Do sex workers think beyond condoms for family planning?
Experiences from Aastha, India

Amrita Bhende, Senior Program Officer FHI 360
Since 2004, the BMGF funded Aastha Project has been providing STI/HIV prevention and management services to FSWs in Mumbai and Thane districts in Maharashtra, India.

Over 80,000 SWs have received communication and outreach services.

Services provided:
- STI prevention
- Condom distribution
- Strategic Behavior Change Communication
- Peer led community mobilization services
Need for FP-HIV Integration

- To strengthen the uptake of monthly STI screening services, the Aastha Project devised strategies to address the felt needs of SWs.

- Family Planning needs were high on the list of priorities for SWs.

- Therefore, in 2005 Aastha introduced client – initiated FP counseling services in its STI clinics along with need based referrals.

- Integration contributed to an increase in the regular demand and uptake of STI screening services from 600/month (2005) to 14,000/month (2009).
Aastha Model of client initiated FP-HIV integration

Family Planning services
- FP counseling for sex workers
  - Sexual history
  - Menstrual hygiene
  - Promote FP methods
  - Assess need and counsel on basket of FP choices
- Pregnancy test
- Treatment of RTIs
- Referral for various FP methods in Govt./private facilities

Clinic Operational Guidelines and Standards
- Primary HIV care and support guidelines
- HIV/STI Counseling guidelines

HIV Prevention and Link to Care and Treatment
- STI Services
  - Syndromic Case Mgt.
  - Routine STI screening including Syphilis Screening
  - Presumptive treatment for STIs
- STI/HIV counseling & Psychosocial support
- Condom promotion
- HIV Counseling and Testing Services
- Link to Continuum of Care
  - Management of OI
  - Referral to ART centers
  - Referral for TB DOTS t/t
  - Ensure t/t adherence
- Coordination with outreach Community involvement

Standard STI services
- Training of clinic staff and supervisors
- Monitoring and Supervision

Training of clinic staff and supervisors
Monitoring and Supervision

PTA PREVENTIVE TECHNOLOGIES AGREEMENT

fhi360 THE SCIENCE OF IMPROVING LIVES
Strengthening the Aastha FP-HIV Integration model

- In Dec 2010, provider initiated FP counseling and referral services for FSWs (18-49 years) was initiated at seven Aastha sites

- Training of Health Care providers & development of communication aids was supported by USAID/FHI 360/ Prevention Technologies Agreement (PTA) grant
The Aastha Provider initiated Model

- Customized communication materials and job aids developed
- Doctors, counselors, nurses and outreach workers trained to identify unmet FP needs using a screening tool
- Nurses and Counselors provide FP counseling to eligible FSWs
- Appropriate services are provided, including referrals
Key results

During January-June 2011, **4,124 SWs** were screened

**51% (2,081)** were identified as having an unmet need for FP – Eligible for FP Counseling
Key results contd ....

- **98% (2,038)** of eligible SWs were provided counseling on a basket of FP choices
- Of these, **99.5% (2,025)** accepted FP methods (0.5% did not accept any method)

- **85%** accepted condoms as FP method
- **Female Sterilization**
- **Injectables**
- **Intra-Uterine Contraceptive Device**
- **Oral Contraceptive Pills**

(0.5% did not accept any method)
Characteristics of SWs accepting condoms as FP method

• Mean age - **36.25 years**

• **89% (1,637)** reported that they were in a relationship with a Regular Partner or spouse.
  - **64%** reported being married and living with a husband
  - **25%** reported being in a relationship with a RP/ lover
Condoms as an FP Method

- **Aastha distributes condoms** to SWs for protection against STIs/HIV
- FSWs reporting **use of male condoms** were also categorized as eligible and subsequently provided FP counseling
- Condoms are provided directly by the health care providers for **dual protection** after in-depth counseling
- **Strong referral mechanisms** have been developed for FP methods other than condoms
Lessons learnt

• Aastha experience is that **most FSWs opt for condoms as a dual method** for:
  - STI/HIV transmission prevention
  - Protection from unintended pregnancy

• By **strengthening proactive FP counseling** for FSWs, HIV projects can:
  - Increase consistent condom use of FSWs with RPs
  - Promote dual protection

• Globally, HIV prevention projects with FSWs report **low condom use with their RPs or lovers** and the above approach can address this critical issue
Priyanka’s story...

- At 22 years, became a bar dancer
- Married at 23 years to a man she met at the bar
- At 24 years, discovered that she was pregnant and HIV+

“I was very excited. And then I felt extreme shock. I had had no idea before then. I didn’t want to die, I was only 24. What would happen to my child? “

- In early 2011, an Aastha PE took Priyanka to the clinic for care and support services
- The doctor/nurse proactively provided counseling on FP needs, significance of positive prevention and the importance of condoms for dual protection
- The peer nurse accompanied her to the PPTCT center and discussed prevention of infection to the unborn child

“Thanks to the timely intervention by Aastha, my daughter has been born healthy. Fortunately my husband tested negative. I get condoms from the counselor every month which we use regularly as a means of dual protection and will continue this way.”
Thank you