

SECTION V

APPENDIX

Appendix – Questionnaires from Sections II and III

Prevalence – a gender analysis

1. Today approximately _____ of the 33.4 million adults living with HIV/AIDS are women and the proportion is growing.

- 21%
- 46%
- 11%

(Source: UNAIDS Global Data, December 1999)

2. Of the new infections occurring everyday, the percentage of women infected is _____.

- 80%
- 50%
- 30%

(Source: UNAIDS Global Data, December 1997)

3. Following a trend observed in some countries, the male to female ratio among HIV infected persons has begun to equalise globally. In Russia the infected men now outnumber the infected women by _____ instead of an earlier figure of 6:1.

- 4:1
- 2:1

In Brazil the male to female ratio stood at 16:1 in 1986. Figures for 1997 indicate the ratio as _____.

- 10:1
- 3:1

(Source: UNAIDS Fact Sheet December 1996)

4. In Thailand where a combination of HIV prevention methods have successfully lowered infection rates in men, the prevalence in women attending antenatal clinics has continued to rise steadily from 0% in 1989 to _____ in 1995.

- 0.2%
- 23%
- 2.3%

(Source: UNAIDS Fact Sheet December 1996)

5. In Francistown, Botswana _____ of the pregnant women tested positive in a major urban surveillance site.

- 2.3%
- 43%
- 10%

(Source: UNAIDS Fact Sheet December 1997)

6. Recent data from Mexico indicates that 0.8 percent of all reported AIDS cases have been among sex workers, and _____ among housewives.

- 9%
- 19%
- 90%

(Source: The Documentation of an Epidemic – Columbia University – Anne Akeroyd)

7. In men the highest prevalence of HIV infection is in the 25-35 year age group whereas in women prevalence peaks in the age group of _____.

- 15-25 years
- 35-45 years

(Source: UNDP Issue Paper No. 10)

8. In Zimbabwe, among 537 adolescents identified as HIV positive, girls outnumber boys by _____.

- 3.1
- 2:1

(Source: Women AIDS Research Program – Department of Community Medicine – University of Zimbabwe)

Causes – a gender analysis

1. Heterosexual intercourse accounts for more than _____ of global adult infections.

- 17%
- 37%
- 70%

(Source: UNAIDS Fact Sheet, December 1996)

2. Increase in STD cases indicate an increase in unsafe sex. WHO estimated that in 1995, there were 333m cases of STD's of which 65 million were in Sub Saharan Africa and 150 million were in South and South east Asia. The presence of STD's increases the risk of HIV transmission _____ .

- two fold
- five fold
- ten fold

(Source: Health and Population Occasional Paper – ODA)

3. While HIV prevalence in male STD clinic attendees was stable between 1993 – 1994 rates have increased more than _____ fold among female STD attendees over the same period.

- two
- five
- ten

(Source: UNAIDS Fact Sheet December 1996)

4. In some villages in Uganda, focus group discussions revealed that _____ out of 22 men present had used a condom.

- 18
- 8
- 2

Among all the women in these villages, _____ had seen a condom.

- 50%
- 15%
- 0%

(Source: UNDP's Study Paper No. 2 The Socio-economic Impact of AIDS on Rural Families in Uganda)

5. A behaviour surveillance survey financed by USAID in Tamil Nadu in India shows that 82% of the male STD patients had had sexual intercourse with multiple partners within the last 12 months and only _____ had used a condom

- 52%
- 22%
- 12%

(Source: Health and Population Occasional Paper ODA)

6. Research shows that many men who have sex with men also have sex with women. Studies in India revealed that _____ of the male clients of male sex workers reportedly were married.

- 90%
- 60%
- 20%

(Source: Review of “Best Practice” for Intervention in Sexual Health – Gordon and Sleightholme)

7. A survey on spousal communication in some developing countries found 35 percent of the women in the Philippines never talked to their husbands about sexual matters. In Iran the figure was _____.

- 23%
- 53%
- 73%

(Source: UNDP Issues Paper No. 3)

8. It has been reported that sexual activity in Uganda begins between the ages of 10 – 15 years and that the average age of first sexual intercourse for boys and girls in Uganda is about 15 years. An only girl’s sample however revealed that the sexual intercourse occurred _____ than 15 years.

- earlier
- later.

(Source: UNICEF SYFA ibid)

Community based research has shown similar findings in Asia, Pacific and Latin America and the Caribbean.

9. A recent study by SAKSHI, an NGO in India, has indicated that _____ of the 13 – 15 year olds attending school had been victims of sexual abuse.

- 16%
- 60%
- 75%

(Source: She Can Cope – Nath)

10. A study of female youth in South Africa showed that _____ of the girls had experienced sex against their will.

- 17%
- 71%
- 50%

(Source: Taking Stock - Whelan and Rao Gupta ICRW.)

11. Researcher Anne Chao's data from Rwanda shows that the younger the age of first pregnancy or first sexual intercourse the _____ the incidence of HIV infection.

- lower
- higher

(Source: UNDP Issues Paper No. 8.)

Consequences – a gender analysis

1. In a study among women living with HIV/AIDS _____ had experienced violence.

- 6%
- 66%
- 96%

(Source: Partner Violence in joint HIV Substance Abuse – Krauss, Goldamt and Bula)

2. Projections for Zambia and Zimbabwe indicate that because of AIDS, child mortality rates may increase _____ by the year 2010.

- five fold
- three fold

(Source: UNAIDS Fact Sheet December 1996)

3. _____ of all parentless children in Uganda are between the ages of 10 – 19 years. This has increased their vulnerability to sexual abuse.

- 29%
- 40%
- 69%

(Source: UNDP Study Paper No. 2 The Socio-economic Impact of AIDS on Rural Families in Uganda)

4. In the state of Sao Paulo AIDS became the leading cause of death in the 20-34 year old women in 1992. In rural Uganda AIDS caused _____ out of 10 deaths for women between 20-44 years of age.

- 3
- 5
- 7

(Source: UNDP Study Paper No. 2, The Socio-economic Impact of AIDS on Rural Families in Uganda)

5. If a woman living in an agricultural community where women are responsible for subsistence farming, becomes infected and falls ill the cultivation of subsistence crops in her household will _____.

- decrease
- increase

(Source: Social Impact of HIV/AIDS in Developing Countries – Danziger)

6. To fill gaps in food production in instances where outside workers cannot be hired due to depletion of the economic resources of the household, given the evidence available from the field of education _____ are pulled out of school.

- girls
- boys

(Source: Orphans of the HIV/AIDS Pandemic – Levine, Michaels and Back)

8. Since traditional gender norms support the primary role of women in child welfare, the burden of caring for the present 10 million AIDS orphans is likely to be borne by _____.

- men
- women.

(Source: Orphans of the HIV/AIDS Pandemic – Levine, Michaels, and Back)

Do you agree or disagree with the following?

1. In many cultures, female ignorance of sexual matters is a sign of purity.¹⁰⁰
2. Men don't like to admit their lack of knowledge and therefore do not seek out accurate information regarding HIV/AIDS prevention.
3. Women gain self-worth and social identity with the birth of children, so it is understandable that women have difficulty with the idea of non-penetrative sex and the use of barrier methods such as condoms.
4. Multiple sexual partnerships are acceptable for men in many societies.
5. It is unfortunate that sex between men is socially stigmatising and in many cases illegal and so contributes to the inability of those men to gain information and services to reduce their personal vulnerability.¹⁰¹
6. Modesty and virginity as a value is central to the image of womanhood.
7. There is no positive language for sexuality. For example, Mexican women asked to name the parts of their bodies could find no word for the vagina except "la parte" or the part.
8. Behaviour change strategies need to address socio-cultural norms, in order to be effective in preventing the spread of the epidemic.¹⁰²

¹⁰⁰ Conversely knowledge of sexual matters and reproductive physiology a sign of easy virtue.

¹⁰¹ The same applies to commercial sex work.

¹⁰² For example, STDs can be cured by having sex with a virgin, or for effective and safe truck driving, it is necessary to let the heat out of your body by having sex every 400 kilometers.

QUESTIONNAIRE ON CRITICAL IMPERATIVE I
Mother to Child Transmission

1. Approximately _____ of the one million children under 15 living with HIV around the world acquired the disease from their mothers during pregnancy at birth or from breast-feeding.

50%

10%

90%

(Source: Prevention Strategies and Dilemmas – Marcel Bianco)

2. In 1994, Protocol 076 proved that mother to child transmission could be effectively prevented by administering AZT to HIV positive women beginning in the 14th week of pregnancy, then intravenously during child birth and finally to the baby in the first six weeks of life. The success in the prevention rate of transmission was recorded as being _____.

16%

66%

6%

(Source: Women's Vulnerability and AIDS – Adriana Gomez and Deborah Meacham)

3. Although the World Health Organisation (WHO) has claimed that there is _____ valid public health rationale for forced HIV testing many countries still impose this practice on specific groups of people, including prisoners, sex workers, resident aliens, migrant workers, and pregnant women.

Some

A strong

No

As far back as 1987, WHO declared that HIV testing in order to identify specific individuals should be voluntary, should entail free and informed consent, should be confidential and should be followed with counselling.

(Source: AIDS in the World – Mann, Tarantola, Netter; v.1, pag.561)

4. As of 1991, _____ countries allowed excessive restrictions on HIV-infected citizens, including forced hospitalisation, isolation, and quarantine for HIV infected people.

No

Two

Seventeen

(Source: AIDS in the World – Mann, Tarantola, Netter; v.1, pg.561)

5. In 1988, in the former Soviet Union, four million pregnant women were the target of a compulsory screening program. Of the women tested, _____ HIV+ women were identified.

60,000

6,000

6

(Source: AIDS in the World – Mann, Tarantola, Netter; v.1, pg. 561)

6. UNAIDS states that the cost effectiveness of a short course of the anti-retroviral regime (SCARVE) for pregnant women varies according to the HIV prevalence levels.

- c) In Tanzania, SCARVE could cost less than _____ per averted HIV infection (1/2 the cost of providing supplementation to avoid malnourishment in pre-school children.)

\$600

\$6000

- d) In Thailand where prevalence is high, the cost per avoided infection would be _____ (just over twice the cost per year of caring for a child with AIDS.)

\$280

\$2800

(Source – HIV and Infant feeding: Guidelines for Decision-making, UNICEF, UNAIDS, WHO)

QUESTIONNAIRE ON CRITICAL IMPERATIVE II
Breast Feeding

1. In 1992, analysis of six studies including one from Africa indicated that the contribution of breast feeding to perinatal transmission is _____.

40%
14%
4%

(Source: Review of Current Research on Breast Milk & MTCT of HIV – UK NGO-AIDS Consortium 1998.)

2. In February 1998, a study in Thailand indicated that the risk of perinatal transmission was reduced by _____ if a short-term doze of AZT was given to women in their 34th week of pregnancy and if no breastfeeding was allowed once the child was born.

5%
50%
15%

(Source: Synopsis of Bangkok Short Course Perinatal ZDV Trial – Mastro T – PROCARE Email list 27 Feburary 1998)

3. The Chief of Obstetrics and Gynaecology at Makere University School in Uganda recently stated that about 30 percent of babies born to infected mothers become infected from breastfeeding. In rural areas _____ of *all* babies will die from dirty water used in formula.

50%
85%
20%

(Source: Prevention of Perinatal HIV Transmission, Maria de Bruyn)

4. UNICEF has noted that approximately _____ hours a month could be spent on cleaning and preparations of food in the first three months of child rearing.

15
50
100

(Source: WHO/UNAIDS/UNICEF Technical Consultation on HIV & Breastfeeding: Report of Meeting – Geneva, April 1998)

5. In Zambia, the average family income is less than \$100 a month. The costs of providing the least expensive formula of powdered milk to an infant amount to _____ a month.

\$16

\$36

\$66

(Source: HIV and Breastfeeding, and Old Controversy, Z. Gelow)

6. The cost of formula for one child in Uganda averages _____ times the rural family's average annual earnings.

1/2

1/3

1 1/2

(Source: Breastfeeding and HIV- Weighing Health Risks- M Specter – New York Times, 19 August 1998)

7. Baby food manufacturers suggested in July 1997 that they were giving mothers free supplies in Thailand as part of a government project for infants of PLWHAS. Twenty five percent of the mothers received free samples while only _____ were positive.

10%

2%

50%

(Source: Rundall P. – Implications for Commercial Exploitation U.K. NGOs AIDS Consortium 1998)

QUESTIONNAIRE ON CRITICAL IMPERATIVE III
Abortion

1. a) Of the 50 million induced abortions world-wide every year, _____ are illegal.

- 1/2
- 1/3
- 2/5

b) Nearly _____ of all abortions are performed outside the health care system.

- 50%
- 75%
- 25%

(Source: Unwanted Pregnancy, HIV/AIDS and Unsafe Abortion, by Radhakrishna, Gringle and Greenslade – Women’s Health Journal, February 1997)

2. Abortion under any circumstances is illegal in Mauritius, even in cases of rape and incest. In 1992, ___ of maternal deaths were related to complications from illegal abortions.

- 14%
- 24%
- 44%

(Source: Women in Law & Development (WILDAF) Info Practice for the 43rd Session of the Commission on the Status of Women, March 1999)

3. In developing countries, only _____ of women live in states where abortion is legally available to save a woman’s life.

- 60%
- 10%
- 30%

(Source: Unwanted Pregnancy, HIV/AIDS and Unsafe Abortion – Radhakisha, Gringle and Greenslade)

4. If a woman has advanced HIV, pregnancy carries the risk of hastening her own progression to full blown AIDS. In a study undertaken amongst tribal women in India living with HIV/AIDS,

a) _____ of the women who had an uneventful legal and safe first trimester abortion, died.

- 16%
- 60%
- 96%

b) _____ died undelivered between 30-34 weeks of gestation.

14%

41%

4%

c) Twenty seven percent of women living with HIV/AIDS but who were not pregnant died during the time frame of the study compared to _____ of pregnant women with HIV/AIDS.

17%

56%

83%

d) The study reported a negative outcome for the pregnancies that resulted in live deliveries with _____ of the infants who died within 6 weeks of birth diagnosed with an AIDS defining illness.

28%

82%

58%

(Source-AIDS in Pregnancy among Indian Tribal Women-Kumar, RD Rizvi and A. Khurana)

QUESTIONNAIRE ON CRITICAL IMPERATIVE IV
Partner Notification

1. a) In Cote d'Ivoire, under a UNAIDS pilot project, _____ of women refused to be tested for HIV.

- 50%
- 20%
- 5%

b) _____ of those tested did not return for the test results.

- 50%
- 5%
- 20%

c) _____ of those who tested positive did not inform their partners of the result.

- 25%
- 50%
- 5%

(Source -Relevance of Current Trials to Breastfeeding Policy and Practice – Vande Pierre)

2. _____ of the STD clinics in Delhi have a contact card or referral slip for partner notification.

- 0%
- 50%
- 80%

(Source- NACO-Study to Map Patterns of Risk Behaviour in the State of Delhi)

3. A 1993–94 survey in South Africa of more than 700 HIV-infected clients who had been in counselling sessions at an AIDS service group found that more than _____ had not told their spouse or regular partner of their positive HIV status.

- 6%
- 60%
- 20%

(Source- New York Times-December 4, 1998)

***QUESTIONNAIRE ON CRITICAL IMPERATIVE V
Discrimination***

1. Women in Asia and the Pacific Region are considered to have a _____ times greater risk of contracting HIV/AIDS than men due to their greater social and biological vulnerability.

Two
Five
Ten

(Source: World Bank 1993)

2. After a positive diagnosis, women generally experience AIDS related illnesses _____ than men do.

Sooner
Later

(Source: Women's Vulnerability and AIDS – Gomez and Meacham)

3. The ratio of AIDS cases of men to women dropped from 31:1 to _____ in 1995 in Chile.

25:5
15:5
10:5

(Source: CONSIDA 1997)

4. In one survey on KAP (Knowledge, Aptitude, Perception) done in Colombia, _____ of those consulted said they were unsure of how to protect themselves from STD's and AIDS.

91%
61%
21%

(Source: Sexual Conduct in the Adult Population, Profa Milia – Bogota Seguro Social Vol. 3, 1994)

5. In the same survey, the reported use of condoms among women with their partners was _____.

14%
4.1%
41%

(Source: PROFAMILIA (1994))

6. As shown clearly by studies of discordance among heterosexual couples in both Zimbabwe and Zambia, up to _____ of couples studied were discordant (far more commonly the man positive and the wife negative).

1/3

1/5

1/4

(Source: Key Problems Facing Women in the Concept of HIV/AIDS in South Africa –Helen Jackson)

7. An IPS Survey at the 1997 Adolescent Reproductive Health forum found that _____ of professionals stated that the majority of health providers would refuse to provide abortions related care if the adolescent had HIV/AIDS.

17%

47%

7%

(Source: Unwanted Pregnancy: HIV/AIDS and Unsafe Abortion – Radhakrishna, Gringle and Greenslade)

8. A recent survey undertaken by YRG Centre on PLWHAS observed that of the respondents, who had been victims of violence, _____ had experienced that violence at home and 21.4% had experienced it in the community.

12.3%

80.1%

50.5%

(Source: Challenges Facing People Living with HIV/AIDS – Soloman and Sathiamoorthy)

9. In the same survey when they disclosed their positive serostatus to health care providers, _____ of the respondents claimed to have experienced discrimination from those providers.

37%

80%

5%

(Source: Challenges Facing People Living with HIV/AIDS – Soloman and Sathiamoorthy)

10. The study on high-risk behaviour conducted by NACO in the state of Kerala, India states that IVD users when spotted by police in Trivandrum are _____.

- Taken to drug addiction centres
- Counselled by the police and restored to their families
- Beaten up

11. A recent finding of a study conducted by the University of California notes that _____ of medical professionals throughout the world have refused care to at least one HIV infected person.

- 39%
- 12%
- 7%

(Source: Challenges Facing PLWHAS – Solomon and Sathiamoorthy)

12. FGM is a socially sanctioned practice in many parts of Africa. In some countries _____ out of 10 women have had at least some part of their external genitalia removed.

- 4
- 7
- 9

(Source: WILDAF: Information Packet prepared for the 43rd Session of the Commission on the Status of Women, March 1999)

13. A 1997 study in Zimbabwe found that _____ out of 10 people caring for someone with AIDS was/were willing to admit that they were nursing someone with the disease.

- 1
- 5
- 8

(Source: New York Times – December 4, 1998)

ACCESS

1. Despite the high degree of government involvement in health care, most African states continue to suffer from circumstances related to insufficient infrastructure. In Ethiopia, there are only _____ health centres (including hospitals) to serve 55 million people.

- 2,200
- 22,000
- 220,000

(Source: A Snapshot of the Current Status of Women's Health in Africa – WILDAF, March 1999)

2. Women are hardest hit by cutbacks in health services and fee impositions. In West Africa, where SAP's caused rates of inflation to soar to 300 percent in the 1990's and underemployment to soar as high as 80 percent, the per capita income has plummeted from an average of \$1000 in 1970 to _____ in 1995.

\$500
\$700
\$300

(Source: A Snapshot of the Current Status of Women's Health in Africa – WILDAF, March 1999)

3. In countries like Zimbabwe where 86 percent of the women live in rural areas, women must frequently walk _____ or more to a clinic.

30 minutes
One hour
Three hours

(Source: A Snapshot of the Current Status of Women's Health in Africa – WILDAF, March 1999)

4. In South Africa, there are about _____ people per doctor in the former homelands.

3,000
13,000
30,000

(Source: A Snapshot of the Current Status of Women's Health in Africa – WILDAF, March 1999)

5. Cost recovery programs in which people are asked to contribute to the cost of condoms they buy and use have in fact discouraged the use of condoms. In Zimbabwe, where cost recovery for condoms was introduced in 1993, the number of condoms distributed at the survey site health centres fell by _____.

25%
50%
75%

(Source: A Snapshot of the Current Status of Women's Health in Africa – WILDAF, March 1999)

Websites:

1. The Participation Learning Centre
<http://www.pwci.org> (forthcoming, can be viewed currently at <http://members.xoom.com/afzalhossain/>)
This site contains a set of sample SARAR materials as applied by the Peopleworks Collaborative Inc. in a variety of sectoral field programmes.
2. IDS Participation Group Page
<http://www.ids.ac.uk/ids/particip/index.html#pghome>
The Participation Group is a group of people at the Institute of Development Studies in Sussex, UK, working in support of participatory approaches to development.
3. Strategies for Hope Series
www.stratshope.org
Site about the Publications and Media series, Strategies for Hope. Explores approaches of different agencies to the HIV/AIDS epidemic in developing countries.
4. UNICEF
<http://www.unicef.org>
Has several sub-sites regarding HIV/AIDS, especially with regard to children.
5. UNAIDS
<http://www.unaids.org/>
The Joint UN Programme on HIV/AIDS: A major resource site of the joint UN Programme. The site has a large electronic bibliography with many articles on site. Includes sub-sites on HIV/AIDS Education.
6. UNDP, HIV & Development Programme: Bureau for Development Policy, UNDP
<http://www.undp.org/hiv>
7. HIV/AIDS Workplace Toolkit
<http://www.shrm.org/diversity/aidsguide/>
In an effort to provide employers with accurate, helpful and up-to-date information, the Society for Human Resource management and the National AIDS Fund have created this website to assist human resource professionals with handling workplace issues involving HIV/AIDS. While oriented towards the USA, concepts derived from the site could be applied to other settings.
8. The World Bank
<http://www.worldbank.org>
Many publications are available through the web page, plus general information on HIV/AIDS and the Bank. Search their publication categories on HIV/AIDS.
9. International Council of AIDS Service Organisation (ICASO)
<http://www.icaso.org>

- Publications, details of International AIDS Conferences and the work of partner NGOs.
10. EU HIV/AIDS Programme in Developing Countries
<http://www.europe.eu.int/comm/development/aids/>
Publications & funding information and details of ongoing programmes of the European Union.
 11. Centre for Disease Control & Prevention – Division of HIV/AIDS
<http://www.cdc.gov/hiv/dhap.htm>
Information on basic science, surveillance, vaccine research, prevention research, treatment & funding.
 12. Harvard AIDS Institute
<http://www.hsph.harvard.edu/hai/home.html>
The website gives details of proceeding of online chat search, online viewing of photographs spotlighting the individual journeys of participants of some women only protease inhibitor clinical trials, details of campaigns to mobilise policy support in Africa and Latin America and some interesting care Institutions.
 13. International Centre for Research on Women – ICRW
<http://www.icrw.org/>
Details of Publications, Fellows Programme, Development Links etc.
 14. HIV Positive.Com
<http://www.hivpositive.com>
Details on who's behind us? Find a doctor? Awards & Recognition – Voices of PLWHAs.