IDUs is less than six.¹¹

¹¹ “Respondent-driven sampling: A new approach to the study of hidden populations.” Heckathorn, Douglas D.. *Social Problems*, Volume 44, Number 2, (May) 1997.

The survey instrument used in this survey was a behavior questionnaire for IDUs provided in the manual, *Behavioral Surveillance Surveys: Guidelines for Repeated Behavioral Surveys in Populations at Risk for HIV*, published by Family Health International (FHI). This instrument was used for the study of risky sexual and related behavior among IDUs in several countries. This questionnaire is the same one that had been used in previous studies in Tbilisi and Batumi, which had gone through extensive reviewing, pre-testing, and modifications to fit the Georgian context.¹²

Interviewing of IDUs was conducted in Georgian and took, on average, 40 minutes to complete. In addition to answering the questionnaire, IDUs were asked to voluntarily provide a blood sample, on site, immediately following the interview. The sample was tested for syphilis serology and HIV infection. Considering that Hepatitis B and C are most common blood-borne infections among injecting drug users, it was decided to add HCV and HBV testing to the survey biomarker component to produce reliable and valuable statistical information on the spread of viral hepatitis among IDUs. Of the 200 IDUs in this study, none of participants refused to provide blood sample; however, 1 blood specimen could not be withdrawn due to technical problems.

The withdrawal of blood took place in the Mobile Laboratory that is operational in Tbilisi under the Oxfam/Novib funded project, "HIV/AIDS, Gender and Education." In agreement with Oxfam/Novib the Mobile Laboratory was deployed to Kutaisi during this survey.

The blood test was anonymous-linked. Each IDU that volunteered to provide a blood specimen was given an identification number, which was recorded on the blood tube and the questionnaire. In addition, the IDU was given a card with the identification number and with the organization's telephone number and address.

Blood specimens were sent to the Laboratory of Serology and Virology of the AIDS Center in Tbilisi for testing and the results were reported back to the organization (see biomarker section below for more details). The IDUs were asked to return with their identification card in order to receive their results.

All (100%) of the interviews occurred in Tanadgoma's branch office in Kutaisi.

Biomarker Testing

The biomarker component of this study involved the analysis of blood specimens at the Laboratory of Serology and Virology of the AIDS Center in Tbilisi.

HIV testing: HIV antibody testing was performed using a three-level enzyme-linked immunosorbent assay (ELISA) testing strategy. If a sample was reactive in the first ELISA (Genescreen Plus HIV Ag-AB, Bio-rad) test, the sample was retested two more times using another kit of ELISA. Samples were considered HIV antibody positive if they were reactive in at least two out of three tests. Any sample non-reactive to the first test was considered as HIV-antibody negative. HIV-antibody positive samples were tested with Western Blot (HIV blot, Genelabs) as the confirmatory test for HIV.

¹² "Characteristics, High-Risk Behaviors and Knowledge of STI/HIV/AIDS, and Prevalence of HIV, Syphilis and Hepatitis Among Injecting Drug Users in Tbilisi: 2002 – 2004." Dershem, L. et al. Report to SHIP Project and USAID. September 2007.

Syphilis testing: Serum samples were tested also for syphilis. Screening was performed using rapid plasma regain (RPR, Biosystem) test. Positive samples were retested using Treponema pallidum hemagglutination assay (TPHA, Biosystem). Syphilis IgG test (Orgenics) was used for confirmation of syphilis-antibody positive samples.

HCV testing: Screening for HCV antibodies was performed using 3rd generation ELISA (ORTHO® HCV 3.0). Positive samples (serum) were investigated further. For confirmation purpose Western Blot assay was used (HCV BLOT 3.0 Western Blot Assay – Genelabs® Diagnostics).

HBV testing: HBsAg ELISA (HBsAg II Step [Orgenics]) was used for screening. Positive serum samples were investigated further. For this reason HBsAg Confirmation test (Orgenics) was used. This test in parallel with standard immunoenzymatic method for the detection of HBsAg employs a neutralizing polyclonal antibody, able to block any specific reactivity if present in the sample.

Data Entry and Analysis

Bemoni Public Union (BPU) contracted ACT-Research, located in Tbilisi, to develop the BSS databases using the Statistical Package for the Social Sciences (SPSS, version 12) software program. At the completion of the interviewing process, ACT-Research created a database matching the questionnaire that included variable names, variable descriptions and value labels. Two experienced individuals made the data entry, one who read the completed interview form and the other entering the data.

Once the SPSS database was completed, a random check was made of 5% of the completed interview forms. In addition, a frequency was run on all variables to examine values, labels and frequencies. The “cleaned” database was submitted to SC’S Georgian country office data analysis.

SC’s Monitoring & Evaluation Advisor, Larry Dershem, analyzed the data. Percentages, means and medians were calculated to assess prevalence of high-risk behavior among IDUs.

IDU Questionnaire (English)

Questionnaire Identification Number:
 Questionnaire is Coded as:
 Questionnaire is Word Processed by:

Behavior and Biomarker Study Among Male Injecting Drug Users
 (M-IDUs) in Georgia
 Kutaisi 2007

Partner Organization:

Introduction: "My name is _____. An American and a Georgian organizations implement a joint project titled "AIDS and Sexually Transmitted Diseases Prevention in Georgia". The project is funded by the United States Agency for International Development (USAID). This survey is aimed at exploring the existing situation. The questionnaire has been designed by our counterparts from the US. Has anybody taken an interview over the last five weeks for this study? If somebody has already taken an interview from the person you are talking to over the BSS period, don't take another one. Tell him/her, that you cannot re-interview him/her. Thank the person and finish conversation. If nobody has taken an interview from the person in question, continue as follows:

Confidentiality and consent: "I am planning to ask you several questions that are hard to answer by some people. Your responses will be kept confidential. The questionnaire will not show your name and will never be referred to in connection with the information that you will share with us. You are not obliged to answer all my questions, and whenever you wish you may refuse to answer my questions. You may finish the interview at any time per you desire. However, we would love to note that your answers would help us better understand what people think, say and do in view of certain types of behavior. We would highly appreciate your input to this study.

Interviewer's Code: _____
 (Interviewer's signature certifying that the respondent has verbally agreed to the interview)

	Respondent 1	Respondent 2	Respondent 3
Date			
Interviewer			
Result			

Result Codes: Completed – 1; Partially Completed – 2; Previously Interviewed – 3; Interview Withheld – 4;
 Other – 5

Date and time of interview: /_____/date/____/hour/____/minute/

Signature: _____ Date _____

Q1. City: 1. Kutaisi

Q2. Respondent ID #

Q3. How did you establish a contact with the respondent?

1. He is a patient of the counterpart organization
 2. He has been picked out on a snowball basis
- Other _____ (please specify)

Q4. Place of the interview:

1. At office

A. Respondent's Personal Data

A1. Where do you live presently?

1. Kutaisi
 2. Samtredia
 3. Tskaltubo
- Other _____ (please indicate)
Neighborhood _____ (please indicate)

A2. How long have you been living in this place? (Please write down only the number of years, or months, or both; e.g. 2 years and 6 months)

- 1.1 / _____ /years/ 1.2 / _____ /months/
2. Always (since birth)
- Other (please indicate) _____

A3. Are you an IDP or refugee?

1. Yes
2. No
9. No response

A4. Within the last 12 months have you left the city or the current place of residence for more than a month?

1. Yes
2. No
8. Don't know
9. No response

A5. How old are you?

/ ____ / ____ / years old

A6. Level of Education completed? (please read out the options)

1. None
2. Primary
3. Secondary or vocational school
4. Incomplete Higher
5. Higher
9. No response

A7. Which ethnic group do you belong to?

1. Georgian
2. Russian
3. Armenian
4. Azeri
5. Afkhazian
- Other _____ (please indicate)
9. No response

A8. What is your marital status? (please read out the options)

1. Married
2. Divorced/Separated for ever
3. Widower
4. Has never been married (**go to the question A10**)
- Other (please indicate) _____

A9. How old were you when you got married for the first time?

Please indicate the exact age: _____

A10. With whom do you live now? (Interviewer: do not read out the options loud; choose the option below relevant to the response)

1. With a spouse
2. With spouse and parents
3. Married, but live with another female partner
4. Widower, but live with a female partner

5. Not married, live with a female partner
 6. Widower, don't have a female partner
 7. Married, don't live with my wife or a partner
 8. Single
 9. Not married, live with my family (parents)
 10. Refused to answer
- Other: _____ (please indicate)

A11. 1) Have you ever been detained in administrative sentence because of your drug use?

2) Have you ever been imprisoned before trial because of your drug use?

3) Have you ever been imprisoned because of your drug use?

(Please read out the options and match the responses with the relevant options in the table below)

	Yes	No	No response
1. Administrative sentence	1	2	9
2. Imprisoned before trial	1	2	9
3. Imprisoned	1	2	9

A12. Within the last month how often have you consumed alcoholic beverages, such as beer, wine, vodka, other? (please read out the options)

1. Every day
 2. More than once a week
 3. Less than once a week
 4. Never (don't read out loud)
- Other _____ (please indicate)
9. No response

B. Drug Usage

B1. How old were you when you start using drugs? I only mean any kind of drugs used for non-medical purposes, including those to be swallowed, smoked and/or injected

_____ years old (please indicate an exact age)

B2. How long have you been injecting drugs? No matter whether you do it yourself or somebody else makes injections for you. (Please indicate only number of years, or months, or both)

1.1 / _____ years/ 1.2 _____ months/

Other _____ (please indicate)

B3. How old were you when you took the first drug injection?

_____ years old (please indicate an exact age)

B4. Within the last 6 months, when you inject drugs, do you inject repeatedly with many of the IDUs, that is, you are a regular injecting group?

Yes	1	Continue
No	2	
Don't know	8	
No response	9	

B4.1 How many IDUs are members of your regular injecting group?

_____ (please indicate an exact number)

B5. How many IDUs do you know in Kutaisi?

_____ (please indicate an exact number)

B6. Which drugs have you used within the last week and which one did you inject? (Do not read out the options loud; choose the option below relevant to the response; several responses can be acceptable)

	Consumed Last Week		Injected Last Week	
	Yes	No	Yes	No
1. Barbiturates	1	2	1	2

2. Tranquilizes	1	2	1	2
3. Antidepressants (Coaxial)	1	2	1	2
4. Inhalants	1	2	1	2
5. Codeine	1	2	1	2
6. Heroin	1	2	1	2
7. Opium	1	2	1	2
8. Poppy	1	2	1	2
9. Methadone	1	2	1	2
10. Morphine	1	2	1	2
11. Tramadol	1	2	1	2
12. Other Opiates _____ (please define)	1	2	1	2
13. Cocaine	1	2	1	2
14. Amphetamine	1	2	1	2
15. Cofein	1	2	1	2
16. Diasepam	1	2	1	2
17. LSD	1	2	1	2
18. Ephedrone (Vinti)	1	2	1	2
19. Marijuana	1	2	1	2
20. Cyclodol	1	2	1	2
21. Ecstasies	1	2	1	2
22. Subutex (buprenorphine)	1	2	1	2
23. Poppy Seeds	1	2	1	2
24. Antihystaminum _____ (please specify)	1	2	1	2
25. Combination _____ (please specify)	1	2	1	2
26. Other _____ (please specify)	1	2	1	2
Don't know/don't remember	88		88	
No response	99		99	

B7. Which drugs have you used within the last 3 months and which one did you inject? (Do not read out the options loud; choose the option below relevant to the response; several responses can be acceptable)

	Consumed Last Week		Injected Last Week	
	Yes	No	Yes	No
1. Barbiturates	1	2	1	2
2. Tranquilizes	1	2	1	2
3. Antidepressants (Coaxial)	1	2	1	2
4. Inhalants	1	2	1	2
5. Codeine	1	2	1	2
6. Heroin	1	2	1	2
7. Opium	1	2	1	2
8. Poppy	1	2	1	2
9. Methadone	1	2	1	2
10. Morphine	1	2	1	2
11. Tramadol	1	2	1	2
12. Other Opiates _____ (please define)	1	2	1	2
13. Cocaine	1	2	1	2
14. Amphetamine	1	2	1	2
15. Cofein	1	2	1	2
16. Diasepam	1	2	1	2
17. LSD	1	2	1	2
18. Ephedrone (Vinti)	1	2	1	2
19. Marijuana	1	2	1	2
20. Cyclodol	1	2	1	2
21. Ecstasies	1	2	1	2
22. Subutex (buprenorphine)	1	2	1	2
23. Poppy Seeds	1	2	1	2

24. Antihistaminum _____ (please specify)	1	2	1	2
25. Combination _____ (please specify)	1	2	1	2
26. Other _____ (please specify)	1	2	1	2
Don't know/don't remember	88		88	
No response	99		99	

B8. Within the last month did you switch from one drug to another? By switch, I mean if you permanently switched from injecting drug to non-injecting drug.

Yes	1	Continue
No	2	Go to question B9

B8.1 If yes, from which _____ to which? _____ (please indicate)

B8.2 Why? _____ (please indicate)

B9. When did you use drugs last?

1. _____ months ago

2. _____ days ago

Other _____

8. Don't remember (go to B11)

9. Refused to answer (go to B11)

B10. How many times did you take drugs that day?

1. _____ times

8. Don't remember

9. Refused to answer

B11. (If you did not take the last shot today or yesterday) Can you tell me why didn't you take drugs today or yesterday? (please read out the options below and match them with the responses) **Maybe you had several reasons; if it is so, please indicate all.** After the answer, please ask once more **Besides these reasons, were there any other reasons?** (Several responses are acceptable)

1. Had no money

2. Had no desire

3. Couldn't get drugs

4. I'm receiving treatment

Other _____ (please indicate)

9. No response (don't read out)

B12. (Ask only those respondents who indicate drug use for the last week in the question B6) Within the last week how often did you inject drugs? (please read out the options loud)

1. Once a week

2. Two to three times a week

3. Four to six times a week

4. Once a day

5. Two to three times a day

6. Four or more times a day

7. Have not taken (don't read out)

8. Don't know (don't read out)

9. No response (don't read out).

C. Needle Sharing Habit

C1. Have you ever used a needle/syringe that was used by somebody else before?

Yes	1	Continue
No	2	Go to C4
Don't know	8	Continue
No response	9	

C2. When you last injected did you use a needle/syringe that was used by somebody else before or not?

Yes	1	<i>Continue</i>
No	2	<i>Go to C3.2</i>
Don't know	8	<i>Continue</i>
No response	9	

C3.1. When you last injected the drugs, did you use a needle/syringe that was left at a place of gathering by somebody else (e.g. where the drugs were prepared, the dedicated flat, or elsewhere)?

- 1. Yes
- 2. No
- 8. Don't know
- 9. No response

C3.2 If many people were there, how do you think, how many people used the shared needle?

- 1. _____ (please specify the number)
- 77. I was alone
- 88. Don't know
- 99. No response

C3.3 In the instance before the last usage, did you use a needle/syringe that had been used by anybody else before?

Yes	1	<i>Continue</i>
No	2	<i>Go to C3.5</i>
Don't know	8	<i>Continue</i>
No response	9	

C3.4 Did you then use a needle/syringe that was left at the place of gathering by somebody else (of drug preparing, or some other place)?

- 1. Yes
- 2. No
- 8. Don't know
- 9. No response

C3.5 If several people were there at that time, how do you think, how many people could have used the shared needle?

- 1. _____ (please specify the number)
- 77. I was alone
- 88. Don't know
- 99. No response

C4. In the past, when you injected drugs, have you ever used needles/syringes that had been left at the place of gathering?

- 1. Always
- 2. Nearly always
- 3. Sometimes
- 4. Once
- 5. Never
- 8. Don't know
- 9. No response

C5. In the past, when you injected drugs with a used needle/syringe, how many times did you clean them before usage? (please read out the options)

Always	1	<i>Continue</i>
Almost always	2	
Sometimes	3	
Once	4	
Never	5	<i>Go to C9</i>
Don't know	8	<i>Continue</i>
No response	9	

C5.1 If you cleaned the needle/syringe, how did you do it? (please read out the options; several responses are acceptable)

- 1. With non-boiled water
- 2. Disinfecting sol.

3. Saliva
4. Boiled water
5. Chlorine
6. Put on match/liter fire
7. Other _____
8. No response
9. Don't know

Compare with question B9, if the respondent did not take drugs during the last week, go to C11

C6. Please recall all instances of injecting that took place over the last week. How often did you use the same needle/syringe that had been used by others?

Always	1	Continue
Almost always	2	
Sometimes	3	
Once	4	
Never	5	Go to C9
Don't know	8	Continue
No response	9	

C7. Over the last week, did you use a needle/syringe that had been used by any of the following people? (please read out the list loud; several responses are acceptable)

	Y	N	DK	NR
1. Your usual partner in sex (girl-friend)	1	2	8	9
2. Partner in sex whom you didn't know before	1	2	8	9
3. Someone from the drug-addict community (drug-related friend)	1	2	8	9
4. Drug trafficker	1	2	8	9
5. Stranger	1	2	8	9
6. General friend	1	2	8	9
Other (please specify): _____	1	2	8	9

C8. With how many different drug user partners did you share a needle/syringe last week? (Count all those people with whom you shared a needle/syringe)

1. Number of Partners: _____
88. Don't know
99. No response

C9. During the last week how often have you used a needle/syringe that nobody had used before? (please read out the options)

1. Always
2. Almost always
3. Sometimes
4. Never
8. Don't know
9. No response

C10. During the last week how many times did you give the used needle/syringe to others? (please read out the options)

- Always
- Almost always
- Sometimes
- Never
8. Don't know
9. No response

C11. When you last threw away the used needle, how did you do that? (do not read out the options. Match the responses with the options below. If the respondent's answer is different from the below presented options, take note of the full answer).

1. Threw the needle into the garbage bin without a cap
2. Threw the needle into the garbage bin with a cap

3. Put into a bottle/can/boiling pan and left there
4. Dropped on the ground
5. Other _____
- 9.No response

C12. Can you actually get new and unused needles and syringes whenever you need them?

Yes	1	<i>Continue</i>
No	2	Go to C14
Don't know	8	
No response	9	

C13. Where do you get/buy new needles/syringes? (please read out all options and mark the selected one)

	Y	N
1. Drug store	1	2
2. Shop	1	2
3. Medical staff	1	2
4. Hospital	1	2
5. Wholesale drug store/salesperson	1	2
6. Family/Relatives	1	2
7. Partner in sex	1	2
8. Friends	1	2
9. Other injection drug user	1	2
10. Drug trafficker	1	2
11. Syringe exchange programme	1	2
12. Stolen from a legal source (hospital, drug store)	1	2
13. Bought in the street	1	2
Other (please specify) _____	1	2

Compare with question B9, if the respondent did not take drugs during the last week, go to C19

C14. During the last week have you used a syringe that had already been filled with drugs without your presence?

1. Yes
2. No
8. Don't know
9. No response

C15. During the last week how many times did you take drugs after it had been filled with solution from a syringe that had been used by somebody else? (Whether it was filled from the "front" or the "back") (Please explain to the respondent the filling technique from the front and the back ends. Make sure he understands what the question is about.)

1. Always
2. Almost always
3. Sometimes
4. Once
5. Never
8. Don't know
9. No response

C16. During the last week when you injected drugs, how many times did you use shared syringe with left drug in it? (please read out the options)

1. Always
2. Almost always
3. Sometimes
4. Once
5. Never
8. Don't know
9. No response

C17. During the last week when you injected drugs, how many times did you use shared bottle, spoon, boiling pan/glass/container, cotton/filter or water? (please read out the options)

1. Always
2. Almost always
3. Sometimes
4. Once
5. Never
8. Don't know
9. No response

C18. During the last week how many times did you take solution from the shared container? (please read out the options)

1. Always
2. Almost always
3. Sometimes
4. Once
5. Never
8. Don't know
9. No response

C19. Please recall the last instance of your taking drugs and tell me (read out all options and mark the chosen one)

	Yes	No	Don't Know	N R
1. Did you use a syringe after it was filled by somebody else from his/her used syringe?	1	2	8	9
2. Did you use a shared bottle, spoon, boiling pan/glass, container, cotton/filter or water?	1	2	8	9
3. Did you take solution from the shared container?	1	2	8	9

C20. Over the last year have you injected drugs in another country/city/town?

Yes	1	Continue
No	2	
Don't remember	8	
No response	9	

C20.1 If yes, in which other countries/cities/towns did you inject drugs? (Make sure that cities and countries match each other if the place in question is outside Georgia)

	1 st Case	2 nd Case	3 rd Case	4 th Case	5 th Case
1. City					
2. Country					

C20.2 When you injected drugs in any other country/city/town did you use somebody else's needle/syringe?

1. Yes
2. No
3. Don't remember
9. No response

C20.3 When you injected drugs in another country/city/town did you allow somebody else to use your used needle/syringe?

1. Yes
2. No
3. Don't remember
9. No response

C21. Did you experience overdoses in the last year?

Yes	1	Continue
-----	---	-----------------

No	2	Go to C22.
Don't remember	8	
No response	9	

C21.1 What kind of help did you get?

1. Emergency aid
2. Hospital treatment
3. Other _____ (please specify)

C22. Do you currently get any medical treatment (or assistance), or have you ever taken such a treatment (or assistance) because you are a drug user? (Please read out the options below)

Currently taking a medical treatment	1	Continue
Used to take a medical treatment, but later quit it	2	
Have been taking a medical treatment	3	
Never have been treated	4	Go to D1
No response	9	

C23. How many years ago did you take medical treatment or assistance because you were a drug user?

1. _____ years _____ months (please indicate)
88. don't know
- 99 no response

C24. What kind of medical treatment or assistance have you taken?

(Do not read out the options. Ask also this: "What other treatments have you taken? Several responses are acceptable)

	Y	N
1. Consultations at a health center	1	2
2. Self-treatment groups	1	2
3. Detoxification with Methadone	1	2
4. Substitution with Methadone	1	2
5. Detoxification with other drugs	1	2
6. Detoxification without drugs	1	2
7. Psycho-social rehabilitation center	1	2
8. Survived "extreme need" with somebody else's help	1	2
9. Survived "extreme need" without anybody's help	1	2
Other (please write down)	1	2
88. Don't know		88
99. No response		99

C25. Can you tell me in which country/city did you take medical treatment?

1. _____ (please indicate)

D. Sexual Life Record

D1. How old were you when you had the first sexual contact in your life notwithstanding the form of it?

1. _____ years old (please indicate the exact age)
77. Never had it (**go to G1**)
88. Don't know
99. No response

D2. Have you had sex during the last 12 months?

Yes	1	Continue
No	2	Go to D4
No response	9	

D2.1 Does your regular sexual partner have another sexual partner?

1. Yes

- 2. No
- 7. Don't know
- 8. No response

D3. In total with how many female sexual partners have you had over the last 12 months?

- 1. _____ (please specify the exact number)
- 88. Don't know
- 99. No response

D3.1 How many of those were "regular sexual partners" (i.e. spouse or permanent sexual partner)?

- 1. _____ (number)
- 88. Don't know
- 99. No response

D3.2 How many of your female sexual partners were "paid" ones? (i.e. those ones with who you had a sexual contact in exchange for money or drugs)

- 1. _____ number
- 88. don't know
- 99. no response

D3.3 How many of those sexual partners were "occasional" ones? (i.e. those ones that you are not married to, never have lived together, and never have paid money in exchange for sex)

- 1. _____ (number)
- 88. Don't know
- 99. No response

D4. We talked about your female partners. Have you ever had a male sexual partner?

Yes	1	Continue
No	2	Go to E1
No response	9	

D4.1 If yes, have you ever had anal sex (passive intercourse) with your male partner during the last 12 months?

Yes	1	Continue
No	2	Go to E1
No response	9	

D4.2 With how many male partners have you had anal sex (passive intercourse) over the last 12 months?

- 1. _____ (number)
- 88. Don't know
- 99. No response

E. Number and Types of Partners

The following questions I will ask you about your regular sexual partner. A regular sexual partner is someone who is your spouse or who you consider your permanent sexual partner.

E1. Have you had sex with your regular sexual partner over the last 12 months?

(Compare with question D3.1 and circle the response for the question E1)

Yes	1	Continue
No	2	Go to E2

E1.1 How many times did you have sex with your regular sexual partner over the last month?

- 1. _____ times
- 88. Don't know
- 99. No response

E1.2 When you had last sexual contact with your regular sexual partner did you use a condom?

Yes	1	Continue
No	2	Go to E1.4
Don't know	8	
No response	9	

E1.3 Who offered to use condoms at that time, you or your regular sexual partner's?

- 1. I did
- 2. Partner
- 3. Both
- 8. Don't know
- 9. Refused to answer

Go to E1.5

E1.4 Why didn't you and your regular sexual partner use a condom at that time? (Don't read out the options. Match the response up to the options below. Several responses are acceptable)

	Y	N
1. Was not available/Did not have it	1	2
2. Too expensive	1	2
3. Partner refused	1	2
4. Don't like it	1	2
5. Use other contraceptives	1	2
6. Didn't think necessary	1	2
7. Didn't think of it	1	2
Other (please indicate) _____	1	2
Don't know	88	
No response	99	

E1.5 How often have you used condoms with your regular sexual partner within the last year? (please read out the options below)

1. Always
2. Almost always
3. Sometimes
4. Never
8. Don't know
9. No response

E1.6 Does your regular sexual partner inject drugs?

1. Yes
2. No
8. Don't know
9. No response

E1.7 Have you had anal sex with your regular sexual partner?

1. Yes
2. No
8. Don't know
9. No response

The following questions I will ask you about your paid-for sexual partner. A paid-for sexual partner is someone who you has sexual contact in exchange for money or drugs.

E2. Did you have a paid-for sexual partner over the last 12 months? (Compare the question with D3.2 and circle response to E2)

Yes	1	Continue
No	2	Go to E3

E2.1 Please recall all your paid-for sexual partners. How many of those did you have?

1. _____
88. Don't know
99. No response

E2.1.1 Please recall all the paid-for sexual partners to whom you paid money or drugs in exchange for sex over the last month. How many of those did you have in total?

1. _____ (please indicate an exact number)
88. Don't know (**go to E3**)
99. No response (**go to E3**)

E2.2 Please recall your last paid-for sexual partner? How many times did you have sex with her over the last month?

1. _____ times
88. Don't know
99. No response

E2.3 Last time when you had sex with your paid-for sexual partner, did you use a condom?

Yes	1	Continue
No	2	Go to E2.5
Don't know	8	Go to E2.6
No response	9	

E2.4 Whose initiative was to use condoms at that time (you or your paid-for sexual partner's)?

- 1. Mine
- 2. Partner's
- 3. Mutual
- 8. Don't know
- 9. No response

(Go to E2.6)

E2.5 Why didn't you and your paid-for sexual partner use condoms at that time? (Don't read out the options. Several responses can be accepted)

	Y	N
1. Was not available/Did not have it	1	2
2. Too expensive	1	2
3. Partner refused	1	2
4. Don't like it	1	2
5. Use other contraceptives	1	2
6. Didn't think necessary	1	2
7. Didn't think of it	1	2
Other (please indicate) _____	1	2
Don't know	88	
No response	99	

E2.6 Last year how many times did you use condoms with your paid-for sexual partners? (Read out the options)

- 1. Always
- 2. Almost always
- 3. Sometimes
- 4. Never
- 8. Don't know
- 9. No response

E2.7 Does your paid-for sexual partner inject drugs?

- 1. Yes
- 2. No
- 8. Don't know
- 9. No response

E2.8 Have you had anal sex with your paid-for sexual partners?

- 1. Yes
- 2. No
- 8. Don't know
- 9. No response

The following questions I will ask you about your occasional sexual partners. An occasional sexual partner is someone who you are not married to, never lived together, and have never paid money or exchanged drugs for sex.

E3. Did you have a sexual contact with an occasional sexual partner over the last 12 months? (Compare with the question D3.3 and circle the response to E3)

Yes	1	Continue
No	2	Go to F1

E3.1 Please recall your very last occasional sexual partner. How many times did you have sexual contacts with her within the last month?

1. _____ times 88. Don't know 99. No response

E3.2 Last time when you had a sexual contact with your occasional sexual partner, did you use condoms?

Yes	1	Continue
No	2	Go to E3.4

Don't know	8	Go to E3.5
No response	9	

E3.3 Whose initiative was then to use condoms?

1. Mine
2. Partner's
3. Mutual
8. Don't know
9. No response

Go to E3.5

E3.4 Why didn't you and your occasional sexual partner use condoms then? (Don't read out the options. Several responses can be accepted.)

	Y	N
1. Was not available/Did not have it	1	2
2. Too expensive	1	2
3. Partner refused	1	2
4. Don't like it	1	2
5. Use other contraceptives	1	2
6. Didn't think necessary	1	2
7. Didn't think of it	1	2
Other (please indicate) _____	1	2
Don't know	88	
No response	99	

E3.5 How often have you used condoms with your occasional sexual partner over the last year?

1. Always
2. Almost always
3. Sometimes
4. Never
8. Don't know
9. No response

E3.6 Do you know whether your occasional sexual partner inject drugs?

1. Yes
2. No
8. Don't know
9. No response

E3.7 Have you had anal sex with your occasional sexual partners?

1. Yes
2. No
8. Don't know
9. No response

F. Use of Condoms

(Do not ask Q F1. Compare the responses to questions: E1.2, E1.5, E2.3, E2.6, E3.2, E3.5 and mark respectfully)

F1. Have you ever used condoms?

Yes	1
No	2

F2. In the last month, have you had any difficulties in getting a condom when you need one?

Yes	1	Continue
No	2	
Don't know	8	Go to G1
No response	9	

F2.1 If yes, what was a reason for that? (please indicate)

1. _____

G. Sexually Transmitted Diseases

G1. Have you heard of diseases that are transmitted sexually?

Yes	1	<i>Continue</i>
No	2	<i>Go to G4</i>
No response	9	

G2. Can you describe STD symptoms that are observed among women?

(Don't read out the options. Multiple answers are acceptable)

	Y	N
1. Stomach (abdominal) ache	1	2
2. Vaginal release	1	2
3. Odorous release	1	2
4. Burning pain while urinating	1	2
5. Vaginal ulcer	1	2
6. Swollen vulva	1	2
7. Itching	1	2
Other: (a) _____ (please specify)	1	2
Other: (b) _____ (please specify)	1	2
Other: (c) _____ (please specify)	1	2
Don't know	88	
No response	99	

G3. Can you describe STD symptoms that are observed among men?

(Don't read out the options. Multiple responses are acceptable)

	Y	N
1. Genital release	1	2
2. Burning while urinating	1	2
3. Genital ulcer	1	2
4. Swollen lower abdomen	1	2
Other: (a) _____ (please specify)	1	2
Other: (b) _____ (please specify)	1	2
Other: (c) _____ (please specify)	1	2
Don't know	88	
No response	99	

G4. Have you observed genital release or burning pain while urinating during the last 12 months?

1. Yes
2. No
8. Don't know
9. No response

G5. Have you observed genital ulcer/rash over the last 12 months?

1. Yes
2. No
8. Don't know
9. No response

(Interviewer: If there is no "Yes" to G4 and G5, go to H1)

G6. Whom did you apply for medical treatment? (Please read out the options; multiple answers are acceptable)

	Yes	No
1. STD Institution	1	2
2. Private doctor	1	2
3. Drugstore	1	2
4. Self treatment	1	2
5. Nobody	1	2

Other (please specify)	1	2
Don't know	88	
No response	99	

H. Knowledge, Opinion and Attitude

H1. Have you heard of HIV or AIDS?

1. Yes
2. No
8. Don't know
9. No response

(Please explain that HIV is a human immunodeficiency virus which causes AIDS.)

H2. Do you know any person around you who has been infected, ill with, or has died of AIDS?

Yes	1	<i>Continue</i>
No	2	<i>Go to H4</i>
Don't know	8	<i>Continue</i>
No response	9	

H3. Do you have a close relative or friend who has been infected, ill with, or has died of AIDS?

1. Yes, a close relative
2. Yes, a close friend
3. No
8. Don't know
9. No response

H4. Please give me your opinion regarding the following:

(Please read out all options and mark the relevant answer.)

Assertions	Yes	No	DK	NR
1. Can one reduce the HIV risk if one properly uses condoms during every sexual contact?	1	2	8	9
2. Can one get HIV as a result of a mosquito's bite?	1	2	8	9
3. Do you believe that one may protect oneself from HIV/AIDS by having one uninfected and reliable sexual partner?	1	2	8	9
4. Do you believe that one can protect oneself from HIV/AIDS by keeping away from (avoiding) sexual contact?	1	2	8	9
5. Do you believe that one can get HIV/AIDS by taking food or drink that contains someone else's saliva?	1	2	8	9
6. Do you believe that one may be infected with HIV/AIDS by using a needle already used by someone else?	1	2	8	9
7. Do you believe that one may be infected with HIV/AIDS by using a syringe already used by someone else?	1	2	8	9
8. Do you believe that drug users may protect themselves from HIV/AIDS by switching to non-injection drugs?	1	2	8	9

H5. Do you believe that an HIV/AIDS-infected pregnant woman can transfer virus to her fetus?

Yes	1	<i>Continue</i>
No	2	<i>Go to H7</i>
Don't know	8	
No response	9	

H6. What do you believe a pregnant woman might do reduce the risk of transferring the infection to her fetus?

(Don't read out the options to the respondent. Multiple answers are acceptable)

Take medication (antiretrovirals) 1

Other _____ please specify

Don't know 8

No response 9

H7. Can a mother transfer the HIV/AIDS to her baby through breastfeeding?

1. Yes

- 2. No
- 8. Don't know
- 9. No response

H8. Is it possible in your neighborhood/town that one take confidential HIV/AIDS test to see if one is infected?

"Confidential" means that nobody will know about the test results without one's permission.

- 1. Yes
- 2. No
- 8. Don't know
- 9. No response

H9. I don't want to know about the test results but have you ever taken an HIV test?

Yes	1	Continue
No	2	Go to H13
No response	9	

H10. When did you take the last HIV test?

- 1. Last year
- 2. About one or two years ago
- 3. About two or four years ago
- 4. Four or more years ago
- 8. Don't know
- 9. No response

H11. 1) Was it your initiative to take the HIV/AIDS test or you had to?

2) Did you have to take the HIV/AIDS test?

	Yes	No	No response
1. My initiative	1	2	9
2. I had to	1	2	9

H12. Don't tell me the test result, but do you know it?

- 1. Yes
- 2. No
- 9. No response

H13. If you are HIV positive will you inform your sex partners?

- 1. Yes
- 2. No
- 8. Don't know
- 9. No response

H14. If you are HIV positive will you inform your IDU partners?

- 1. Yes
- 2. No
- 8. Don't know
- 9. No response

H15. How many times have you used the following local health services in the last year?" (use 0 for not used)

(Please read out the options. Multiple answers are acceptable)

	Times used
1. Narcology Dispanser	
2. Infectious Deases Hospital	
3. Healthy Cabinet	
4. Tanadgoma	
5. Blood Infusion Station	
6. Other (<i>please specify</i>)	

H15.1 How many times have you used the following health services located in Tbilisi in the last year? **(Please read out the options. Multiple answers are acceptable. Use 0 for not used). If all answers are 0, go to H15.3**

	Times used
7. Narcology Institute	
8. AIDS Center	
9. Bemoni	
10. Uranti	
11. New Way	
12. Other <i>(please specify)</i>	

H15.2. Please assess their services by a 5-grade system, whereby 1 is the lowest and 5 is the highest grade. So the organization... *(Name the institution that was given first by the respondent for the previous question and write down the name of this organization within first empty graph. If there is another institution named, read the name of the next one and write down the name of that organization within the next empty graph and so on.. Rate each of the institution according to marks given by the respondent. If the respondent says "I don't know", write down 8; if he/she has no answer, right down 9.)*

Write down the name of an organization with its code →	Code _____ Name	Code _____ Name	Code _____ Name	Code _____ Name
1. Empathic Service				
2. Staff Quality				
3. Consultation Quality				
4. Problem Solving				

H15.3 Are you going to use the services of that institution(s) in the future?

1. Yes/maybe
2. No/probably not

H15.4 Can you tell me why do you think so?

Note full answer here:

I. Awareness of AIDS

(Questions for those respondents who answered positively to Q H1)

I1. Out of the below listed information sources which one was used by you as a source of information about AIDS? (Read out the following possible responses. Several answers are acceptable)

	Y	N
1. Radio	1	2
2. TV	1	2
3. Magazines/Journals	1	2
4. Booklets, Posters	1	2
5. Healthcare system staff	1	2
6. Schools/Teachers	1	2
7. Friends/Relatives	1	2
8. Work Place	1	2
9. NGO representatives	1	2
10. Training Programs	1	2
11. Billboards/Street Advertising	1	2
12. Social Workers	1	2
Other (please specify)	1	2

I2. Did anybody supply you with the following items and/or information about those last year? (Multiple answers are acceptable)

	Y	N
1. Condoms	1	2

2. Brochures/pamphlets/booklets on AIDS	1	2
3. Qualified information on AIDS	1	2
Other (please specify)	1	2

J. Encouraging to Use Condoms

J1. Over the last year have you seen, read or heard any advertisement on condoms from any of the following sources? (Multiple answers are acceptable)

	Y	N
1. Radio	1	2
2. TV	1	2
3. Drugstore	1	2
4. Health Center	1	2
5. Hospital	1	2
6. Medical personnel/Volunteers	1	2
7. Friends/Neighbors	1	2
8. NGOs	1	2
9. Magazines/Journals	1	2
10. Video Shops	1	2
11. Street Stands	1	2
12. Trainings	1	2
13. Billboards/Notices	1	2
14. Comics Books	1	2
15. Social Workers	1	2
Other (Please specify)	1	2

J2. Have you heard/seen or read any information about the syringe exchange program over the last year?

- 1. Yes
- 2. No

J3. Have you heard/seen or read any information or material about any other similar program?

Yes	1	<i>Continue</i>
No	2	<i>Go to J4</i>

J3.1 If yes, what is it?

J4. Have you ever seen or read these materials? (Please show the respondent the booklets)

- a. Booklet A 1. Yes 2. No
- b. Booklet B 1. Yes 2. No
- c. Booklet N 1. Yes 2. No

J5. Where do you normally gather to inject drugs? _____ (please specify)

J6. Do not tell me their names, but please specify two persons who have the major impact on you in terms of continuing the using of drugs.

	Person One	Person two
Parents	1	1
Siblings	2	2
Spouse	3	3
My children	4	4
School/class mate	5	5
Neighbor friend	6	6
Needle partners	7	7
Nobody	99	

J7. Do not tell me their names, but please specify two persons who have the major impact on you in terms of quitting the using of drugs.

	Person One	Person two
Parents	1	1
Siblings	2	2
Spouse	3	3
My children	4	4
School/class mate	5	5
Neighbor friend	6	6
Needle partners	7	7
Nobody	99	

Q5. You have been very helpful. After generalization and statistical analysis of the present study our organization will plan projects that will be beneficial for all. If in several months I need to take another interview from you, would you make yourself available?

1. Yes
2. No
3. Don't know (we'll see)

Interviewer, thank the respondent for cooperation and say good bye. After the interview make sure you have taken down the respondent's identification data so that the same person is used in the following panels of the study.

Q6. During the interview the respondent was:

1. Interested
2. Indifferent
3. Uninterested
4. Calm
5. Agitated

Time when interview was concluded _____

The questionnaire is kept till completion of the project.

Q7. Quality control on the interview was carried out by _____

1. Position _____
2. Organization _____

Quality control group member has used (completed) quality control card _____

Signature _____