
PLACE in South Africa: Evaluation of a Successful Community-Based AIDS Prevention Program, East London, 2000-2003

The Equity Project



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Evaluation

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Executive Summary

What is the specific aim of the PLACE protocol?

Because resources for HIV prevention programs are extremely limited, there is an urgent need to focus interventions where they are most cost-effective. To prevent new infections, AIDS prevention programs should focus on areas likely to have a higher incidence of new sexual partnerships. The Priorities for Local AIDS Control Efforts (PLACE) method is a simple yet effective monitoring and evaluation (M&E) tool to identify those areas likely to have a higher incidence of infection, and specific sites within these areas where AIDS prevention programs should be focused. Findings from these studies directly inform interventions, after which follow-up studies are conducted to monitor whether interventions are reaching key sexual networks in each city in terms of education, condom distribution, and behavior change. The method is continually “rolled-out” to neighboring communities where baseline data can identify areas in need of AIDS educational resources. These data can also be compared with data from communities that received an intervention before follow-up investigation.

Two waves of PLACE assessments were conducted in East London, South Africa. The specific aim of the first assessment was to identify and characterize sites in the study area where HIV transmission was likely to occur and use the information to develop an HIV/AIDS prevention program in the community. The objectives of the second assessment were to evaluate the impact of the intervention on site characteristics and on the behaviors of those who socialize at them, and to use the data to improve the intervention strategy.

Why was PLACE implemented in Eastern Cape?

South Africa has one of the highest HIV prevalence rates in the world. In the Eastern Cape, HIV prevalence among antenatal women increased from 6.0% in 1995 to 20.2% in 2000. The prevalence in the general population is now estimated at 20% (UNAIDS, 2003). As part of an Eastern Cape AIDS initiative to focus on those locales with elevated risk of sexually transmitted infections (STI) and HIV, the PLACE protocol was implemented not only to identify these areas, but also to monitor strategically located prevention efforts. The protocol was implemented in 2001. The data from this assessment were used to develop HIV/AIDS prevention programs in this township; in 2003 the PLACE protocol was again implemented in this township (Township 1), as well as in another township (Township 2), where a prevention program was not introduced. Funding was provided by the U.S. Agency for International Development (USAID), through the MEASURE *Evaluation* project.

A review of available data suggests that the incidence of HIV infection might be higher in townships and main industrial centers.

Epidemiological, socio-demographic, and contextual data indicated that townships and business districts in the Eastern Cape were at elevated risk of acquiring and transmitting HIV and other STIs. Two East London townships were chosen for a PLACE assessment and focused intervention, based on poverty, overcrowding, high mobility, and high levels of unemployment.

Where do people in East London meet new sexual partners? Between 2000 and 2003, there was a decrease in the overall number of sites and a shift of sites from shebeens to bars, taverns, and hotels.

In each study area, 300 to 600 community informants were interviewed to identify sites where people meet new sexual partners. A list of sites was developed and interview teams visited and mapped each site. At baseline in Township 1, 276 sites were identified, 88% of which were shebeens. The number of unique sites identified in Township 1 decreased at follow-up (n=256) and was smaller in Township 2 (n=226), but the diversity of sites increased in 2003 with more bars and spazas reported as sites of new sexual partnerships.

Activities at sites suggest the environment is conducive to high-risk behaviors, such as alcohol use and meeting new sexual partners.

At each site, a knowledgeable person was interviewed about the characteristics of the sites and the patrons who visited the sites. The majority of respondents reported that beer and alcohol were consumed at the sites and that people came to socialize with other people. Reports that people meet new sexual partners at the sites in Township 1 increased from 54% of sites at baseline to over 65% at follow-up. In Township 2, only 47% of sites reported that people meet new sexual partners at the site.

Individual characteristics rather than site characteristics play a greater role in identifying individuals with high rates of new partner acquisition and many recent partners.

Young age and a high level of education are important factors for identifying individuals at higher risks for HIV. Additionally, mobility, both in terms of being a non-resident of the township and visiting multiple sites in an evening relate to riskier behavior. Although site characteristics alone do not provide sufficient explanation of the differences in risk behavior of patrons, informal sites where alcohol is not served, such as streets and parks, have a high proportion of individuals with risky behaviors who socialize there.

In Township 1, individuals socializing at sites were younger, reported higher rates of sexual mixing, and higher rates of condom usage from baseline to follow-up. Respondents from Township 2 reported low condom usage and high rates of new sexual partnerships.

The majority of individuals socializing at sites were between the ages of 20 and 34, but at follow-up the proportion of 15- to 19-year-olds socializing at sites in Township 1 increased from 11% to 16%. Reports of ever meeting a new sexual partner at the site remained constant at approximately 25% for both baseline and follow-up in Township 1. In contrast, 50% of

respondents in Township 2 reported having ever met a new partner at the site. Over 50% of respondents in Township 2 had at least one new sexual partner in the past four weeks.

Condom use in Township 1 increased substantially between baseline and follow-up. In 2000, approximately one third of respondents in Township 1 had ever used a condom. In 2003, over 60% of respondents in Township 1 had ever used a condom. Condom use with new partners also increased in Township 1. Approximately one third of respondents in 2000 reported using a condom with their most recent new partner, and in 2003 this proportion increased to approximately two-thirds. In comparison, around 40% of respondents in Township 2 in 2003 had ever used a condom, and just under half of respondents had used a condom with their most recent new partner.

Overall, PLACE identified major gaps in AIDS prevention activities and condom availability at baseline. Intervention efforts resulted in a higher percentage of sites that hosted AIDS educational activities and distributed condoms.

At baseline, over 90% of respondents stated that they would be willing to host on-site AIDS prevention activities, yet only 23% of the sites had ever had such activities. At follow-up, almost 70% of sites had AIDS prevention activities and 42% had condoms available on the day of the interview. Less than 1% of the sites in Township 2 reported ever having an HIV/AIDS program and 12% had condoms available on the day of the interview. Almost three-quarters of site managers in Township 2 reported that they would be willing to host AIDS educational activities.

Program recommendations of the assessment: In Township 1, the high level of commitment to HIV/AIDS prevention needs to be maintained. In Township 2, a similar prevention program should be introduced. With strong community involvement, interventions need to focus on sites where new partners are met, while maintaining a strong general population prevention program.

Based on the findings of the PLACE assessments, the current peer-based intervention program in Township 1 should be maintained and strengthened, and a similar prevention program should be introduced in Township 2. These programs should focus interventions at the priority sites, such as large, popular, and youth sites identified by the PLACE assessments, and work to improve condom distribution to sites and on-site peer education and outreach focusing on limiting the number of partners and prompt management of STIs. The success of these programs depends on maintaining strong positive relationships with community members and associations.

Summary of Indicators from Assessments

Number and Type of Sites	Township 1 Baseline 2000		Township1 Follow-up 2003		Township 2 Comparison 2003	
Number of sites identified	276		256		226	
Number of sites in area characterized for AIDS prevention	235		195		217	
▪ Percent of sites where men meet women	54.0		68.2		47.5	
▪ Percent of sites where men meet men	2.6		5.1		2.8	
▪ Percent of sites where commercial sex workers solicit	1.7		10.3		8.8	
▪ Percent of sites that are shebeens	87.7		80.9		46.0	
▪ Percent of sites in operation for less than 2 years	16.6		22.7		19.4	
▪ Percent of sites that serve alcohol	87.6		88.7		49.3	
▪ Percent of sites with dancing on site	46.4		40.7		17.1	
AIDS Prevention Program Coverage						
Percent of sites in area:						
▪ that ever had HIV/AIDS programs	23.4		67.2		0.5	
▪ where site representative was willing to have program	91.9		-		70.1	
▪ with condoms were available on day of visit	14.5		42.6		12.4	
▪ where condoms are sold	—		0.0		0.0	
Number of condoms provided freely:						
▪ 0	—		48.7		94.9	
▪ 1-100	—		33.8		4.1	
▪ 101+	—		16.9		0.9	
Characteristics of People at Sites						
Percent socializing at sites who:	Men	Women	Men	Women	Men	Women
Are younger than 20	10.3	14.4	12.7	22.2	11.3	18.5
Visit the site every day	12.1	11.4	23.9	19.1	19.7	22.8
Ever met a new sexual partner at the site	25.7	22.2	25.6	23.8	53.4	47.5
Had at least 1 new sexual partner in the past 4 weeks	35.1	27.0	23.4	19.8	58.6	54.6
Had at least 1 new sex partner in the last year or more than one regular partner	28.0	20.6	31.7	29.0	24.7	24.4
Had 0-1 partners and no new partners in the last year	37.0	52.4	44.9	51.2	16.7	21.0
Who have ever used a condom	35.9	32.9	62.3	60.1	45.0	43.0
Who used a condom with the most recent new partner	11.7	10.1	16.3	12.7	24.6	25.1
Who have attended an AIDS educational session	12.2	16.2	53.0	54.5	19.7	18.5

Background and Objectives

The HIV Epidemic in South Africa

South Africa currently has more HIV-positive individuals than any other country in the world. With an estimated 4.8 million people already infected, 250,000 deaths attributable to AIDS in 1999, 420,000 cumulative AIDS orphans (AIDS-related death of mother or both parents while under age 15), and a country-wide HIV prevalence estimated at 20% (UNAIDS, 2003), South Africa is clearly experiencing an overwhelming health crisis. Antenatal survey data show an exponential increase in HIV prevalence from 1990 to 2000 among pregnant women with 24.5% testing positive for HIV at public antenatal clinics in 2000 (RSA, 2000). Figure 1 represents the trend in HIV prevalence among antenatal public clinic attendees in South Africa in the past decade.

The overall increase in HIV/AIDS is due in part to the rapid increase of HIV infection in certain provinces of South Africa. Table 1 highlights the differing distribution of the epidemic and its impact on different age groups within the population. In Table 1, prevalence of HIV ranges from 36.2% in KwaZulu Natal to 8.7% in the Western Cape. East London is located in the Eastern Cape where an estimated one in five people of reproductive age is infected with HIV/AIDS. Table 2 shows the rate of infection according to age group, which reflects the concentration of epidemic in the 20-24 and 25-29 year old age groups.

The PLACE Background and Protocol

Population-based sero-surveys designed to identify areas empirically with high HIV

incidence are rarely conducted due to cost, feasibility, loss to follow-up, and ethical concerns. A climate of limited resources requires a methodology that provides rapid, reliable and valid field methods for identifying areas most at risk for HIV infection. The Priorities for Local AIDS Control Efforts (PLACE) method is a monitoring and evaluation tool that provides a valid estimate of places with a high rate of new sexual partnership formation (Weir, Pailman, Mahlalela, Coetzee, Meidany, & Boerma, 2003). Dubbed “high transmission areas” (HTAs), these areas contain sites, such as bars or taxi stands, where people with high rates of partner acquisition meet to form new sexual partnerships. A new sexual partnership is an important event contributing to the continuation of the epidemic because a newly infected individual is highly infectious and more likely to spread the virus to another person. To prevent new infections effectively, PLACE provides a roadmap for AIDS prevention programs by identifying sites where new sexual partnerships are formed and, therefore, where interventions are most needed. This place-based approach is unique in that it goes beyond the stigmatizing approach of focusing on high-risk groups and clinic-based populations to encompass all determinants of risk, including poverty, unemployment, alcohol consumption, high population mobility, urbanization, high male-female ratio, and lack of health care services. The identification of specific sites where AIDS prevention programs could be most effective results in the development of informed sexual network-based interventions within high transmission areas.

Figure 1. National HIV survey of women attending public antenatal clinics, 1990-2002.

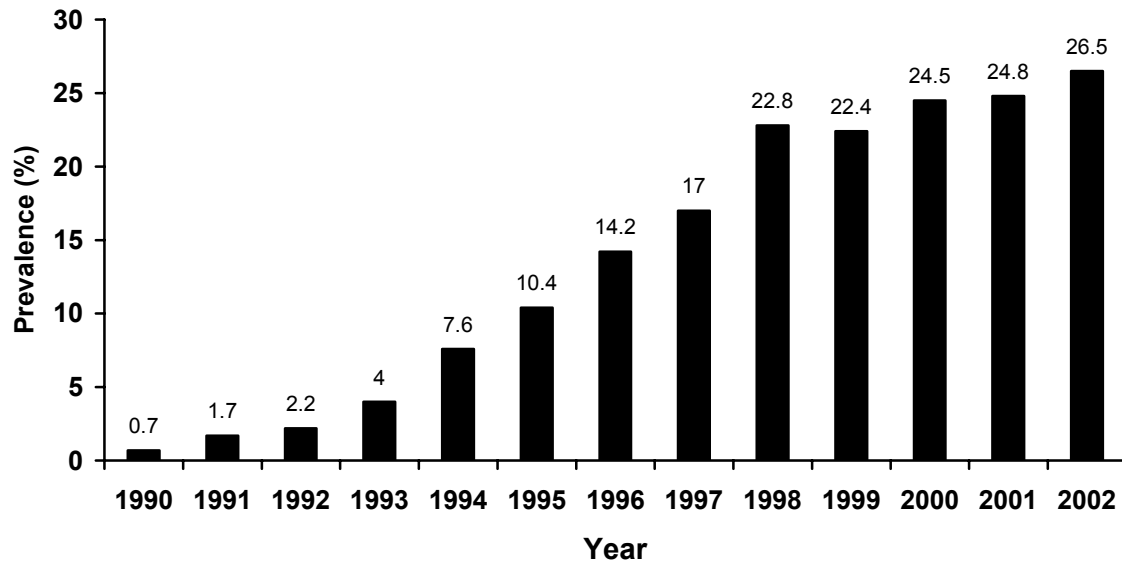


Table 1. HIV prevalence by province, 2000

Province	HIV
KwaZulu Natal	36.2
Mpumalanga	29.7
Gauteng	29.4
Free State	27.9
North West	22.9
Eastern Cape	20.2
Northern Province	13.2
Northern Cape	11.2
Western Cape	8.7
National	24.5

Table 2. HIV prevalence by age group, 2000

Age group	HIV
<20	16.1
20-24	29.1
25-29	30.6
30-34	23.3
35-39	15.8
40-44	10.2
45-49	13.1

Table 3 presents the methodology in five key steps of the PLACE Protocol. The first step is to use available epidemiological and contextual information to identify areas likely to have a higher incidence of HIV infection. Subsequent steps use rapid field methods to identify, map, and characterize sites within these areas where people with many new sexual partners can be reached for targeted interventions. All sites in an HTA, not just traditional ‘hot spots,’ are identified because, along with well-selected M&E indicators, a map of these sites can help program planners focus intervention efforts where the opportunity for HIV transmission is likely to be greatest. Characteristics of people socializing at these sites, including general demographics and rates of new sexual partnerships, are obtained. The new partnerships that are formed at these sites are important for transmission control because individuals with high rates of new partner acquisition are more likely to have new infections, which are transmitted more efficiently from one person to another. Findings from these four steps are used to inform and implement an intervention in the HTA.

The PLACE method was conducted in two townships in East London. The PLACE protocol was adapted to the initial township, Township 1, through discussions with local organizations, including KULA Development Facilitators (KULA), the Department of Health, AIDS Training, Information, and Counselling Centre (ATTIC), and the EQUITY Project. To monitor and evaluate interventions implemented in Township 1, researchers went through three different phases of data collection: baseline, follow-up, and comparison.

Figure 2 illustrates the progression of the phases in relation to the stages of the

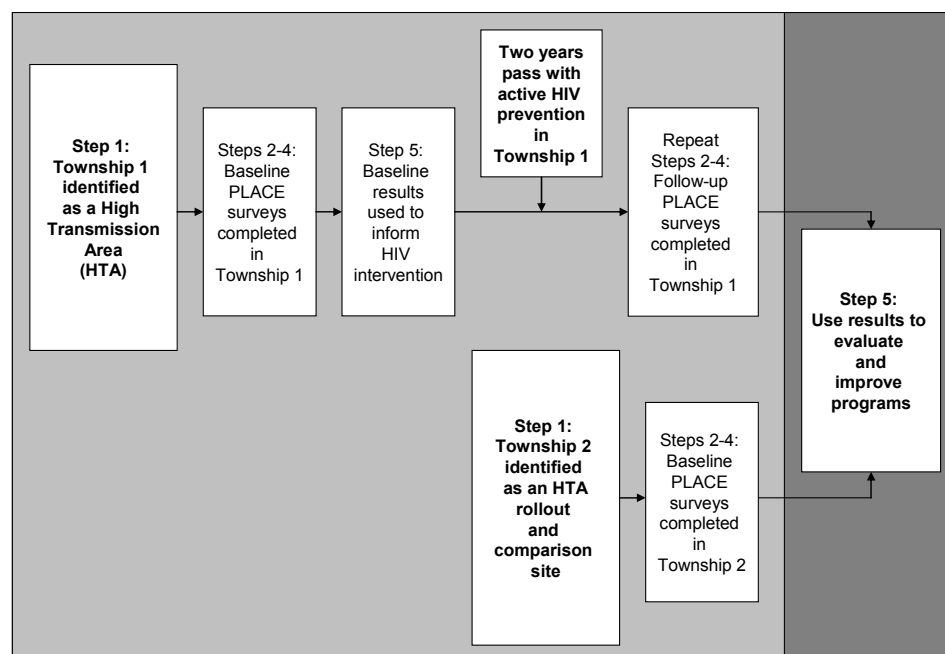
PLACE method. The first phase, entailed the collection of baseline data from Township 1 in 2000, not only provided baseline measures, but also informed the intervention described below. Post-intervention, follow-up data collection was completed in Township 1 in 2003, providing the opportunity to monitor changes over time and the success of the intervention. At the same time, comparison data were collected in Township 2, an area with similar characteristics that did not receive an intervention, to evaluate the success of the Township 1 intervention. The collection of comparison data was also considered a “roll-out” of the PLACE method and provided baseline measurements for Township 2, an area that had not yet benefited from the method. Ideally, the cycle of baseline, follow-up, and comparison should continue until sexual-networks are identified and targeted throughout an entire country.

Table 3. The five steps of the PLACE protocol

Step	Objectives	Methods	Outputs
1	Adapt protocol Obtain community support Obtain ethical approval Identify and describe areas likely to have high HIV incidence Select location(s) for PLACE assessment	Collaborate with local implementers Community meetings Ethical review Field tests of protocol Synthesis of available reports Discussion with experts Determine community informants	Approved protocol with methods, sampling, table shells, questionnaires, manuals Specific geographic areas selected and context of the epidemic described.
2	Within selected areas: Identify sites and events where people meet new sexual partners	Community informant interviews with 300+ people likely to know where people meet new sexual partners	A unique list of sites where people go to meet new partners
3	Conduct site visits Verify community informant reports Obtain site and patron characteristics to aid in the development of prevention programs	Verify existence and location of sites Interview with responsible person on-site Preliminary mapping of sites	Tables characterizing sites: whether new partnerships are formed at site, patron characteristics, on-site intervention, and condom availability
4	Describe patrons of sites Estimate rate of new partner formation among individuals socializing at sites	Individual interviews with a sample of patrons socializing at selected sites	Tables describing new partnership formation, condom use, site attendance, patron characteristics
5	Summarize findings Estimate monitoring indicators Prepare a map useful for the intervention	Conduct data analysis Map sites on air photo or map	Report of findings including baseline indicators for monitoring and maps

Source: Adapted from Weir & Boerma, 2002.

Figure 2. Steps of the PLACE method used in Township 1 and Township 2.



Intervention Protocol

Development of the Intervention

After receiving feedback from the community, the AIDS education intervention for Township 1 was developed by coupling baseline data collected in 2000 with an existing peer-based intervention program being implemented in the township. The intervention focused on vulnerable women in the community. According to baseline findings, areas in need of additional programmatic support were education, improved STI treatment, condom availability/distribution, and Voluntary Counselling and Testing (VCT). The intervention incorporated the following specific recommendations established during the baseline assessment:

- 1) *Maintain strong positive relationships with Township 1 community associations.*

The local community embraced and supported the baseline assessment. It provided access to sites and survey respondents. The strength of the community and the local leadership are resources that the intervention relied upon and utilized to the fullest.

- 2) *Focus interventions in the poorest areas.*

Most of the sites were in densely-populated poor areas with temporary housing. In such an environment, the population is particularly vulnerable to the effects of poverty and infectious disease, including HIV.

- 3) *Focus interventions in the sites most frequently named by community informants and in sites where half or more of the women visiting the site are younger than 18.*

Sites that were most frequently named were more likely to have higher self-reported rates of new partner acquisition and more mixing with sites from outside Township 1. Sites where young girls meet new partners were also key intervention sites.

- 4) *Take full advantage of the willingness of responsible people at sites to host intervention outreach programs and condom distribution.*
- 5) *Consider all community residents in Township 1 at risk, especially those who frequently visit sites named by community informants.*

Very few sites representatives reported that commercial sex workers visit the site. They also reported that the proportion of sex that involves a cash payment is not a large one. The rate of new partner acquisition among people who do not belong to any commonly identified risk group, however, is more than high enough to sustain the HIV epidemic.

- 6) *Maintain fast-track services for treatment of sexually transmitted infections for participants in the peer education program.*

In addition, baseline data provided the geographic co-ordinates of sites used to generate a map of the sites in the HTA. Using this map of the specific sites, the intervention team identified clusters of sites where implementation would be most effective based on high partnership rates and low availability and use of condoms. Once they identified these areas, they allocated peer health educators and prevention materials towards these clusters of sites.

Essential to the development of the intervention was the involvement of local organizations and community leaders. From the planning phase onward, the local AIDS Training, Information, and Counselling Centre (ATICC) and the South African National Congress Organization (SANCO), a local civic organization, were fully involved in the process. The buy-in from these local organizations coupled with support from community leaders contributed to the community's acceptance of the intervention.

Objectives of the Intervention

The objectives of the intervention were to improve education about HIV, increase awareness about STI treatment, and improve condom availability and distribution in areas where new sexual partnerships are formed. Twenty-five peer health educators recruited from the community comprised the main component of the intervention. They carried out a total of 76 outreach sessions per week and were responsible for both education and condom distribution. Through innovative techniques such as singing, role-playing, and outreach visits, peer educators disseminated messages about using condoms, getting frequent STI check-ups, and reducing the number of sexual partners. The following is a description of their techniques, as observed by one researcher:

Ten peer health educators block the road wearing dark pants and maroon shirts with an AIDS ribbon and a banner that reads: "E.L. High Transmission Area." They sing, "Hey you! HIV kills. It's not something to play about, let's take it seriously." Within five minutes, a crowd of mostly kids and young adults gather around. Some members of the crowd know the song and begin to sing along. As the singing quiets down, an introduction to the project is given and a role-play is performed about HIV/AIDS in their community. One of the roll-plays tells the story of two young women, one of whom is openly HIV-positive and very excited about her new boyfriend. She says she doesn't care that she is HIV positive, and she will not let him use a condom because she doesn't want to die alone. The friend is trying to be happy for her, but is obviously deeply concerned. The girlfriend leaves saying that she has to go find her new man. A monologue continues from the friend left behind. We discover that she knows the wife of her friend's new boyfriend and is concerned that she will contract the virus. She decides to visit the wife and inform her of what is happening. The closing scene of the role-play shows the friend comforting the wife,

who is crying after learning her husband is probably HIV positive and that she may be too. After the role-play is performed, the peer educators ask questions to process the experience. The crowd of around 80 people is fully engaged with the question and answer session that follows. They finish with a song and distribute condoms to the crowd.

In addition to the street performances, peer educators distributed condoms to sites identified in the baseline study, which consisted mostly of shebeens and taxi stands.

Step 1: How Was the Eastern Cape Province Selected for a PLACE Assessment?

During the planning process for the development of AIDS prevention interventions in 1998, involving local and provincial health officials, and staff and consultants of the EQUITY Project, officials found alarming levels of HIV infection in the Eastern Cape. From 1990 to 1998, HIV prevalence increased 40-fold among pregnant women (DOH, 2001). Figure 3 illustrates the increase in HIV prevalence from 1990 to 2001. According to the 1998 South African Demographic and Health Survey, knowledge about HIV/AIDS was well over 90%, but only one in 10 sexually active adults (13% of respondents) had used a condom during their last sexual encounter (SADOH, 1998). A study conducted in Township 1 in 1999, commissioned by The Joint United Nations Programme on HIV/AIDS (UNAIDS) and MEASURE *Evaluation*, had similar findings. The same study also found that many respondents in the area were willing to test for HIV.

The most recent antenatal care survey (DOH, 2000) found that within the Eastern Cape regions, HIV prevalence ranged from 17% to 24% (Figure 4). In Region C, in which East London is located, the prevalence of HIV was 15% in 1999 and increased to 17.8% in 2000.

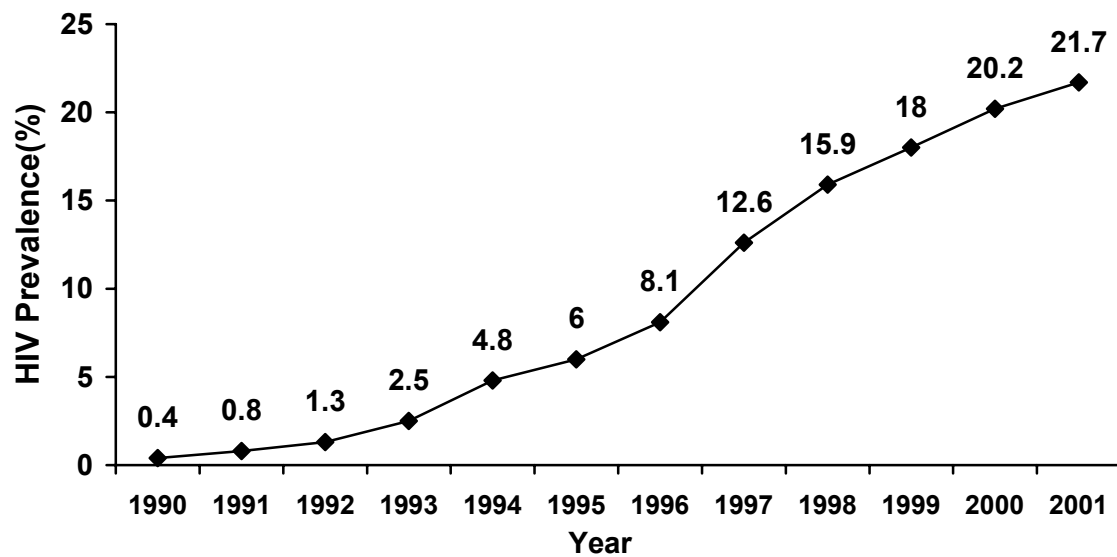
Although HIV prevalence increased, syphilis prevalence in the Eastern Cape has fallen in the past few years, from 10.7% in 1997 to 3.3% in 2000. This decrease may reflect the improved availability of condoms in clinics, increasing use of condoms, and/or improved treatment of sexually transmitted infections. Between 1997 and 1999, condom availability in government clinics increased

from 27% to 76% provincially (50% to 80% in the region surrounding East London). Proper treatment of sexually transmitted diseases according to standard treatment guidelines increased from 55% in 1997 to 91% in 2000.

Results of the Eastern Cape Department of Health Clinic Survey in 2000 show that, while almost all (95%) clinics in the region surrounding East London offer counseling for HIV/AIDS, just over half take blood for HIV testing (DOH, 2000). The local health authorities therefore have a major challenge in the fight against HIV/AIDS prevention for encouraging voluntary counseling and testing.

Concerning the prevalence of STIs, including HIV/AIDS, the situation in Township 2 differs somewhat from the rest of the province, particularly in relation to HIV testing. There has been a general increase in treated STIs in Township 2 over the past year. Most striking is the significant increase in the number of people being diagnosed HIV-positive over the past year (from 95 in 2001 to 643 in 2002), as shown by a recent assessment in Township 2. This might indicate an increase in the number of people going for voluntary testing or giving permission for blood tests when attending a clinic for other problems (such as STIs). However, without more detailed figures and information, it is only possible to speculate on what these numbers might indicate regarding the availability of tests, the willingness of people to be tested, and the actual increase in HIV infection.

Figure 3. HIV prevalence in the Eastern Cape.



Source: South Africa Department of Health ANC HIV Surveillance Data, 2001

Figure 4. Prevalence of HIV infection among antenatal care (ANC) patients in Eastern Cape.

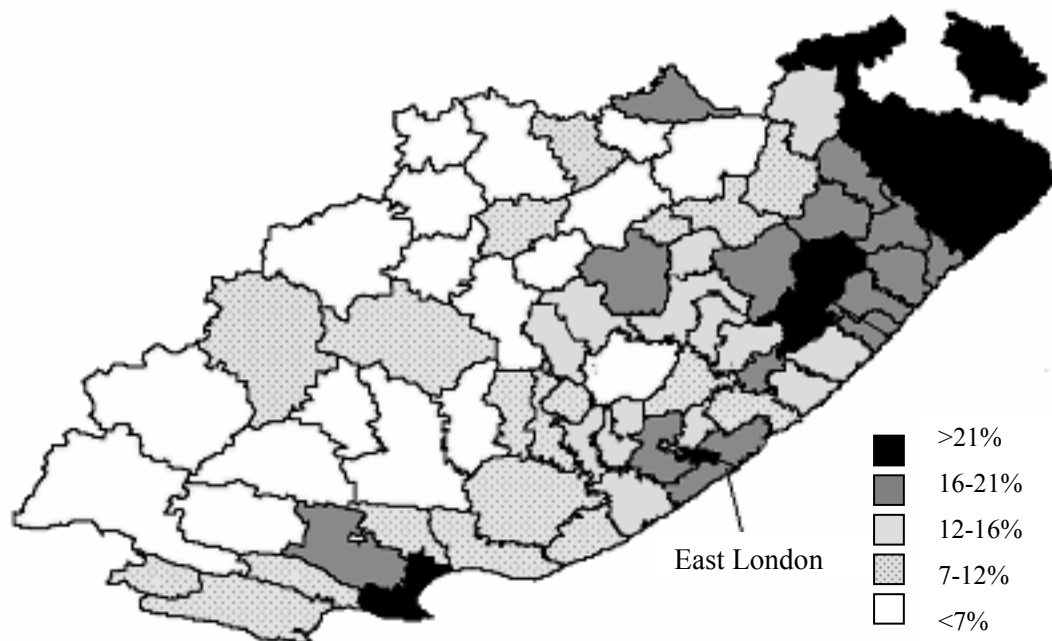


Figure 5. The selection process utilized in East London in 2000.

- A meeting was held with the East London Municipality, the Department of Health, ATICC, the EQUITY Project, and representatives from nongovernmental organizations to develop a process of HTA selection and select one HTA in the East London area for assessment and intervention, and follow-up.
- HTAs eligible for the study were vulnerable communities with an elevated risk for HIV. Communities of this nature are typically characterized by poor socioeconomic conditions, low literacy and high unemployment rates, and few economic opportunities. Women in these communities are particularly vulnerable to subsistence-based sex work as a means of survival. Other risk factors, such as a high prevalence of STIs and TB, and proximity to major transport routes, were also taken into consideration.
- A preliminary list of HTAs was developed and the potential HTAs were visited in order to assess which best fulfilled the criteria of high risk for HIV infection and project manageability.

In 1999, a steering committee composed of representatives from ATICC; EQUITY Project; MEASURE *Evaluation*; David Wilson, a consultant for EQUITY Project; and representatives from the townships chose a township in East London for the baseline study, based upon the following criteria: (1) the availability of epidemiological and contextual information indicating an elevated risk of acquiring and transmitting HIV and other STIs, and (2) project manageability factors. Additional criteria included population size, a low-income context, proximity to major roads or transport routes, and presence of sex workers. A description of this selection process, utilized in a meeting in East London, is described in Figure 5. To protect the confidentiality of the site for the purpose of this report, the selected area is referred to as Township 1.

Other areas in East London were considered besides Townships 1 and 2. For example, some areas of East London are acknowledged “hotspots” for commercial sex. However, the epidemic is not limited to any particular risk groups in the city and a focus on sex workers would miss those most

in need of HIV prevention messages. The conditions of poverty, overcrowding, high mobility, and high levels of unemployment associated with the township environment have been associated in other townships with sexual network patterns consistent with a higher risk of HIV transmission. For these reasons, Townships 1 and 2 were selected as the study areas. Moreover, success of the Township 1 HTA project generated an interest and desire from the Township 2 communities to replicate the project in Township 2.

Description of Assessment Areas

Township 1 – Baseline and Follow-up

Township 1, located near the city of East London, was established in the early 1950s to serve as a residential area for black people under the then Republic of South Africa’s racial segregation policies. At that time, housing consisted of small four-roomed “match-box” houses, separated from a neighboring “colored” township by a long main road, called the “highway.”

Today, Township 1 is a sprawling township with a population well over 100,000. Informal shacks greatly outnumber the original matchbox houses. Occupants of the informal shacks are either from the overcrowded four-roomed formal housing structures or have come from the rural areas of Transkei in search of work and a better life. Across the main road and adjacent to the colored township, are hostels that were built in the late 1960s to house male migrant laborers who came from the Transkei homeland to work in the numerous industries around East London. These hostels have now been renovated and converted into family units.

As in the rest of the Eastern Cape, the rate of unemployment in Township 1 is very high, estimated at more than 50%. Poverty is rampant, and as a consequence, the crime rate is very high. Streets are filled with people, including those seeking shebeens blaring music for drinks. Young children often play in the streets during times when they are supposed to be at school. There are few recreational activities for youth in Township 1. Health care for the people of Township 1 is provided from local clinics and a community health center. The center provides beds for birth deliveries and other short-term admissions, while the clinics only see outpatients.

The schools in Township 1 are modern by South African township standards, but are unable to accommodate all local school-age children. A public library, built in recent years organizes a number of activities, especially during school holidays, to attract children and youth from the streets. A local old age home built in recent years provides recreational activities at least three times a week for the elderly.

Township 1 can be divided into 11 branches. Each of these areas was assigned a code and was covered by the assessment. In one such branch, called the shack area, there are communal taps for water, electricity for those who can afford to pay, and public toilets typically shared by numerous households. There is no proper drainage system for water and the sewerage system is in a state of disuse. The population pyramid of East London (Figure 6) reflects a population in transition, with a large percentage of the population consisting of children, teenagers, and young adults. These young age-groups will be the most vulnerable to HIV/AIDS in the coming years.

Within the East London area, HIV prevalence may be highest in Township 1, and the area therefore is considered strategic for preventing further transmission of HIV and STIs. In addition, there are a number of other characteristics of the area that suggest it would especially benefit from prevention programs. First, the South Africa Demographic Health Survey found that reporting of symptoms of sexually transmitted infections among respondents who drink alcohol was almost twice as high as among non-drinkers (18.7% versus 10.3%). Township 1 had a high rate of unemployment and alcohol abuse. Second, many of the commercial sex workers loitering in the city of East London, soliciting truck drivers and other men, reportedly came from Township 1. Third, the port in East London is near Township 1 and busy truck stops line the road next to the port, providing potential clients for commercial sex. Therefore, due to the mobility of Township 1 residents, educating men and women in Township 1 about the dangers of unsafe sexual practices could reduce the transmission of the virus from Township 1 to other areas (SADOH, 2000).

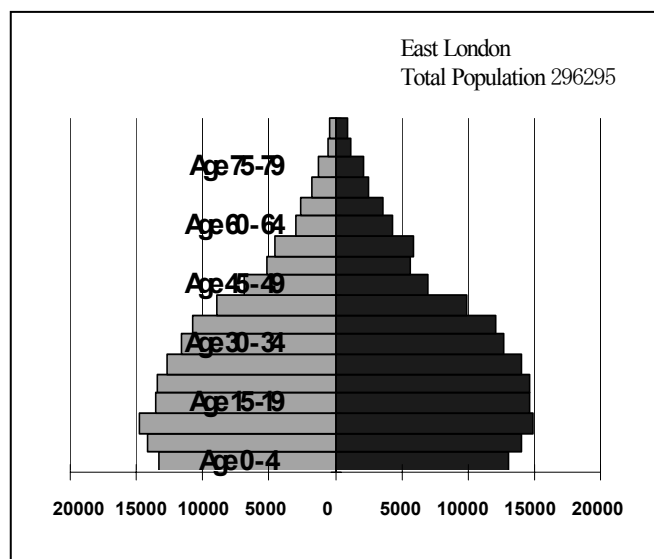


Figure 6. Population pyramid, East London.

Township 2 – Baseline and Comparison

Township 2 is composed of six informal settlements near the city of East London. The settlements have diverse origins. One arose as a settlement directly adjacent to a tuberculosis mission. Four others originated from the massive migration of rural people into urban and peri-urban areas in the early 1990s, following the repeal of the Group Areas Act, the law that designated residential areas to be segregated according to race. The remaining community arose from staff housing provided by the Agricultural Research Council to its staff in the early 1960s.

Today, except for one community, these areas are sprawling informal settlements with a combined population of over 24, 000 people. Informal shacks greatly outnumber the original buildings.

As in the rest of the Eastern Cape, the rate of unemployment in Township 2 is very high, estimated at more than 53% (DOH, 2001). Poverty is rampant, and as a consequence

the crime rate is very high. There are few recreational activities for the youth in Township 2. Health care is provided from a permanent clinic and one mobile clinic unit that visits different areas throughout the week. There is also one community health center, which provides services only to TB and HIV patients. The nearest hospital is Frere Hospital in East London.

The schools in these areas are very poor and are unable to accommodate all local school-age children. There is no public library, but a local children's home organizes a number of activities, especially during school holidays, to attract children and youth from the streets. There is no home for the elderly.

In the shack areas of four of the communities, communal taps for water and a few filthy public toilets are shared by numerous households. There is no proper drainage system for water and no sewage system. One of the communities is a formal settlement that has recently been provided with formal housing and services, and another has very old and dilapidated houses without other services.

HIV prevalence is believed to be extremely high in Township 2, and the area is therefore considered strategic for preventing further transmission of HIV and STIs. In addition, there are a number of other characteristics of the area that suggest it would especially benefit from prevention programs. As previously mentioned, Township 2 has high rates of unemployment, alcohol abuse and commercial sex work. In addition, Township 2 is along a trucking route and the port in East London is nearby, providing clients for commercial sex workers. Due to the mobility of Township 2 residents, educating men and women in Township 2 about the dangers of unsafe sexual practices could

reduce the transmission of HIV from Township 2 into other areas.

Community Partners and Ethical Review

The EQUITY Project and MEASURE *Evaluation* provided technical assistance for each survey team in Township 1 during study implementation, data analysis, and report writing. These core organizations worked closely with local counterparts to facilitate study implementation in the field and to ensure the proper dissemination of results at study completion. Local partners included KULA Development Facilitators, which implemented the surveys; ATICC, responsible for interventions; the East London Municipal Health Services; and the provincial department of health. The EQUITY Project played a key role in facilitating communication between the intervention team and the study team.

Initially in Township 2, the study team worked with ATICC and the Small Projects Foundation to develop the assessment. The Small Projects Foundation was appointed in October 2002 to conduct the baseline assessment. The goal of this study was to provide a guide for the development and monitoring of an AIDS prevention program scheduled to begin in Township 2 in early 2003. After the baseline assessment, the study team partnered with elected representatives from the six settlements that compose Township 2. In addition, the study team received support from ATICC, East London Children's Home, other community organizations, and nurses from nearby clinics.

The institutional review boards of the University of North Carolina at Chapel Hill and the University of Cape Town approved the protocol for this study. Implementation in the Eastern Cape was done under the

direction of the Eastern Cape Provincial Department of Health, which also participated in protocol review and approval. The provincial Epidemiology and Research Directorate endorsed the University of Cape Town ethical approval for the Township 1 assessment.

Preparation for Study Implementation

Selection of Interviewers

For each township, a team was hired and trained in qualitative interviewing techniques and proper data collection protocol. General criteria for interviewers included: interviewing experience, sensitivity to the study questions on sexuality, flexibility regarding working hours, and ability to communicate well with a wide range of respondents.

Interviewers for the Township 1 study, four of whom were social science graduates, were all recruited locally and met the following criteria:

- had minimum educational qualifications (completed high school)
- were unemployed and not engaged in full-time studies
- were familiar with community issues
- were involved in some form of community activities;
- were knowledgeable about Township 1 and residents in the area.

To have continuity from baseline to follow-up in Township 1, members of the study team participated in both study assessments.

In Township 2, 18 potential interviewers were nominated by the communities and established in a community meeting. 11

interviewers were then selected from this group. The criteria for fieldworker selection were:

- ability to read and write Xhosa and English
- reliability and honesty.
- being known within their respective areas and being familiar with their areas (physical geography as well as their community)
- being chosen by the community
- ability to walk long distances
- showing commitment
- ability to talk about sexuality without fear or embarrassment
- good communication skills.

Three peer health educators from Township 1 (selected by ATICC) joined the team in Township 2 to help conduct interviews and to coordinate the fieldwork at ground level.

Training of Interviewers

The interviewers participated in three different training sessions, one for each phase of data collection (community informant interviews, site visits, and interviews with individuals socializing at the sites).

The training program for each questionnaire occurred prior to the start of each phase of fieldwork. Discussions focused on the understanding of the research process and the level of comfort that each fieldworker felt in asking the questions, particularly in a culture in which the norms limit the discussion of sex. Before fieldwork began, the interviewers administered the questionnaires to each other for practice.

According to the PLACE protocol, the adaptation to local needs and circumstances requires that the study instruments be translated into the local dialect and then translated back into English. While interviewers were fluent in both Xhosa and English, they preferred to have the questionnaire in English so that the original intent of the question was available to them. In retrospect, English and Xhosa versions of the questionnaire would have been more suitable, allowing all interviewers to agree on how to translate each question.

Due to concerns that the interviewers would be at risk entering areas of the township in which they were unknown, it was suggested that ‘pathfinders’ be recruited to escort them during their field visits. However, after further discussions with SANCO and announcements to publicize the survey at numerous community meetings, the suggestion was dropped due to the supportive conditions created by the community.

Garnering Support from the Community

During both the 2000 and 2003 studies, support from the community was achieved through community meetings where leaders from prominent local organizations expressed their support of the study.

Step 2: Where Do People Go to Meet New Sexual Partners? Findings from Community Informant Interviews

A sexual network site is a place or event in an HTA where people with high rates of partner acquisition meet to form new sexual partnerships. A site could be a bar, a brothel, an all-night party, or a market place. In rural areas, sites may cluster around taxi stops or places that sell beer or other alcohol.

Methods

Community informant interviewing is the primary method to identify all sites where residents of the HTA meet new sexual partners. This interviewing technique is a rapid method for obtaining sensitive data not otherwise available and is especially useful for obtaining a list of sites that can be verified by other sources. By developing a list of sites commonly mentioned from many community informants, the bias from any individual informant is reduced. Self-presentation bias is minimized by avoiding questions about an individual's own sexual behavior.

Each study was designed to interview 300 community informants from separate geographic areas with the HTA, ensuring

that sites throughout the townships would be identified. To ensure that no sites were missed, predetermined geographic divisions that were familiar to the local community were used to divide each study area. From these geographic areas, community informants were interviewed until the field coordinator observed that no or very few new sites were being identified.

Community informants included both men and women. They held a variety of occupations, such as shebeen owners, taxi drivers, scholars, and nurses. Informed consent was required from each of the participants and was requested after explaining the reasons for conducting the study, providing a brief overview of the information requested, and assuring participants about the confidentiality of their responses. Interviewers recorded each participant's consent on the questionnaire. The minimum age of participants was 14 for Township 2 and Township 1 at baseline, and was 15 for Township 1 follow-up.

Table 4. Summary of community informant field work

	Township 1 baseline (2000)	Township 1 follow-up (2003)	Township 2 comparison (2003)
Days of community informant interviewing	5	4	14
Number of interviewers	14	10	14
Number of sites inside the township	284	254	304
Total community informants interviewed	297	398	579

Results

In East London, the total number of community informants increased from 297 at baseline to 398 at follow-up. The number of interviewers decreased and there were fewer days of community informant interviewing. Additionally, there was a slight decrease in the number of unique sites reported in Township 1 from 284 to 254 sites. In Township 2, 579 community informants reported a total of 304 unique sites in the township.

Figure 7 illustrates the types of community informants who were interviewed during the

three studies. For Township 1 at baseline and follow-up, the composition of community informants was diverse and included out-of-school youth, vendors, bar owners, and teachers. At follow-up, respondents also included STI patients and sex workers. The follow-up included a greater percentage of youth than during the baseline study. Township 2 had a much larger proportion of unemployed respondents and a greater representation of in-school youth. Figure 8 shows the proportion of community informants aged 15 to 19 years old.

Figure 7. Types of community informants.

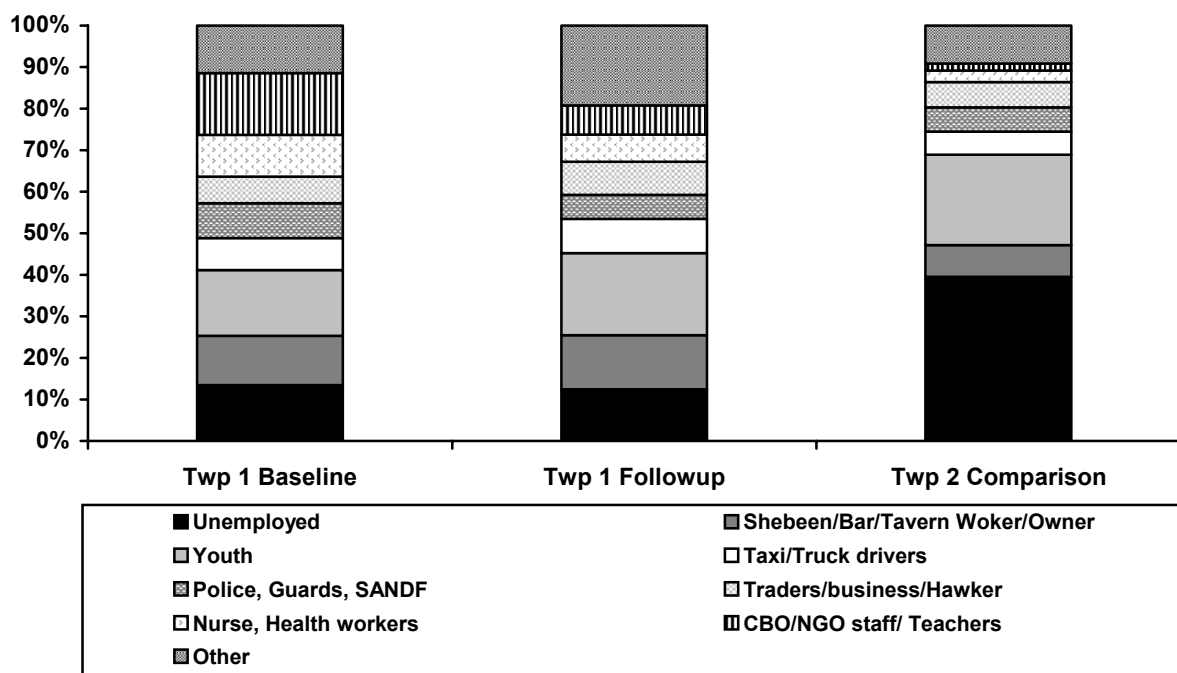
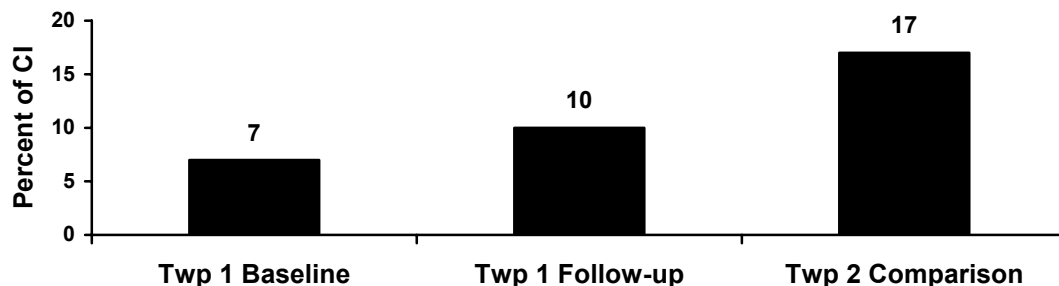


Figure 8. Percent of 15-19 year olds among community informants (CI).



Community informants who resided in the study area were particularly useful, as they were able to assist with the identification of informal sites that were either difficult to access or illegal, as was the case with shebeens. The use of different names for the same sites was challenging for interviewers. A site could have many different names, making it difficult to distinguish a new site from an already reported site. Interviewers found it challenging to locate some of the targeted community informants at follow-up, including STI patients, sex workers, and truck drivers.

Observations

At baseline and follow-up in Township 1 and baseline in Township 2, different names for the same sites made it difficult to come up with one list of sites. Therefore, data cleaning was not only about inconsistencies in the information given to interviewers, but also about which name to use from a list of different names for the same site – as many as 10 different names per site. Residents were curious to know what the interviewers with their clipboards and paper were doing in the area, and this made it easier to recruit respondents.

Discussion

The community informant interviewing methodology was found to be effective in identifying potential sites where people go to meet new sexual partners. Community informants remained anonymous and were willing to answer the short questionnaire. There were few refusals. At baseline in Township 1 and Township 2, interviewers limited the number of sites collected from each respondent to five or four sites, respectively.

At Township 1 baseline, sites reported by more than 20 community informants were considered of particular importance to the intervention. Community Informant reports of churches and local libraries named as places for meeting new sexual partners were unexpected. Interviewers felt that more community informant interviews could have been done.

From baseline to follow-up in Township 1, the cross-section of community informants became more diverse and included more youth. This change could be attributed to a modification in the questionnaire that added several more types of community informants who would be appropriate to approach. The

increase in students in the follow-up and Township 2 studies is reflected in the increasing proportion of 15 to 19 year olds among community informants. Of the three studies, Township 2 had the highest proportion of youth and unemployed individuals. The number of unique sites reported at Township 1 baseline decreased by 30 sites at follow-up, which could be due to a failing economy or the increasing rate of crime in the townships. Community informants in Township 2 identified 304 unique sites.

Step 3: What Are the Characteristics of Sites Where People Meet New Sexual Partners? Site Verification Interviews

Methods

In this phase of the fieldwork, interviewers visited each reported site to verify its existence and location, and to interview a person knowledgeable about the site (such as a bar manager or owner) to obtain characteristics of the site important for AIDS prevention. Where someone was not available for interview on the first visit, an appointment was requested for another visit. Verbal consent for an anonymous interview was obtained for each completed interview. Respondents were asked about the following:

- name of the site and number of years in operation
- types of activities occurring on site
- estimated number of clients at peak times
- alcohol consumption at site
- patron characteristics including their employment status, age, and gender
- whether people meet new and previous sexual partners at the site
- the extent of HIV/AIDS and STI prevention activities on-site, including condom availability and posters.

While sites were being verified, geographic coordinates were collected by the research teams. Each team was equipped with a vehicle and a hand-held global positioning system (GPS) unit. The final stage involved linking the point data appearing on the drawings or maps with a database, to allow the data to be searched, filtered, or otherwise sorted, depending on the need.

At baseline in Township 1, an initial list of sites was developed by the fieldwork coordinator, based on the list of sites reported during the community informant interviews. To ascertain which of the sites had been verified, to identify and remove the duplicates, and to determine which sites had yet to be visited, the community guides were brought into the verification process. Once they had completed this process, a final list of sites was drawn up and interviewers were sent to sites that had not yet been verified.

LUKHOZI Engineering, a unit of Kula Development Facilitators, conducted the mapping of the sites in Township 1. The mapping was undertaken as a three-stage operation. The first stage comprised a desk study, which involved the collection and collation of the cadastral maps of the area. Maps of Township 1 and surrounding areas were obtained from the East London municipality. As some of the maps were outdated, it was necessary to verify the mapping via a site visit.

The second stage involved visits to the sites. Two teams were sent to the study area, each equipped with a vehicle and a hand-held GPS unit (Garmin GPS 12). Information from the GPS device was transferred onto maps in the evening after each day's visits. From the information given by the GPS and local residents, geographic co-ordinates of all the sites were identified. There was good correlation between the co-ordinate information obtained from the GPS and the mapping provided by East London municipality.

The third and final stage was data manipulation and preparation of the drawings/maps. This involved linking the point data appearing on the drawings/maps with a database to allow the data to be searched, filtered, or otherwise sorted, depending on the need.

The maps are extremely useful in presenting the collected data in a rapid and easy to digest manner. After the baseline assessment, they specifically allowed for the planning of intervention strategies by identifying clearly and quickly these areas requiring special attention. By constantly updating the maps, the intervention team was able to monitor changes in the HTAs.

Results

Site verification is summarized in Table 5. While the number of interviewers remained 10 or more, the 10 days of site verification at baseline decreased to six days at follow-up in Township 1. This led to the identification of 276 sites at baseline and 256 at follow-up. During the follow-up study, interviewers completed site verification for almost 10% fewer sites than at baseline. In part, this resulted from more closed sites in the area due to the government cracking down on illegal shebeens. In Township 2, 226 sites were reported, and interviewers located and interviewed a knowledgeable person at each of 217 sites.

Type of Site

In Township 1 baseline and follow-up, shebeens were mentioned as the most common place for individuals to meet new

Table 5. Summary of site verification field work

	Twp 1 baseline	Twp 1 follow-up	Twp 2 comparison
Days of site verification	10	6	6
Number of interviewers	14	10	15
Number of unique sites named in the HTA	276	256	226
Outcome of site verification visits (percent of total):			
▪ site found and person interviewed	85.1%	76.2%	96.0%
▪ site found but manager refused	4.0%	1.6%	4.0%
▪ site not found, closed, or no longer a site	10.9%	21.5%	none
▪ missing	none	0.8%	0.4%

sexual partners (Figure 9), while in Township 2, shops and churches were more frequently reported. Empty plots and streets were also mentioned.

In Township 1, the busiest times for sites were Friday and Saturday nights during the summer months. During these busy times, the number of men and women coming to the site ranged from fewer than 10 to over 500. About 62% of the sites in Township 1 at follow-up were close to a busy road.

Activities On-site

In Township 1, most sites reported that beer is consumed while slightly fewer sites reported that hard alcohol is consumed. When compared with baseline results, TV/video watching was greater at follow-up, whereas dancing and music remained the same. Sites in Township 2 had the lowest rates of all activities (Figure 10). In part, this relates to fewer bars and shebeens among verified sites in Township 2 compared with Township 1.

At Township 1 baseline and follow-up, the majority of sites had patrons that were

residents of the area. Approximately half of the sites at follow-up reported that non-residents also frequent the site. In Township 1, site representatives reported that people of all ages over 18 come to socialize. However, less than a quarter of sites reported that people under the age of 18 visit these sites. In contrast, over half of the sites in Township 2 reported that some or most of the patrons are under the age of 18. Unemployment appeared to be a much bigger problem at follow-up than baseline for Township 1. Over 90% of sites at follow-up reported that some or most of their patrons were unemployed compared with just over half of the sites at baseline.

New Partnership Formation

Reports of people meeting new sexual partners increased from baseline to follow-up in Township 1 (from 54% to 68%) and were reported at only 47% of the sites in Township 2 (Figure 11). The number of sites

reporting female sex workers operating on site was 2% at baseline and 10% at follow-up in Township 1, and reports of someone facilitating a partnership did not change in Township 1. Female sex workers were reported at 9% of the sites in Township 2.

AIDS Prevention Activities On-site

Only 23% of the sites in Township 1 had ever had any AIDS prevention activities at baseline. This proportion increased to 67% at follow-up. In Township 2, only 1% of sites reported ever having any AIDS prevention activities (Figure 12). Over 90 % of site owners were willing to have AIDS prevention activities at their establishments at baseline in Township 1. Sites with condoms available on the day of the interview increased from 8% at baseline to 43% at follow-up. This was much higher than sites in Township 2 (12%) at baseline.

Figure 9. Type of site by township.

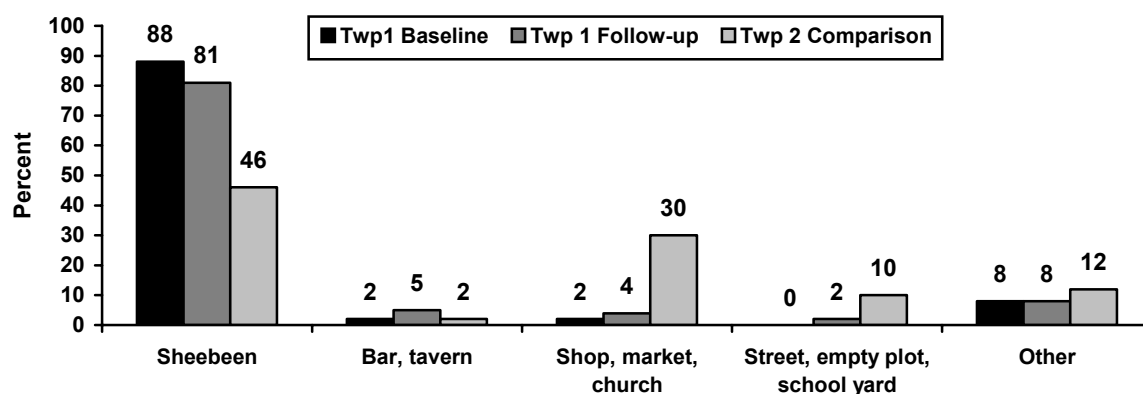


Figure 10. Activities reported on-site.

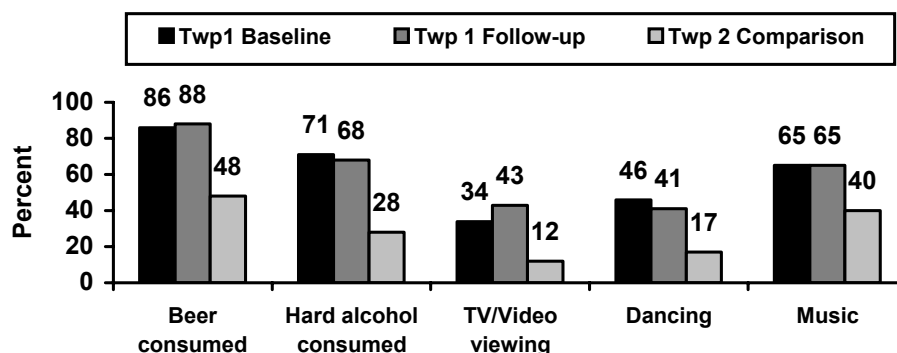


Figure 11. Percent of sites where respondents report sexual partnerships.

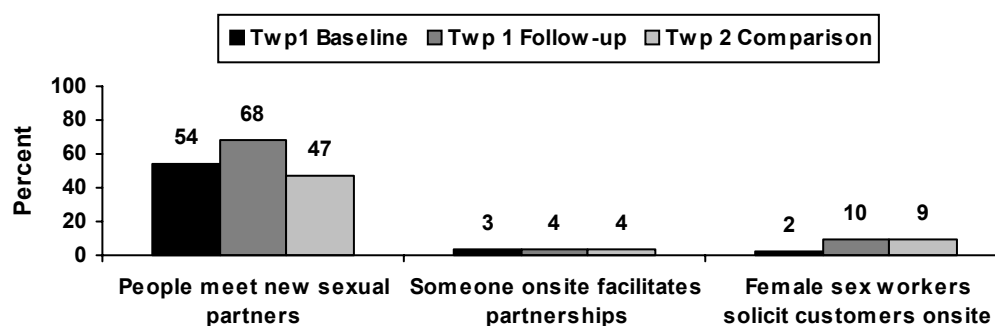
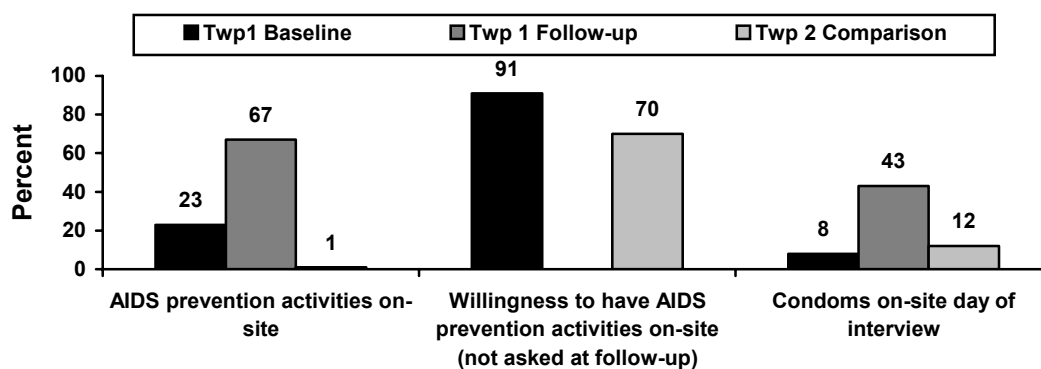


Figure 12. Percent of site verification respondents who report past AIDS prevention activities, willingness to have AIDS prevention activities, or condoms on-site.



Condom Availability

Condoms were more frequently available in Township 1 at follow-up than in Township 2, indicating that efforts had been made to distribute condoms to identified sites in Township 1. However, close to 30% of sites in Township 1 reported that condoms were never available. Over 80% of sites in Township 2 reported that condoms were never available (Figure 13).

Sites Included in Baseline and Follow-up in Township 1

Of the 235 sites in Township 1 that were verified at baseline in 2000, investigators matched 113 sites at follow-up in 2003. Although the study team verified 104 of the 113 sites at follow-up, nine of the sites had either closed down temporarily or permanently. Data from 2000 and 2003 for the sites verified at both time periods provide a direct comparison of changes in site characteristics, demographics of site patrons and HIV/AIDS prevention activities.

Some site characteristics remained the same from baseline to follow-up, including whether alcohol is served and the age of the patrons who frequent the site. In contrast, slight changes in the size and type of the sites occurred between baseline and follow-up. Ten sites that were smaller shebeens in 2000 had expanded to become larger, formal bars (n=5) or stores (n=5) by 2003. Possibly due to the high turnover of shebeens, 13 of the matched sites changed names or operated under new ownership from baseline to follow-up.

Several notable changes transpired concerning prevention efforts at the sites and the availability of condoms (Figure 14 and Table 6). Although 14% of the sites reported no intervention activities at either assessment, 20% reported having prevention

at their site in 2000 and 2003. Of the 76 sites that did not take part in any AIDS prevention activities in 2000, 61 reported having AIDS prevention efforts on site by 2003.

According to site representatives, condom availability increased dramatically between 2000 and 2003, as shown in Table 6. Of the 76 sites where condoms were never on hand in 2000, 34 sites reported condoms sometimes available and 27 reported condoms always available in 2003. The number of sites on the diagonal from the upper left cell “Never/Never” to the lower right “Always/Always” cell (15, 5, 3) indicate the 23 sites that reported no change from 2000 to 2003. The three shaded cells in the upper right illustrate the eight sites that reported decreased accessibility to condoms by 2003.

Interviewers also asked respondents if it was possible for someone to find a condom at night, either at the site or within a 10-minute walk. Over three-quarters of the sites where condoms were not available nearby at baseline reported that patrons had greater access to condoms at follow-up.

Figure 13. Percent of sites where condoms were available in past year.

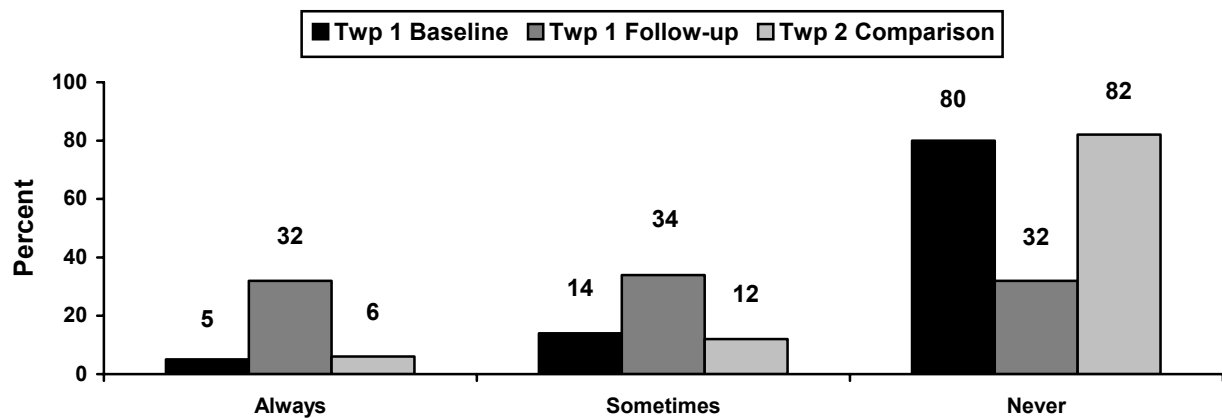


Figure 14. Percent of 104 matched sites (2000-2003) in Township 1 with HIV/AIDS prevention activities by year of study assessment.

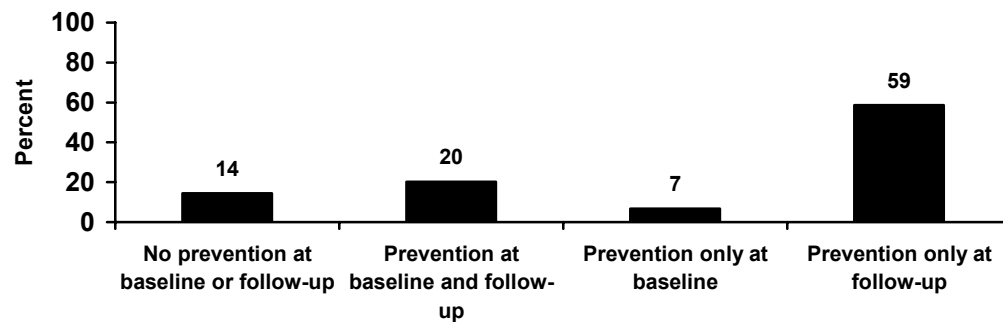


Table 6. Condom availability at 102 sites (percentage of sites) in Township 1 by year of study assessment

		Baseline 2000: Condom Availability			2003 Total
		Never	Sometimes	Always	
Follow-up 2003: Condom Availability	Never	15 (15%)	5 (5%)	1 (1%)	21
	Sometimes	34 (33%)	5 (5%)	2 (2%)	41
	Always	27 (26%)	10 (10%)	3 (3%)	40
	2000 Total	76	20	6	102

Network of Sites per Site Verification at Follow-up

During follow-up in Township 1, interviewers asked site representatives to identify up to two other places where patrons meet new sexual partners. Newly identified sites were not verified. Figure 15 illustrates the network of 313 linked sites named by one or more of the site representatives. Although the majority of sites (66%) were linked to one or two other sites, and 60 of the sites were linked to three or four other sites, 46 sites were linked to at least five other sites.

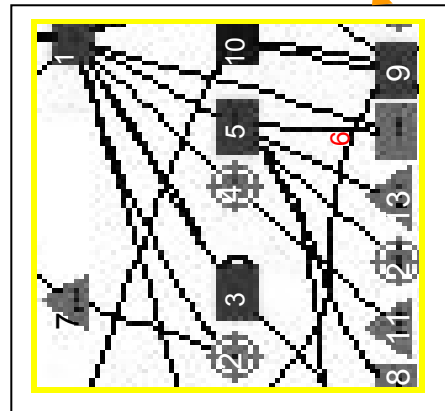
Approximately 129 verified and 75 unverified sites in Township 1 were linked, suggesting an extensive and diffuse sexual network within the township. Furthermore, 72 of the 75 unverified sites were named by only one or two site managers, which suggest that, although important in the network, the unverified sites are less popular among patrons.

In addition to linked sites within Township 1, site representatives indicated that patrons also meet new sexual partners at 109 sites outside the PLACE study area. Although the majority of these sites are geographically close to the Township, some are located in relatively far away cities and towns. Linkages to these sites indicate the mobility of this population and the increased opportunities for the spread of HIV in this population.

The more linkages an area has, the more opportunities to introduce and extend the range of incidence of STIs. For example, consider the subset of the larger network of sites shown in Figure 15 inset. Site 1 is directly linked to sites 2-6, and indirectly connected to sites 7-13. For example, site 1

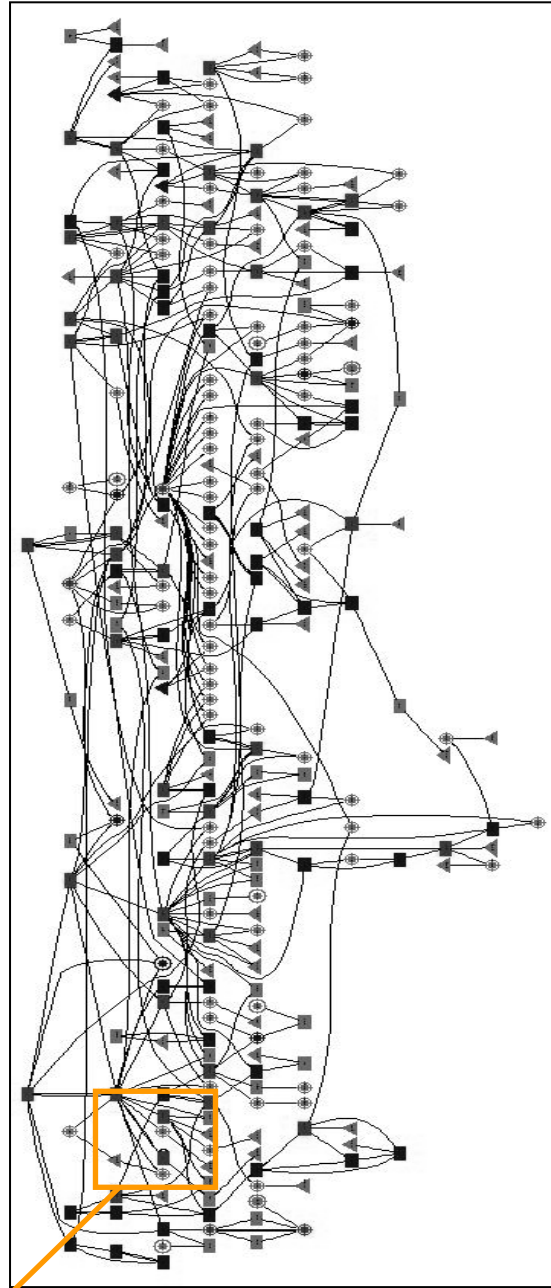
is linked indirectly to site 12 through its direct link to site 5. These linkages have enormous implications for the transmission of HIV. Infected individuals at site 1 not only have the potential to spread the disease to people at that site, but also to all linked sites, which in this abbreviated example includes 12 other sites. Multiply these effects by 25 and one can see the full magnitude of a network of 313 connected sites.

Figure 15. Site verification network of 313 sites named by site managers during the Township 1 follow-up.



- 46 Sites with 5+ Links
- 60 Sites with 3-4 Links
- 207 Sites with 1-2 Links

- 129 sites Inside Twp 1, Verified
- 75 Sites Inside Twp 1, Unverified
- 109 Outside Twp 1



Observations

Reporting Biases

Interviewers during the site verification process reported that they felt that some site owners and managers were not being entirely honest. They speculated that this was due in large part to the local effort to crack down on illegal shebeens. Owners and managers of new shebeens were afraid to say anything that could potentially get them in trouble with the local authorities.

Reluctance among Shebeen Owners

At baseline in Township 1, the interview team experienced some interview refusals among some shebeen owners. These individuals were reluctant to tell interviewers how much alcohol was sold at their sites, fearing this information could be passed to the police. In addition, interviewers also experienced difficulty working late at night. They occasionally felt at risk and their safety was never guaranteed. In a few cases, interviewers were asked to leave shebeens. The shebeen owners who were reluctant to have AIDS prevention programs at their sites said they were concerned because of young children residing at those sites.

From qualitative interviews with site managers at baseline in Township 1, some indicated they were willing to sell condoms, but doubted whether their intoxicated patrons would be interested in using condoms. "If we give them condoms, then the next day the children will be collecting 'balloons' from all over the place!" commented one site manager.

Interviewers reported that sites with HIV/AIDS intervention activities were much more open to talking about condoms, sex work, and HIV/AIDS than other sites. These site representatives recognized that the study team was collecting information to inform

the intervention, were more comfortable with the questions, and were less suspicious of the intention of the interviewers.

At the seven sites in Township 2 where interviews were refused, site owners were reluctant to have their sites verified due to their fear of police raids. Many of the shebeens operate and sell alcohol illegally. In one of the communities, there had been shebeen raids by police the week prior to site verification. This was cause for concern from one shebeen owner who thought that there might be further raids. He said that he thought the information obtained from the interviews was going to be communicated to the police.

Interviewers working in one of the communities in Township 2 also reported that there was a lack of trust from some owners regarding the use of the information from the research. These owners thought that the government was trying to obtain information in order to locate the shebeens in the area. At one site in this area, the owner did not want to be interviewed, but some of the patrons at the site went to the interviewer afterwards to find out more about HIV/AIDS. This interviewer was able to give advice and referred people to clinics for more help and information. People here specifically requested that more HIV/AIDS workshops be held in the area.

A tavern owner in Township 2 said that the government "is tricky" and that the interviews are a way to get police involved. This owner was worried that he and his patrons would be arrested. Although interviewers stressed to each site owner or manager that the information gathered from the interviews was confidential and that the baseline survey was in no way connected to the police, the fear of police raids was strong.

Site Verification

The process of assessing whether or not all the sites had been verified was difficult and time consuming. For example, very few of the community informants were able to provide street addresses for the sites they identified. In addition, the residents of each area did not uniformly recognize similar geographic boundaries. Different community informants reported the same site in different geographic areas. This resulted in different groups of fieldworkers verifying the same site. Finally, many of the shebeens and taverns in the area are known by two or three different names, and some of the residents own more than one shebeen of the same name. This, together with no clear geographic boundaries, made it very difficult to ascertain which sites had been verified and which had not. The final verification of all the sites was accomplished with the assistance of guides familiar with the area.

Mapping the Sites

Mapping sites was difficult because the addresses given for some of the sites were not in the same format as those on the maps that were being used. In addition, GPS readings were not obtained for all the necessary sites. As a result, only approximate locations were given for certain sites. Very few of the questionnaires had complete physical addresses, which meant that the majority of sites could not be plotted directly onto the allotment area map or photograph. The majority of sites had community descriptions of their locations, which required identification by the community leaders who had been working as fieldworkers during the PLACE assessment.

Discussion

The findings of the baseline assessment in Township 1 clearly documented a need for AIDS prevention programs at these sites. There is very little evidence of HIV/AIDS prevention activities taking place at the sites. The intervention team used these findings to direct their efforts between the 2000 assessment and follow-up in 2003 in Township 1. A similar situation was found in Township 2. The urgency of putting in place HIV prevention interventions cannot be over-emphasized. A considerable number of site managers were willing to participate in HIV/AIDS prevention activities, including selling condoms.

Baseline results indicated that shebeens were the primary sites of new sexual partnership formation in Township 1. However, from baseline to follow-up, shebeens decreased slightly from 88% to 81%. Follow-up data seem to indicate that other venues such as bars, taverns, and hotels are becoming important sites to investigate. This shift may have occurred because of the increasing amount of raids on shebeens at follow-up. Police raids may have also contributed to the overall reduction in sites reported from baseline to follow-up in Township 1 and by the small number of shebeens verified in Township 2 (46% of sites).

The environment of sites is conducive to increased sexual activity among patrons. For example, beer and alcohol consumption at sites may lead to impaired judgment and increase the possibility of unprotected sex. Fewer sites reported the consumption of hard alcohol from baseline to follow-up in Township 1. In Township 2, less than half of sites reported hard alcohol consumption. Reports of meeting new sexual partners increased at follow-up in Township 1 from 54% to 68%, and was 47% in Township 2,

indicating high-risk behavior among patrons at verified sites.

Efforts to distribute condoms and provide health education about HIV in Township 1 were evident from an increase in both HIV/AIDS prevention activities and the presence of condoms at follow-up sites. However, more efforts are needed since only 67% of sites had AIDS prevention activities at follow-up. No intervention has occurred in Township 2, as evidenced by only 1% of managers reporting prevention activities. Encouragingly, 70% are willing to participate in HIV/AIDS intervention activities.

Sites Matched at Baseline and Follow-up

Although community informants in 2003 named nearly half of the sites verified in 2000, 122 of the sites verified at baseline remained unmatched at follow-up. Several factors contribute to this incongruence. Sites verified in 2000 may have become less popular and therefore were not named in 2003, or due to the transient nature of the shebeens, the sites may have dissolved. In fact, just prior to the 2003 assessment many illegal shebeens were raided and shut-down by police. Additionally, since the HIV-prevention program did not access churches and schools, the study team agreed to exclude these sites at follow-up. Therefore, nine of the sites verified at baseline were ineligible at follow-up.

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

Methods

Selecting Sites and Selecting Individuals Socializing at Sites

People socializing at each site were interviewed to confirm the community informant reports and the interviews with the people identified as being knowledgeable about the site. Interviewers approached potential respondents while they were socializing and introduced themselves. They explained that research was being conducted to improve the quality of health care services in the area and that their participation would be appreciated. When a person socializing agreed to be interviewed, the person's consent was recorded on the questionnaire.

During brief face-to-face interviews, individuals socializing at sites were asked the following personal information:

- age, employment, and student status
- whether ever met a new partner at the site
- number of new sexual partners in the past four weeks
- whether ever used a condom
- whether used a condom with the most recent partner
- whether currently had symptoms associated with a sexually transmitted infection

A random sample of sites was drawn. The size of the site dictated the number of individuals sampled, with as many as 40 men and 20 women sampled at the largest

sites and 12 men and six women at smaller sites. The interviewers selected respondents by following two diagonal lines across the site to minimize interviewer bias during the selection of respondents. This procedure was followed at the bigger sites, since more than 58% of sites reported having between 11 and 50 individuals socializing at the busiest times. The interviews for this phase of the research were conducted between 2 p.m. and 6 p.m., to achieve a balance between interviewing during busy times and interviewer safety in areas with high crime rates. Although the sites were busier later in the evening, the 2 p.m. to 6 p.m. time range was optimal because the majority of people socializing became drunk as the evening progressed, making it increasingly more difficult to conduct interviews.

Results

Characteristics of People Socializing at Sites

People of all ages visit the identified sites, although the 20-39 age group was most common among both men and women at baseline and follow-up. The 20-39 age group was also the most common group in Township 2. The mean age at baseline in Township 1 was 30 years and at follow-up and in Township 2 was 29 years (Table 7). In Township 1, the proportion of 15-19 year olds increased from 10% to 13% among men and from 14% to 22% among women from baseline to follow-up.

Table 7. Characteristics of people socializing at sites

Characteristic	Township 1 baseline	Township 1 follow-up	Township 2 comparison
Number of sites visited for individual interviews	58	35	42
Mean age of respondents	30	29	29
Percent of respondents who are female	31%	40%	44%

*Activities of Respondents
at Sites*

The majority of respondents at Township 1 follow-up and Township 2 reported that people come to the sites to drink alcohol and

Close to half of all individuals at baseline and follow-up had been living in Township 1 for all of their lives, while very few respondents have lived in Township 2 their entire lives. The majority of respondents had not gone beyond grade 12 in Township 1, although 41% had completed high school at follow-up. Unemployment status did not change from baseline to follow-up with 31% of respondents reporting that they were not employed and not looking for work. However, the proportion of respondents working part- or full-time increased from 32% to 48%. Township 2 reported similar employment rates.

Attendance at Sites

Figure 16 illustrates that among men, attendance at sites increased slightly from baseline to follow-up with more respondents visiting the sites four to six times per week or everyday. In Township 2, approximately one-fifth of male respondents reported that they visited sites everyday.

As with the men, the proportion of women who visited sites four to six times per week and everyday also increased (Figure 17). In Township 2, almost a quarter of female respondents visited the sites everyday and over half visited the sites at least two or three times per week.

socialize with friends. In addition, over 80% of respondents reported that people come to meet new sexual partners at the site. When asked whether the respondent himself/herself came to the site to meet a sexual partner, 25% of respondents at Township 1 follow-up and 51% of respondents in Township 2 said yes. Attracting previous sexual partners increased from baseline to follow-up in Township 1 (Figure 18).

Reported Rates of New Sexual Partners

In Township 1, the number of sexual partners decreased slightly from baseline to follow-up with an increase in the proportion of male and female respondents reporting no new partners in the past four weeks. In Township 2, only 41% of respondents reported having no partners in the past four weeks while 7% of men and 8% of women reported having four or more new partners in the past four weeks (Figure 19 and Figure 20).

Figure 16. Frequency of attendance at sites among males.

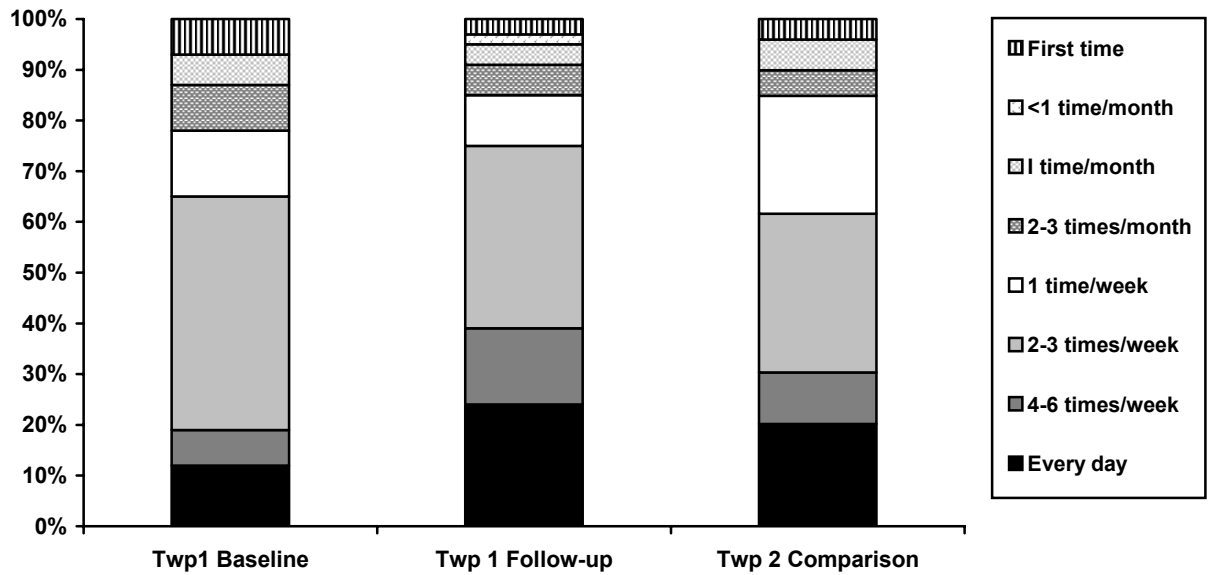
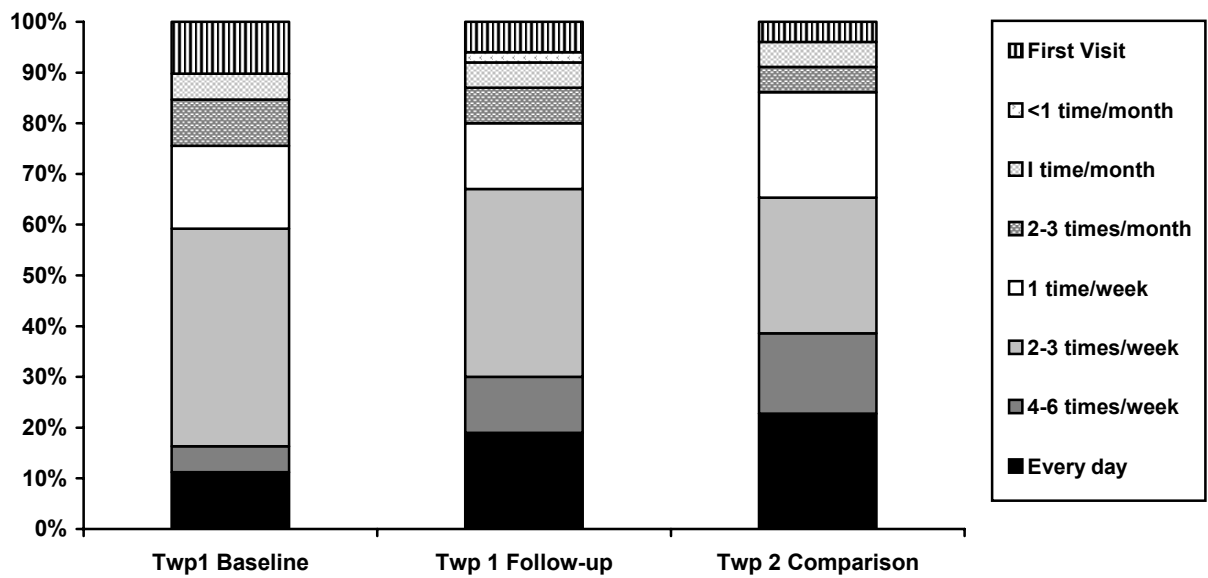


Figure 17. Frequency of attendance at sites among females.



Reported Condom Use

The percentage of respondents reporting that they had ever used a condom increased from 35% at baseline to 61% at follow-up in Township 1 (Figure 21). In contrast, only 43% of respondents in Township 2 reported ever using a condom. Condom use with the respondent's most recent partner improved from baseline to follow-up in Township 1 and was 25% for respondents in Township 2. Condom use with last regular partner was higher in Township 1 (37%) than Township 2 (28%).

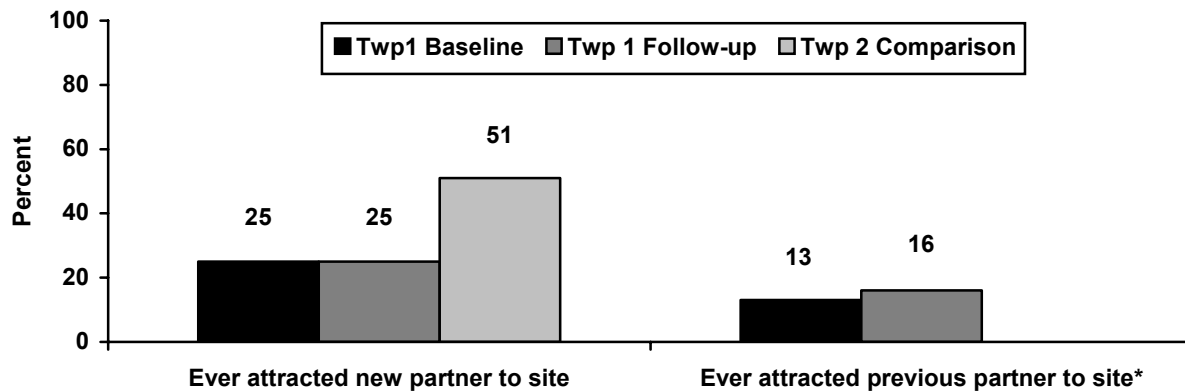
Reported STI Symptoms

The most commonly reported symptom among men in all three studies was pain during urination, while a smaller percentage reported unusual discharge or sores (Figure 22). Rates decreased from baseline to follow-up in Township 1 and were considerably higher in Township 2 than reports from Township 1 baseline and follow-up. Close to 50% of all male and female respondents in Township 2 reported pain during urination or abdominal pain respectively (Figure 22 and Figure 23).

Health care seeking behavior

Overall, of those male respondents who reported experiencing symptoms of STIs, a reduced percentage actually sought treatment at a medical facility. However, rates of treatment among males remained at around 20% for baseline and follow-up. Rates of treatment in Township 2 were higher than baseline and follow-up rates in Township 1 with 27% of men and women reporting that they went to a clinic for treatment if they experienced an STI symptom (Figure 24).

Figure 18. Percent of respondents who ever attracted previous and new sexual partners at sites.



*Question not asked at Township 2 comparison

Figure 19. Number of new sexual partners in the past four weeks among men.

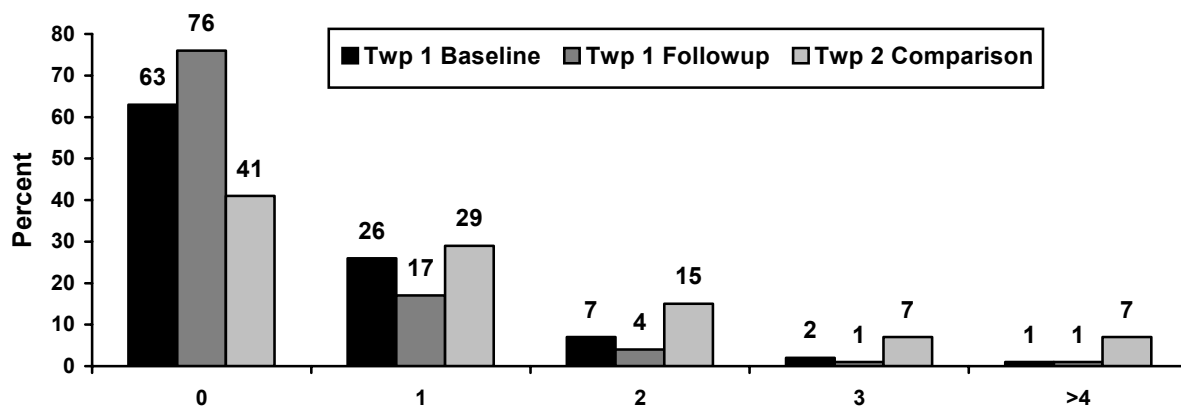


Figure 20. Number of new sexual partners in the past four weeks among women.

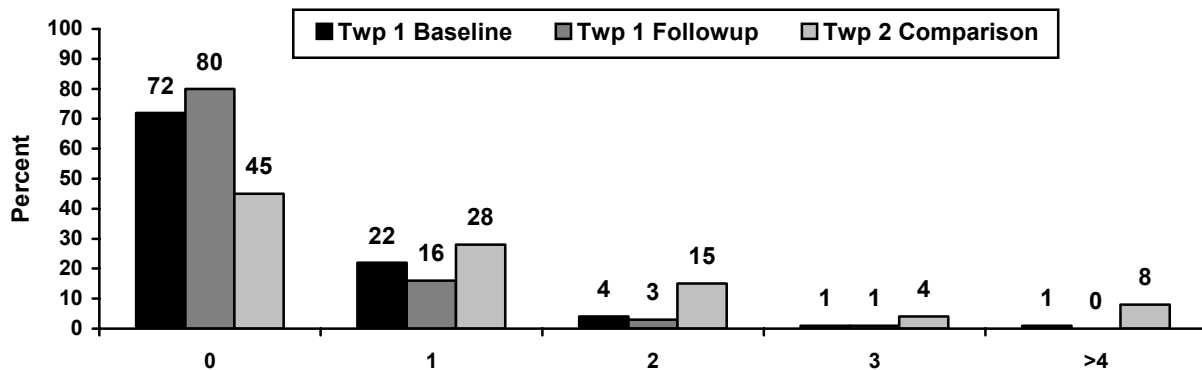
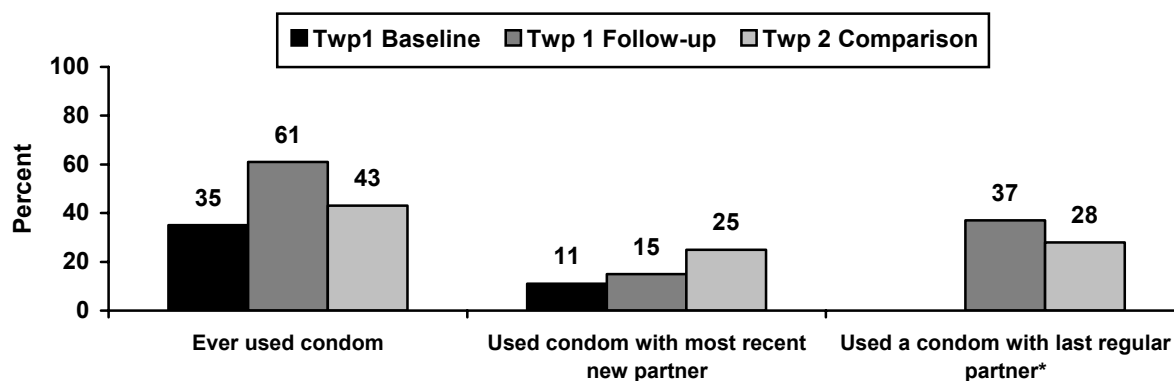


Figure 21. Rates of condom use by township.



* Question not asked of respondents in Township 1 at baseline.

Figure 22. Reported STI symptoms among men.

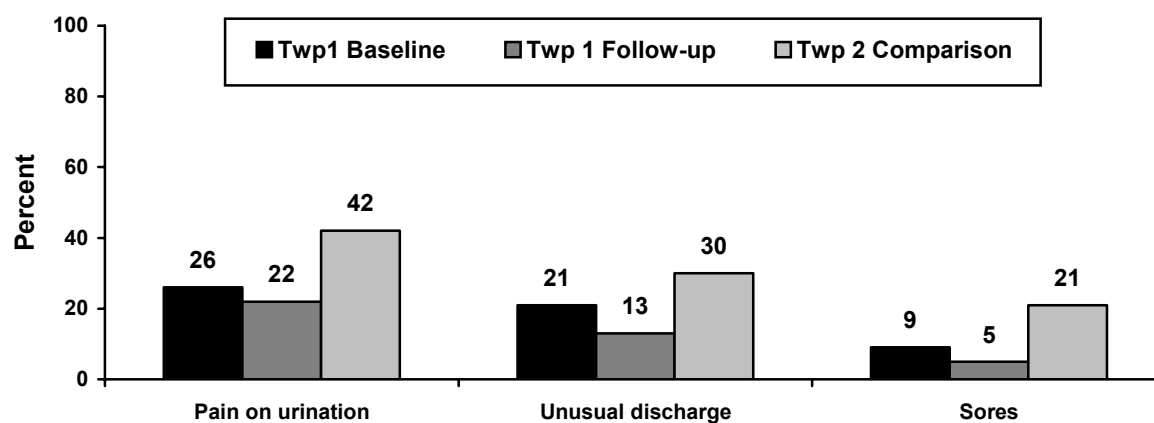


Figure 23. Reported STI symptoms among women.

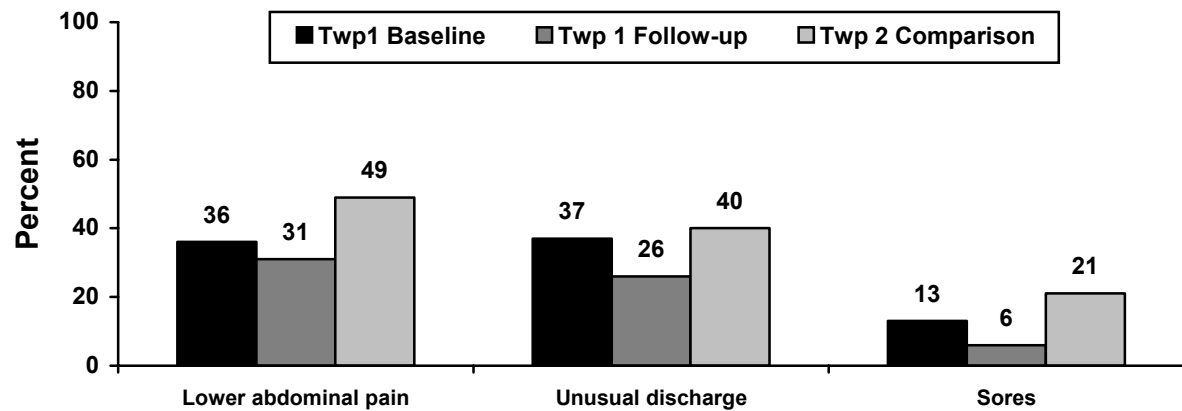
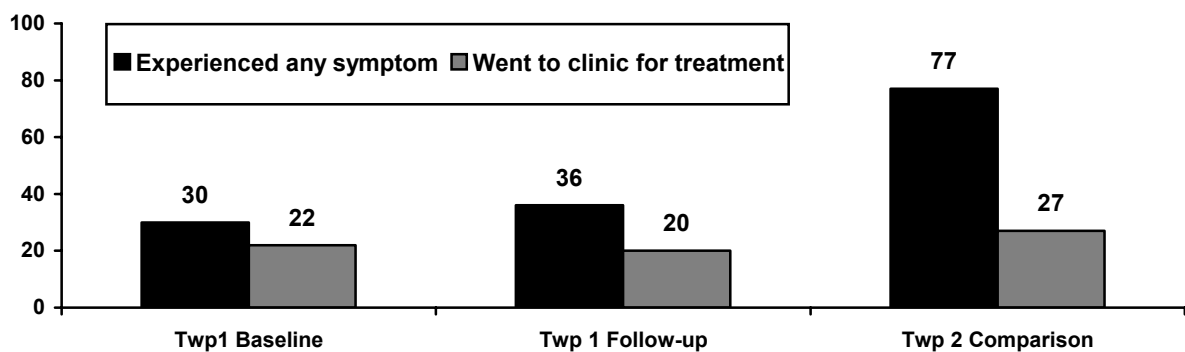


Figure 24. Percent of male respondents who experienced any STI symptom and went to a clinic for treatment.



Social Interviews at Matched Sites (2000-2003) in Township 1

Of the 104 matched sites verified at baseline and follow-up, investigators completed social interviews during 2000 and 2003 at 18 of the same sites. At baseline, only six of the 18 site managers reported any prevention activities at their sites. By 2003, all of these sites except one had HIV/AIDS-prevention activities on-site and condoms sometimes or always available.

Table 8 shows key socio-demographic characteristics of social respondents at baseline and follow-up by gender. In general, respondents at follow-up tended to be younger and more educated than at baseline. More of the female respondents

(14%) came from outside Township 1 at follow-up, compared to baseline (5%).

When asked whether they had ever met a new sexual partner at the site, almost a quarter of respondents at baseline and follow-up said they had. Attracting previous sexual partners increased slightly among men and decreased appreciably among women from baseline to follow-up.

Among respondents at the 18 matched sites, the number of new sexual partners decreased from baseline to follow-up, with a reduction of almost 20 percentage points for the proportion of men reporting a new partner in the last month (Table 9).

Table 8. Characteristics of individuals socializing at 18 matched sites by gender (2000-2003)

Characteristic	Baseline 2000		Follow-up 2003	
	Men (n=467)	Women (n=205)	Men (n=332)	Women (n=225)
Mean age of respondents	31.7	28.3	30.2	28.0
Percent of respondents who				
Are youth (18-25 years)	20.8	36.1	35.2	44.4
Are from outside Township 1	11.4	4.9	11.5	14.2
Have more than primary education	79.6	82.4	86.2	84.5
Are employed part or full time	43.9	70.7	44.6	65.8

Table 9. Difference in sexual partnership rates between baseline and follow-up at the 18 matched sites (2000-2003)

Sexual Partnerships	Gender	Baseline 2000 (%)	Follow-up 2003 (%)	Difference (2003 – 2000)
New partner in the last four weeks	Men	40.5	21.4	-19.1
	Women	28.3	21.3	-7.0
New partner in the last year	Men	59.7	42.2	-17.5
	Women	47.8	43.6	-4.2

In addition, fewer men reported having a new partner in the last year (a decline of nearly 18 percentage points, from 59.7% to 42.2%). Although not as considerable, the percentages of women reporting a new partner fell from baseline to follow-up as well. Respondents not only reported having fewer new partners, but also fewer total partners during the last year.

Figures 26 and 27 show an increase in the percentage of male and female respondents remaining abstinent or monogamous in the past year (0-1 total partners in the last year). At baseline, over a quarter of respondents reported having three or more partners in the last year, which is five percentage points higher than what was seen at follow-up.

The percentage of male respondents reporting that they ever used a condom increased from 35% at baseline to 64% at follow-up among respondents at the 18 matched sites (Figure 28). A similar increase occurred among women. Condom use with the respondent's most recent partner more than tripled from baseline to follow-up for both men and women.

Rates for symptoms of STIs also decreased from baseline to follow-up for three main symptoms among men (Figure 29). The most commonly reported symptom at baseline and follow-up was pain during urination, followed by unusual discharge and sores. Urination pain decreased from 23% at baseline to 17% at follow-up.

Health-care Seeking Behavior at Matched Sites in Township 1 (2000-2003)

The percentage of male respondents experiencing any STI symptom decreased from 29% at baseline to 19% at follow-up. A reduced percentage of men at baseline

actually sought treatment at a medical facility (95 of the 135 men experiencing any symptom, or 20% of all male respondents). However, 53 of the 64 men who reported any symptom at follow-up chose to go to the clinic for treatment (16% of all male respondents).

Network of Sites per Social Interviews at Township 1 Follow-up

Interviewers asked respondents to provide the name and location of up to three other sites where they had met a new partner in the last 12 months. Figure 31 displays that the network of sites reported by social respondents is complex and wide-ranging, as was the network of sites named by site representatives during Step 3 of the assessment. In fact, 71 sites (30%) are located outside the assessment area, suggesting that patrons mix with other communities.

Respondents identified 162 sites in Township 1 where they had met new sexual partners in the last year. Although the study team verified the majority of these sites, 62 of these sites remained unverified. Most of the unverified sites were relatively obscure, and were only reported by one to three patrons interviewed.

Figure 25. Percent of respondents who ever attracted previous and new sexual partners at 18 matched sites by gender (2000-2003).

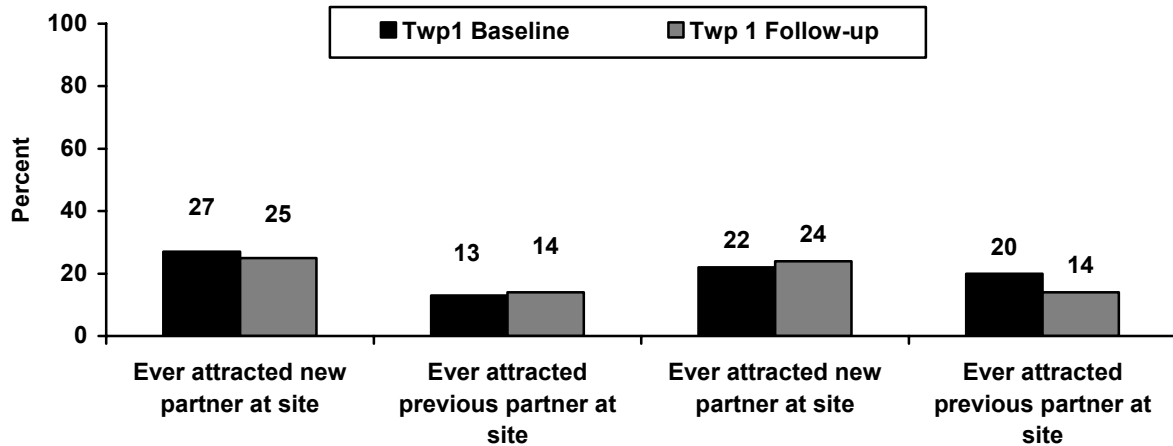


Figure 26. Total number of sexual partners in the past year among men at the 18 matched sites (2000-2003).

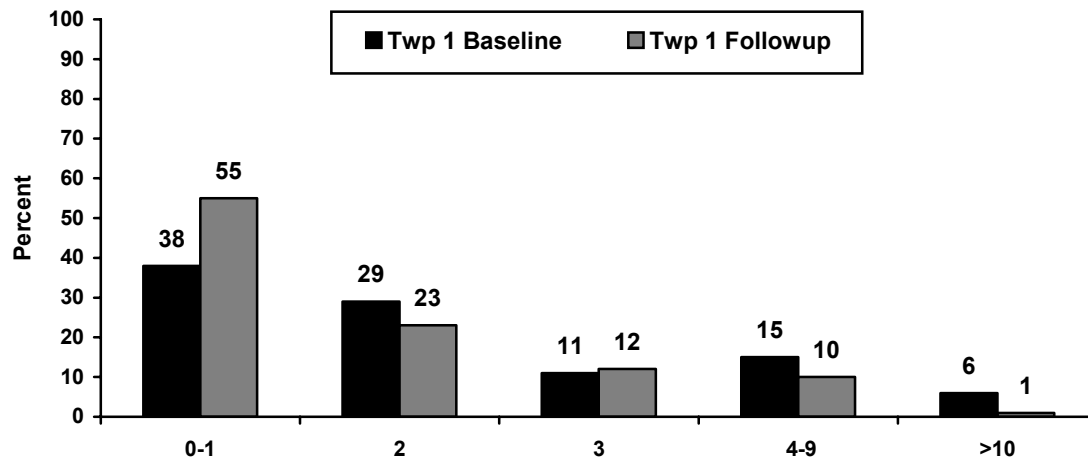


Figure 27. Total number of sexual partners in the past year among women at the 18 matched sites (2000-2003).

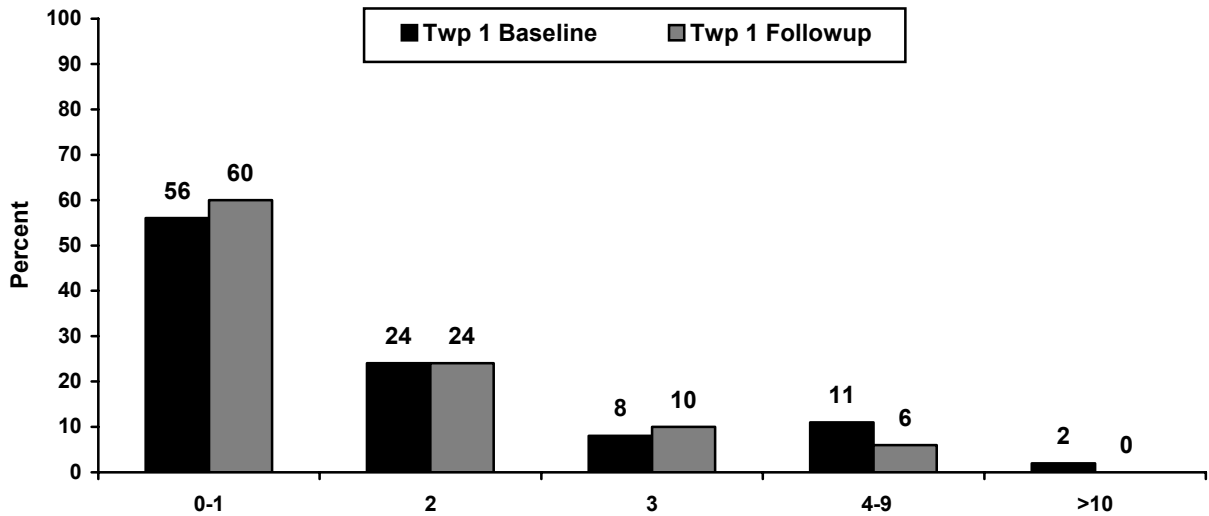


Figure 28. Rates of condom use by gender at the 18 matched sites (2000-2003).

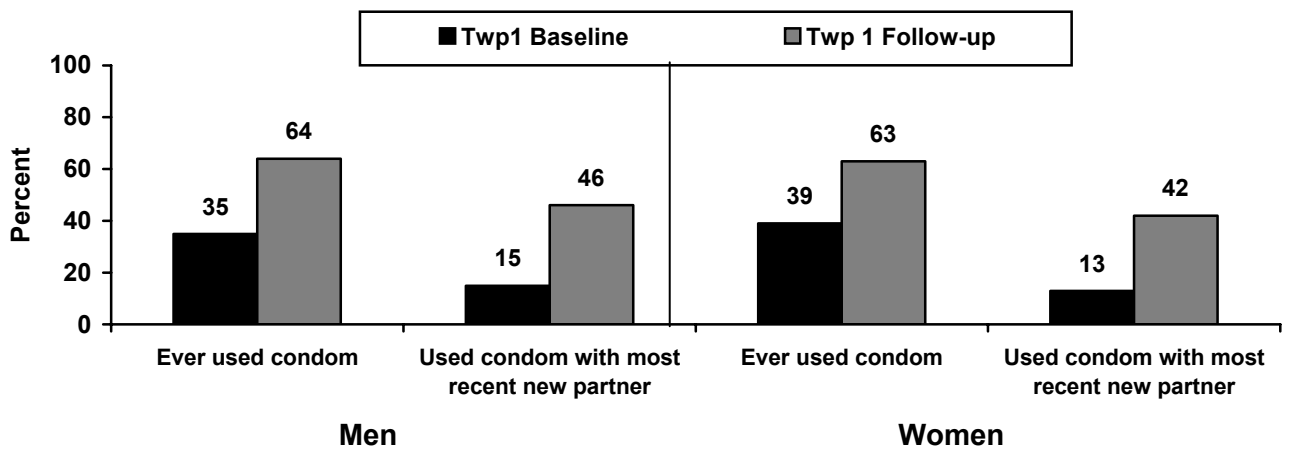


Figure 29. Reported STI symptoms among men at the 18 matched sites (2000-2003).

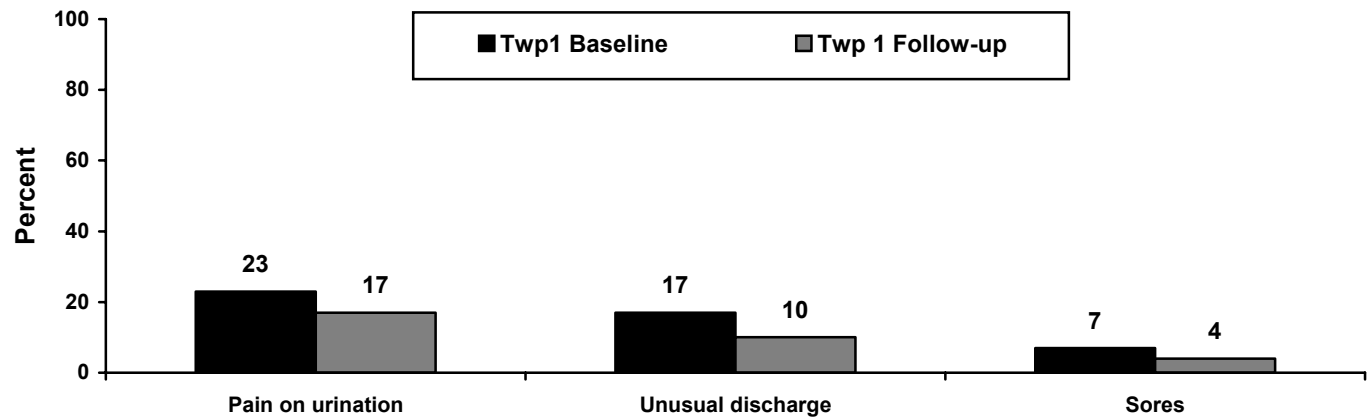


Figure 30. Percent of male respondents who experienced any STI symptom and went to a clinic for treatment.

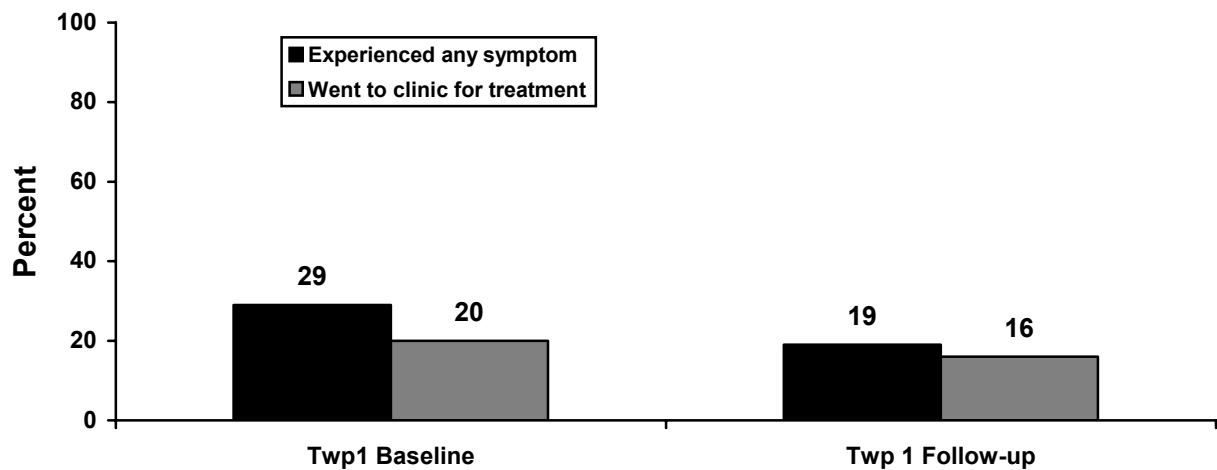
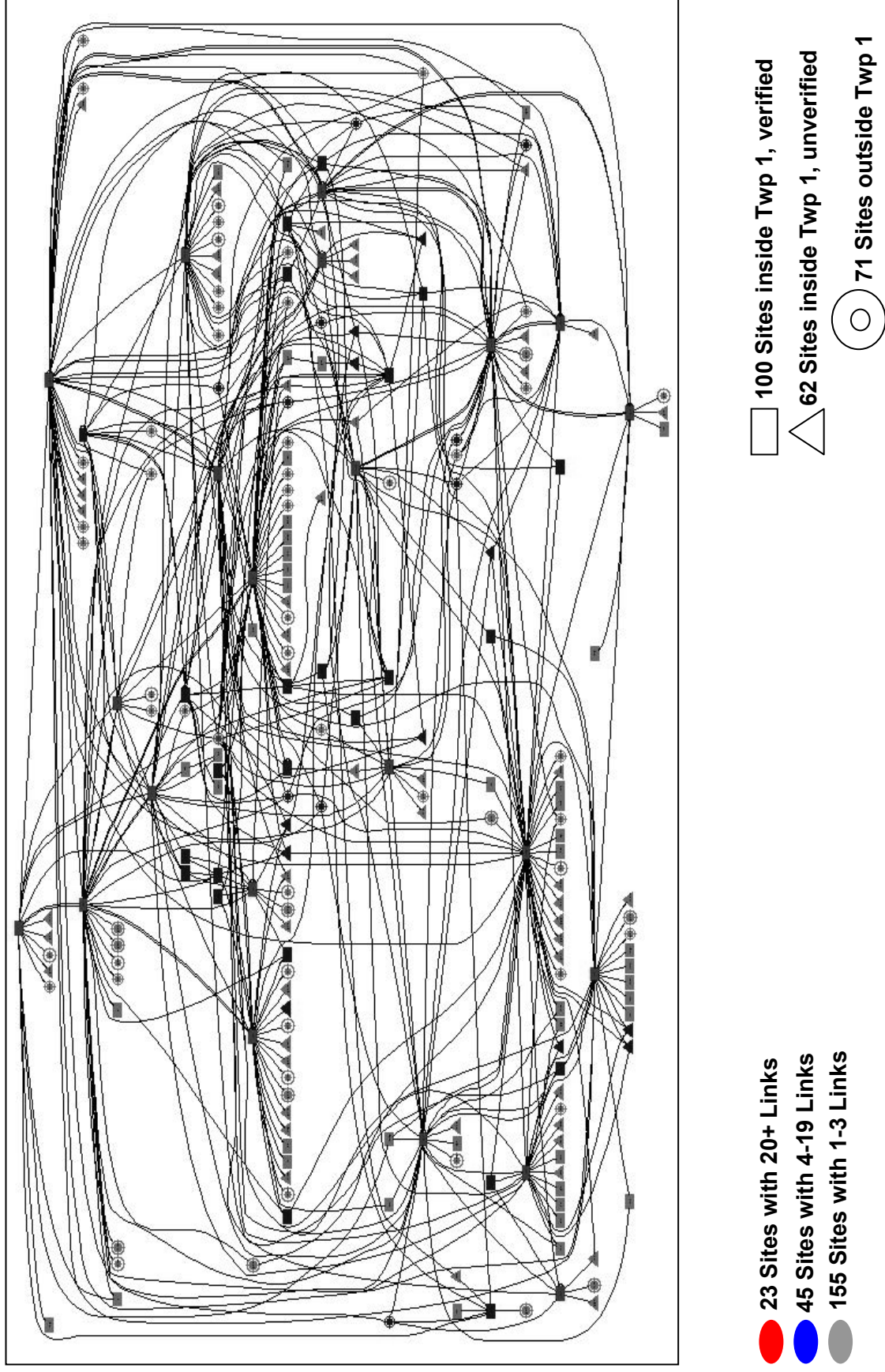


Figure 31. Social respondents network of 233 sites at Township 1 follow-up.



Observations

The number of sexual partners that were reported by respondents in the past year was far lower than expected considering that respondents reported a considerably higher number of sexual partners in the past month. This could indicate a recall bias among respondents, meaning that the total partners reported for the previous four weeks could be more accurate, as respondents were more likely to remember sexual encounters in the past month compared to the past year. However, it is probably more likely that the number reported over the twelve-month period was under reported, owing to the social stigma that could be associated with having many sexual partners.

Interviewer Concern

In certain cases, the fact that respondents drank during the interview made the interviewers somewhat uncomfortable. The interviewers reported that because the potential respondents came to the sites to drink, it was difficult to get them to agree to be interviewed, since most of them insisted that they would only participate if the interviewers would buy them a drink. The interviewers reported that they found this aspect of the research difficult.

Discussion

The frequency of visits to sites, the linkages among sites, and the high rates of sexual partnership acquisition are favourable conditions for the spread of HIV in this population.

The frequency of attendance at the sites at baseline showed that 77% of individuals go to the sites once a week or more. This increased slightly at follow-up, showing that sites in Township 1 experience a high level

of regularity in social mixing. There also seems to be a pattern of individuals going to more than one site a day in Township 1 and Township 2, with almost half of individuals going to two or more sites in the same day.

The majority of respondents reported that people come to the sites to meet new sexual partners. This is much higher than that reported by the owners or managers of the sites, and seems to indicate that the identified sites are places where people meet new sexual partners with a high level of sexual mixing in the population. This is also reflected in the high percentage of respondents who are meeting not only new sexual partners at the sites, but previous sexual partners as well. While reported condom use increased from baseline to follow-up in Township 1, the rate of condom use with the most recent new partner was still below 50%, increasing the likelihood that this population is vulnerable to new infections. The likelihood of new infections is especially high in Township 2, where less than 43% of respondents reported ever using a condom and over 57% reported having at least one new sexual partner in the past four weeks.

Results also reflect the possibility of high levels of STIs in both communities, with over 60% of respondents in Township 2 and 40% of respondents in Township 1 at follow-up reporting an STI symptom. This percentage is a slight increase from Township 1 baseline, but there were high levels of missing data for these questions (between 13% and 45%) at baseline, making it difficult to compare the results. In general, data from the three studies suggest that these communities continue to be at risk for increased HIV transmission due to STIs that are acquired and left untreated, increasing the population's susceptibility to HIV.

Step 5: Use Results to Evaluate and Improve Programs

In 2001, a peer health education program was implemented in Township 1 that consisted of AIDS prevention messages, including the importance of STI treatment, and the distribution of condoms to specified sites. The PLACE method was developed to monitor the progress of these interventions, to evaluate their success by comparing data from a comparison community (Township 2), and to use the results to improve programs.

AIDS Prevention Activities On-site

As previously mentioned, the majority of the sites in Township 1 did not have any AIDS prevention activities at baseline. Prevention activities increased, and by 2003 over two-thirds of the sites reported having some form of AIDS prevention efforts. In contrast, only 1% of sites in Township 2 had these services available for patrons. Over 90% of Township 1 site owners at baseline were willing to have AIDS prevention activities at their establishments. Sites with condoms available on the day of the interview increased from 8% at baseline to 43% at follow-up, which was higher than sites in Township 2 (12%).

To assess the coverage of the intervention in Township 1, interviewers asked respondents several questions concerning the scope of prevention efforts. As illustrated in Figure 32, most of the AIDS prevention activities included educational talks, programs and condom promotion. Almost 70% of sites received condom promotion and over half had educational talks. Few sites received AIDS posters or leaflets.

Interviewers asked site representatives from the 135 sites that received condoms from the

intervention team the last time educators gave them condoms. Figure 33 shows the distribution of the last time condoms were provided. Approximately, 35% of sites received condoms in the last 4 weeks, and more than half within the last 6 months. The sites did not incur any costs for the condoms, since the intervention team provided all of them free of charge to the sites.

Among the 135 sites that received condoms from the intervention team, 80 sites (41% of all sites) still had condoms available from the educator's last visit to the site at the follow-up assessment. About a fourth of all sites received condoms from the peer health educators, but had no condoms remaining at follow-up, as shown in Figure 34.

Figure 32. Percent of sites with AIDS prevention activities during Township 1 follow-up.

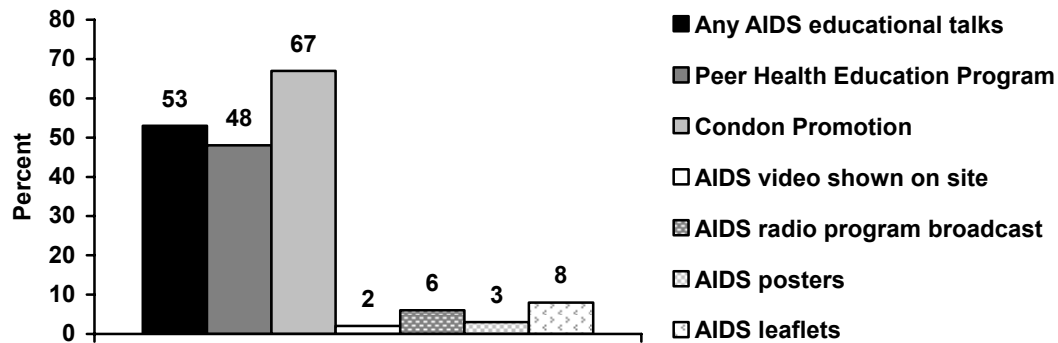
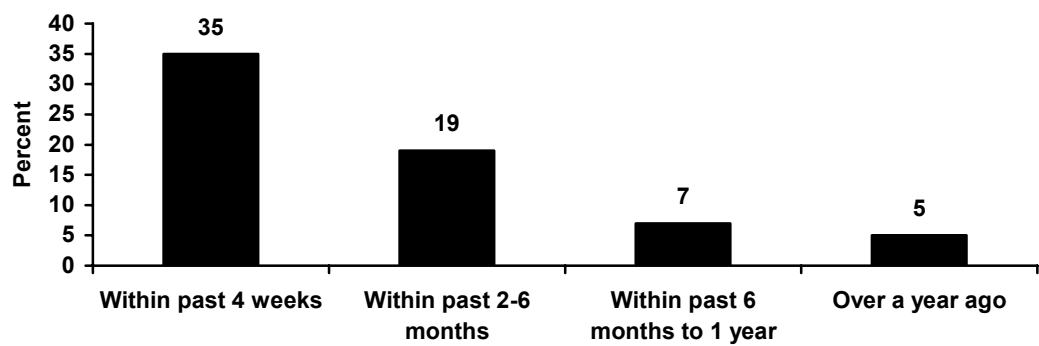
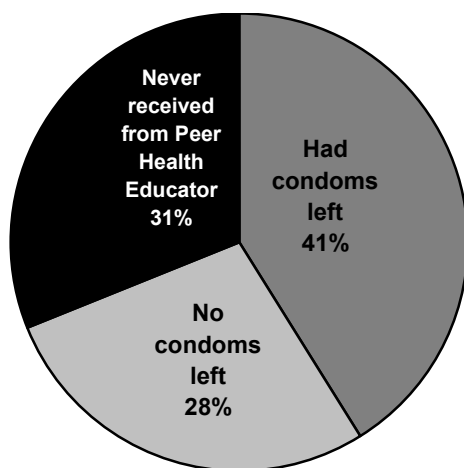


Figure 33. Frequency of last receiving condoms from peer health educator in Township 1 during follow-up.



*Data missing for 6% of sites

Figure 34. Condoms still available at sites from the last peer health educator visit.



Individual Exposure to AIDS Prevention Activities in the Community

At follow-up in Township 1, 34% of respondents said that they recognized the intervention team by the color of their uniforms. When interviewers probed further, they found that all of the individuals familiar with the intervention team had some interaction with them concerning AIDS education or condom promotion. The number of times respondents spoke to a peer health educator in the community increased from baseline to follow-up in Township 1, with 17 percentage points more of respondents at follow-up reporting that they spoke with a peer educator at least once. This is in contrast to Township 2 where 90% of respondents had never spoken with a peer educator in their community.

Exposure to AIDS Prevention Activities at Interview Sites

From baseline to follow-up, the percentage of respondents who attended at least one

educational session at interview sites in Township 1 increased from 14% to 53%. In fact, the percentage of respondents who went to three or more sessions increased from 3% to 11% (Figure 35). This repeated exposure to the messages of the intervention is significant because it potentially contributes to increased condom use and safer sexual behavior.

The percent of respondents who had ever used a condom almost doubled from baseline to follow-up in Township 1. Figure 37 illustrates the findings of an additional question only asked at follow-up – when was the last time that the respondent used a condom. Of the 632 male respondents, 177 (28%) reported using a condom within the past week, and almost 50% of male respondents within the last three months. One quarter of the female respondents reported using a condom within the past week.

Figure 35. Number of times spoke with a peer educator in the community.

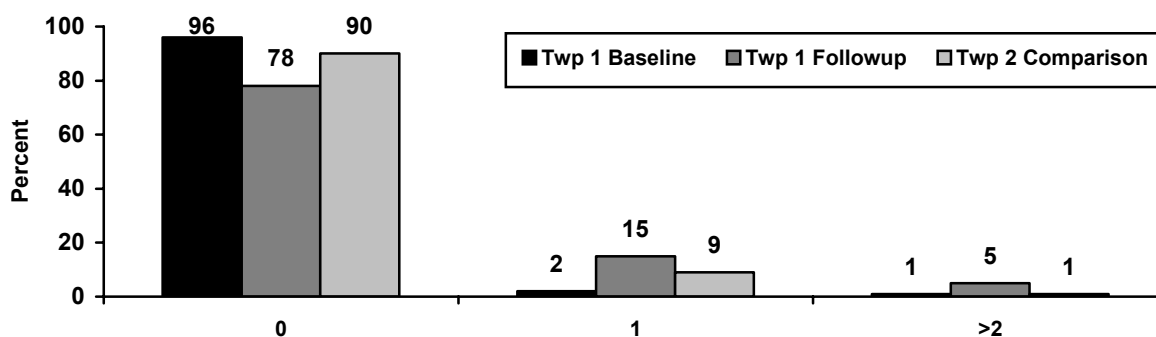


Figure 36. Number of times attended an AIDS educational session at interview site in past three months.

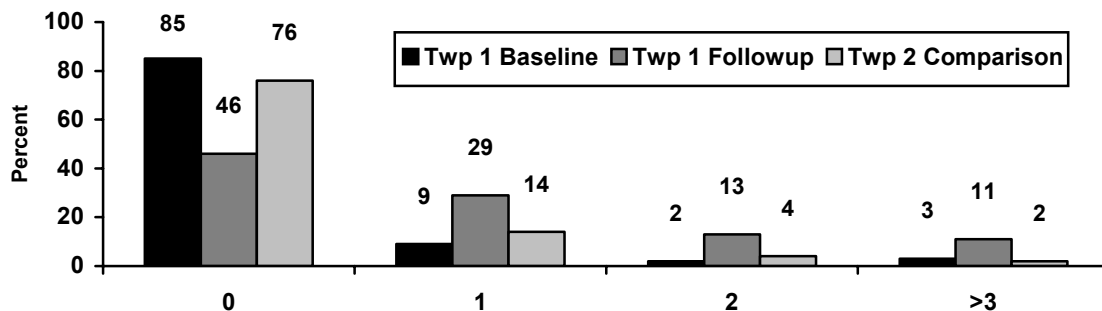
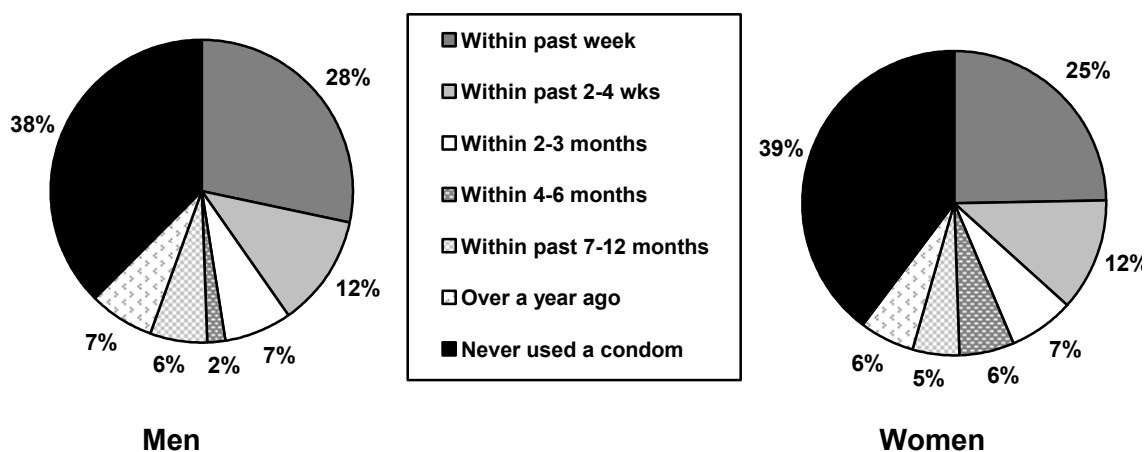


Figure 37. Last time respondent used a condom, Township 1 follow-up.



Discussion

The data concerning the peer health education program suggest that there has been an increase in coverage from baseline to follow-up in Township 1. However, more coverage is needed by the educational program as the majority of respondents at follow-up in Township 1 reported that they have never spoken to a peer health educator in the community and never attended an AIDS educational session. This is still an improvement over Township 2, where over 90% of respondents have not been exposed

to peer health educators at sites where high-risk behavior and new sexual partnerships occur. Township 2 numbers are high for talking to peer health educators due to the intervention starting a few weeks before the baseline assessment.

In conclusion, many factors identified in the study confirm that both communities are at high risk for HIV transmission. These factors include high rates of new sexual partnerships, low condom use, and potentially high levels of STIs. While there

has been an increase in the use of condoms, a slight improvement in STI management, and a decrease in the number of new sexual partners in Township 1, there are still high rates of sexual partnership formation at identified sites and inadequate coverage of interviewed sites. Furthermore, with high unemployment levels and low levels of education, many members of this community do not have access to resources and to education, placing the population at higher risk for HIV transmission.

Priority Sites

A list of priority sites to receive the intervention was developed in an attempt to help the intervention team be more efficient. The list was based on four criteria – size of site, high numbers of youth at site, frequently mentioned sites, and sites with high sexual partnership formation. A site was defined as a priority site if it met at least one of the four criteria. A large site was defined as having more than 100 people socializing during a busy time. If a site manager or owner reported that most of the patrons at the site were younger than age 18, the site was also flagged as a priority. Frequently-mentioned sites were defined as any site named by 16 or more community informants. In addition, at sites where individual interviews were preformed, any site where a third of the respondents indicated they had met a new sexual partner at the site in the past four weeks was defined as a priority site.

Intervention Observations

According to the peer health educators, they are well known in the community. Even without wearing their uniforms, community members feel comfortable asking them for both male and female condoms. Some community members have even volunteered

to distribute condoms on behalf of the peer educators. They also report that condom use at targeted sites has increased due to the constant refilling of condom boxes at sites.

The peer educators also reported a change in their personal lives. Through their increased knowledge and visibility in the community, they reported a change in their own behavior, including reducing the number of partners and cutting down on alcohol consumption. However, this visibility can also lead to stigmatization of the educators. Some community members want to know the status of the educators while others feel that all of the educators are HIV-positive. Some of the peer health educators without HIV tell community members that through the program they learned how to stay HIV negative. There were some reports, albeit very few, of being chased out of particular sites because of this heightened stigmatization.

Recommendations

The PLACE method served as a valuable measurement and evaluation tool in East London. The baseline results from Township 1 in 2000 were used to develop a local HIV/AIDS prevention strategy tailored to the specific needs of the community. In 2003, a follow-up PLACE assessment was conducted in Township 1. The findings of this assessment helped to identify gaps in the local HIV/AIDS prevention strategy and further improve programs. Recommendations for strengthening programs in Township 1 include:

- maintain strong, positive relationships with community members and associations to ensure a high level of commitment to HIV/AIDS prevention efforts;
- focus prevention efforts on priority sites identified in the 2003

assessment while maintaining a strong prevention program for the general population; and

- continue to improve condom distribution to sites and on-site peer education and outreach focusing on limiting the number of partners and prompt management of STIs.

The assessment in Township 2 served as a baseline assessment for HIV/AIDS prevention efforts in the community, as well as a comparison community for Township 1. Comparing Township 2 helps to document that the changes in behaviors observed in Township 1 can be attributed, at least in part, to the active intervention efforts in Township 1 and not simply a city, province, or countrywide decline in high risk behaviors. Based on the experience of Township 1 and the baseline assessment conducted in Township 2, the recommendations for Township 2 include:

- maintain strong, positive relationships with community associations and members;
- focus interventions at priority sites identified by baseline assessment in 2003;
- improve condom distribution to sites and on-site peer education and outreach, focusing on limiting the number of partners and prompt management of STIs;
- build recreational facilities where young people can meet and socialize;
- create options for informal income earning, especially for women;

- encourage church involvement, since many churches were identified by community informants;
- open an STI clinic within the township and increase utilization of existing health facilities; and
- repeat the PLACE assessment in one to two years, to monitor changes in behavior and HIV/AIDS prevention efforts.

Is Sexual Partnership Formation Related to Sociodemographic, Behavioral, and Site Characteristics? Further Analysis of the Data

This section of the report explores two primary analysis objectives, using data from the 2003 follow-up assessment in Township 1. The first objective is to determine if there is an association between self-reported sexual partnership formation and socio-demographic, behavioral, and site characteristics. The second objective is to select the best statistical model by gender to determine characteristics of respondents with increased high-risk behavior and characteristics of the sites where these individuals socialize.

Methods

Classification of Outcome Variables Based on New Partnership Acquisition and Number of Recent Partners

Since the AIDS epidemic in South Africa is driven by heterosexual intercourse, the outcome for this analysis focuses on the rate of sexual transmission of HIV. Anderson and May (1988) proposed a simple equation to describe the three main determinants of the spread of sexually transmitted infections as follows:

$$R_o = \beta c D$$

Where:

- R_o = the basic reproductive rate of an STI
- β = transmission efficiency of the STI organism
- c = the rate of sex partner change, and
- D = the duration of infectiousness.

An R_o of greater than 1 indicates that the infection is spreading in the population (Anderson, 1999).

Given that the PLACE method focuses on decreasing the rate of sex partner change (“ c ” in the equation) through behavioral interventions, the concern of this analysis is the rate of partnership change. The outcome variable was constructed by considering the rate of new partnership acquisition and the number of recent partnerships that contribute to the overall sexual network of the population. Thus, the outcome is a scale of sexual contact rates related to the respondent’s exposure to opportunities to transmit the virus if he or she were HIV-infected.

The outcome follows a multinomial distribution, coded as low, moderate, and elevated contact. The low contact group serves as the reference group, and respondents in this group had 0-1 partners in the last year and no new partners. If members of this group were HIV-positive, it was assumed that they are at less risk of transmitting HIV, since their own behavior is monogamous or abstinent. In contrast, respondents indicating that they had at least one new partner in the last four weeks were classified in the elevated contact group. Lastly, the moderate contact group serves as a catch all for remaining respondents. Table 10 provides the distribution of respondents by contact group. To be consistent across sites, the analysis was limited to the sample of individuals aged 18 or older.

Table 10. Outcome classification of respondents

Gender	Contact Group		
	Low	Moderate	Elevated
Men (n=602)	268	189	145
Women (n=389)	195	113	81

Using Generalized Estimating Equations to Address the Lack of Independence

Since individuals were sampled within sites, the respondents in the sample are not independent, as study participants within sites are expected to be more similar than individuals across sites. If this clustering of individuals by site is ignored, estimates of the standard errors would likely be incorrect. “Within-site factors” (characteristics of the individuals socializing at the site) are likely to have correlated measures, while “between-site factors” (site characteristics) are likely to have independent measurements. If there were positive correlations, the standard error of the between-site effects would be underestimated, and the standard error of the within-site effects would be overestimated (Stokes, Davis, & Koch, 2000).

Several methods exist to address this lack of independence by taking into account the clustering of the data, including SUDAAN, PROC NL MIXED in SAS, weighted least squares and generalized estimating equations (GEE). The marginal models based on GEE were selected, since they are easy to compute and interpret. The procedures are outlined in *Categorical Data Analysis Using the SAS System*, second edition (Stokes et al., 2000).

GEE is an extension of generalized linear models that provides a semi-parametric

approach to longitudinal analysis. This method allows for missing observations, continuous explanatory variables and time-dependent explanatory variables. Although the method is commonly used for repeated measures over time, it also accommodates clusters of correlated data. In particular, for a multinomial outcome, using the independent working correlation structure is the best approach (Chantala, 2003).

Assessing the Association between Contact Group and Individual and Site Characteristics

As detailed in previous sections, the study team collected data on numerous socio-demographic, sexual network, and HIV prevention indicators. From this breadth of information, the analysis was narrowed to include site-level variables addressing the popularity, size, and activities of the sites, as well as the mobility of the patrons. Similarly, individual-level variables included select socio-demographics, site-related behavior, and exposure to HIV prevention. Whenever possible, variable selection was based on literature-supported links between the selected variables and the outcome. For example, several studies illustrate an association between HIV prevalence and mobile populations, such as truck drivers, migrant workers, military personnel, sex workers, seafarers, and refugees (UNDP, 2003; London School of Tropical Medicine, 2003; UN Office for

the Coordination of Humanitarian Affairs, 2003).

Since differences in sexual behavior exist between men and women, the analysis was stratified by gender. The relationship between the outcome and each explanatory variable was assessed separately. The strength of the relationship was evaluated while controlling for site, based on the empirical chi-square value (robust variance) with significance at the 0.05 level. These estimates met the sample size assumptions since none of the contrasts have greater than 5 degrees of freedom and we have 35 clusters.

Model Selection

For the purpose of model selection, the outcome was collapsed combining the moderate and elevated contact groups. The binomial outcome comparing all individuals with at least one new partner or multiple partners in the last year to those in the low contact group was of interest.

The equation of the full model is:

$$\text{logit}(\theta_{hijklmnop}) = \alpha + x'_{hijklmnop}\beta$$

Where:

$\theta_{hijklmnop}$ = the probability that a person of the h^{th} age group, the i^{th} education level, the j^{th} employment status, the k^{th} residence group, the l^{th} level of visiting sites, the m^{th} number of community informants, the n^{th} alcohol status of the interview site, the o^{th} size of the interview site will have an outcome of moderate or elevated contact group, and the p^{th} interaction between alcohol and the size of the interview site.

α = the intercept term and represents individuals in the reference group for all of the categories¹

x' = the parameters included in the model

β = the log odds corresponding to each value of x

Appendix 6 contains a description of the variables included in model selection. To avoid over-fitting the model, the eight main effects explained above and one interaction term were included in the full model. Additionally, the age categories were collapsed into 19-29 and 30+ to reduce the number of age parameters. The variables were chosen based on their ability to represent the individual respondents and the sites of the interviews. For example, rather than including all of the site characteristics, a few variables were selected that can serve as proxies for many characteristics, including the size of the site and whether alcohol is served at the site.

Using backward selection, the best models by gender for predicting the outcome were selected. Since there was a binomial outcome, the exchangeable working correlation structure was used, as recommended by Stokes and colleagues (2000). Only subjects with complete demographic and behavioral information were included in the model. As a result, five men and a woman who were missing education or employment data were excluded.

Because GEE is a quasi-likelihood method, the logistic regression model selection strategy of comparing the -2 log likelihood for the full and reduced model to an appropriate chi-square value was not

¹ All 30+ years old with low education, no employment, resident of the study area, who visited a low number of sites the day of the interview and who were interviewed at sites reported by few community informants that serve alcohol and are small or medium in size.

used. Instead, contrast statements to test the significance of the variables were used. Variables with a P value less than or equal to 0.20 remained in the model. All analyses were completed using SAS version 8.

The odds ratios (ORs) were calculated for the combined moderate and elevated contact groups versus the low contact group. For variables with more than two levels, ORs were calculated for each level compared to the reference level of the variable, and a Bonferroni correction used with an original α level of 0.05 to determine the significance of these relationships. For example, since the number of sites visited by the respondent is categorized into three groups, two ORs were computed. If the P value corresponding to the chi-square adjusted for the site of the interview was less than or equal to 0.05/2 or 0.025, the relationship was considered significant.

Findings

Characteristics of the Contact Groups

The distribution of low, moderate and elevated contact groups for men and women by demographic, behavioral, and site characteristics were examined. Several notable differences exist. Table 11 and Table 12 show the row percent distributions for men and women, respectively. The tables also provide the chi-square tests for association with

corresponding P value controlling for the site of the interview. Appendix 5 provides column percent distributions for demographic and behavioral characteristics.

For men, the most significant associations occur between individual characteristics and contact groups (Table 11). Specifically, age group, site-related behaviors, exposure to HIV/AIDS prevention programs, and condom use are all significantly associated with contact group. Most of the respondents in the moderate and elevated contact group are younger (18-29), while most respondents in the low contact group are older.

Although not significant, higher education relates to moderate and elevated contact group. The low contact group contains over half of the men with some or no primary education. Similarly, increased employment is weakly associated with higher contact levels. In contrast, site-related behaviors result in strong associations with the outcome, including having previously met a new partner at the interview site and the number of sites attended on the day of the interview (Figure 38). Over half of respondents in the elevated contact group reported visiting three or more sites. Condom use and exposure to HIV/AIDS prevention programs were also significantly related to the outcome ($P<0.01$).

Figure 38. Site-related behavior of male respondents by contact group.

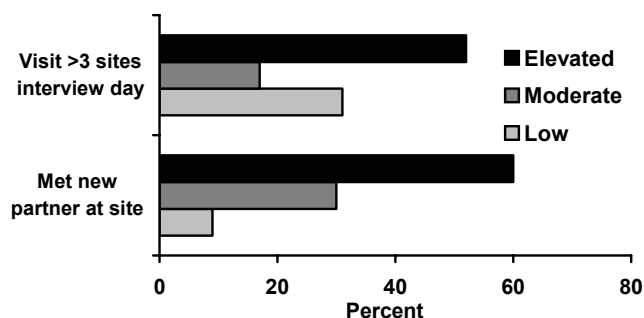


Table 11. Percent distribution of selected demographic, behavioral and site characteristics among male respondents by contact group

	Low (n=268) (%)	Moderate (n=189) (%)	Elevated (n=145) (%)	χ^2^*	P value
Socio-demographic characteristics					
Age Group					
18-19	34.0	40.0	26.0	10.0	<0.01 [†]
20-24	38.4	34.6	27.1		
25-29	40.9	32.9	26.3		
30-34	42.7	30.2	27.1		
35-39	42.2	34.9	22.9		
40+	66.7	19.6	13.7		
Years educated				1.8	0.18
Primary or none	58.1	27.9	14.0		
Some/completed secondary	41.3	32.2	26.5		
Some/completed tertiary	49.2	31.2	19.7		
Years lived in study area				1.9	0.17
2 or more years	45.9	30.0	24.1		
0-1 year	42.3	34.6	23.1		
Not a resident	35.6	39.7	24.7		
Employment status				2.4	0.12
Not employed	47.4	32.3	20.3		
Employed part or full time	42.5	31.0	26.6		
Behavioral characteristics					
Ever met a new partner at the site				22.0	<0.01 [†]
Yes	9.4	33.8	56.9		
No	57.2	30.5	12.2		
Frequency of attendance at site				0.3	0.60
Daily	45.1	25.4	29.6		
4-6 times per week	42.4	34.8	22.8		
2-3 times per week	45.4	31.9	22.7		
Weekly or less	44.1	34.2	21.7		
No. of sites visited on day of interview				10.3	<0.01 [†]
1 site	50.8	34.7	14.6		
2 sites	42.2	33.3	24.5		
3+ sites	31.0	20.6	48.4		
Ever used a condom				21.0	<0.01 [†]
Yes	31.4	39.1	29.5		
No	66.4	18.6	15.0		
Ever exposed to HIV/AIDS prevention				12.0	<0.01 [†]
Yes	38.7	30.5	30.8		
No	51.7	32.5	15.9		
Has condom at time of interview				11.0	<0.01 [†]
Yes	11.0	42.5	46.6		
No	49.2	29.9	21.0		

	Low (n=268) (%)	Moderate (n=189) (%)	Elevated (n=145) (%)	χ^2^*	P value
Site characteristics					
Number of community informants				1.0	0.31
Few (1-2)	52.8	24.6	22.6		
Some (3-10)	34.0	38.6	27.5		
Many (>10)	44.4	32.4	23.2		
The type of site				2.7	0.10
Bars, clubs, informal bars, hotels, restaurants	47.5	29.7	22.8		
Schools, churches, stores, stadiums	43.1	34.7	22.2		
Unstructured/ Abandoned/ Transportation	26.1	39.1	34.8		
The size of the site				0.1	0.73
Small (<30 people)	26.1	39.1	34.8		
Medium (30-100 people)	46.3	31.9	21.8		
Big (>100 people)	44.6	30.6	24.9		
Longevity of site				0.0	0.96
Less than or equal to 2 years	43.3	33.7	23.1		
More than 2 years	44.8	30.9	24.3		
Prop. patrons come from outside study area				0.9	0.34
None	47.6	31.7	20.7		
Some	44.7	34.0	21.3		
Most	43.3	28.2	28.6		
Alcohol served				1.4	0.23
Yes	46.8	29.9	23.2		
No	34.2	37.8	27.9		
Dancing on premises				0.4	0.54
Yes	40.1	37.7	22.2		
No	46.8	28.1	25.1		
Close proximity to transportation				1.8	0.18
Yes	44.1	29.4	26.6		
No	46.0	38.1	15.8		
Men meet female partners at site				2.3	0.13
Yes	43.2	31.8	25.1		
No	51.6	29.5	19.0		
Gay men meet partners at site				1.5	0.22
Yes	25.7	48.6	25.7		
No	45.7	30.3	24.0		
Sex workers solicit				1.7	0.19
Yes	41.8	27.4	30.8		
No	45.4	32.7	21.9		
Prevention on site				1.2	0.28
Yes	46.0	31.6	22.5		
No	38.8	30.6	30.6		
Site verifier showed interviewer a condom				0.2	0.70
Yes	45.8	30.4	23.8		
No	43.5	32.2	24.3		

* Chi-square controlling for site of interview

† Significant at the alpha=0.05 level

While the percent distributions of the site characteristics shown in Table 11 provide some insight into the types of places where men with new or high numbers of recent partnerships socialize, none of the site characteristics are significantly associated with the outcome. Sites reported by a few community informants do tend to consist of men in the low contact group while men in the moderate or elevated contact groups were found at more popular sites (3+ community informants). Concerning the type of site, respondents interviewed at places like parks, public toilets, and transportation-related sites tended towards the moderate and elevated contact groups. Small sites also had more respondents in the moderate and elevated contact groups than the larger sites. Sites with most of the patrons from outside the township had the highest percentage of respondents in the elevated contact group.

Figure 39 illustrates that men interviewed at sites that do not serve alcohol are evenly distributed across the outcome, while men at sites where alcohol is served tend to be in the low contact group. In addition, a greater proportion of respondents in the elevated contact group frequent sites close to a transportation route, such as a road or train station. We also found that 23% and 31% of respondents in the elevated contact group were interviewed at sites with and without prevention, respectively.

Table 12 illustrates that, in most cases, female respondents followed similar patterns to the men. With the exception of the number of community informants, individual characteristics dominated the significant associations with the outcome. In particular, age group, education, site-related behaviors, exposure to prevention programs, and condom use were associated with contact group. Concerning education, more education related to the higher contact groups, while three-quarters of the women with none or some primary

education are in the low contact group (Figure 40).

Unlike the men, greater frequency of attendance at the site was weakly associated with increased contact. However, significant associations do exist between contact group and other site-related behaviors, such as whether the respondent has ever met a partner at the site (P value < 0.01) and the number of sites visited on the day of the interview (P value < 0.01). Exposure to HIV/AIDS prevention programs and condom use were also associated with the outcome.

Women who carried a condom the day of the interview tended to be in the moderate or elevated contact group. In contrast to the men, the highest proportions of respondents in the elevated contact group were the youngest age groups (18-19 and 20-24). Additionally, the proportion of women in the low contact group shifts dramatically with age, from 37% of teenagers to 80% of women over age 40. The proportion of women in the elevated contact group tended to increase with the number of sites the woman attended the day of the interview. Concerning the site characteristics, an increased number of community informants notably relates to sites with higher percentages of women in the elevated contact group (Figure 41). Additionally, sites where most of the patrons come from outside the study area had more respondents in the elevated contact group.

Figure 39. Sites serving alcohol by contact group for male respondents.

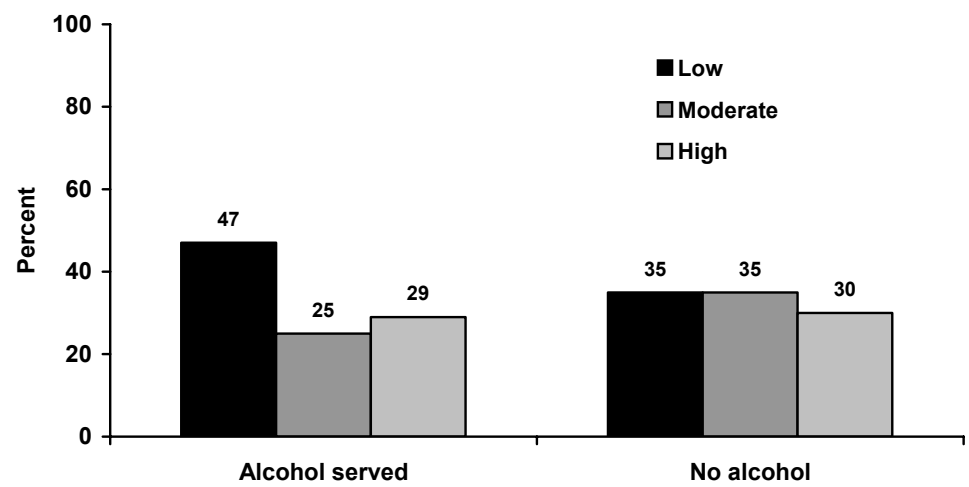


Figure 40. Education level by contact group for female respondents.

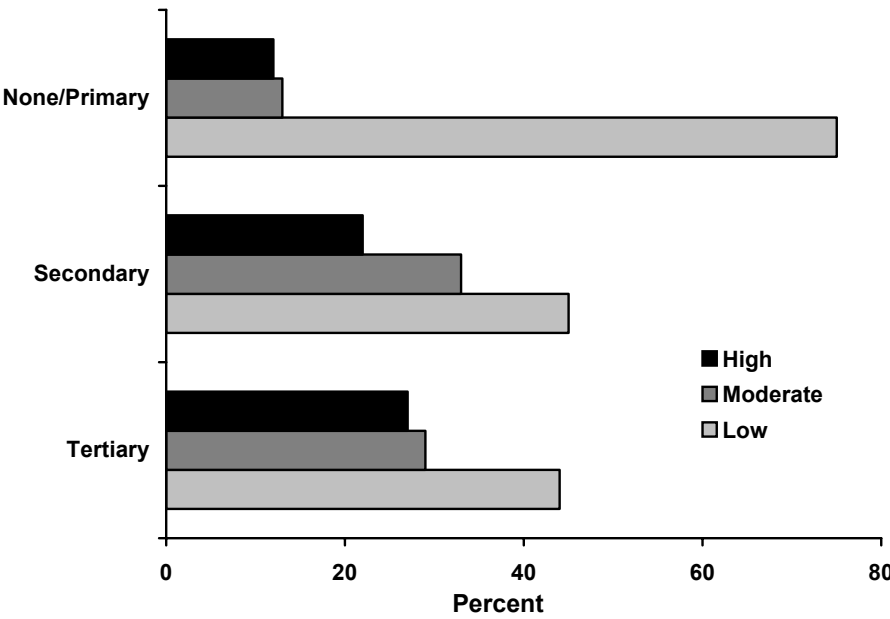


Figure 41. Number of site community informants by contact group for women.

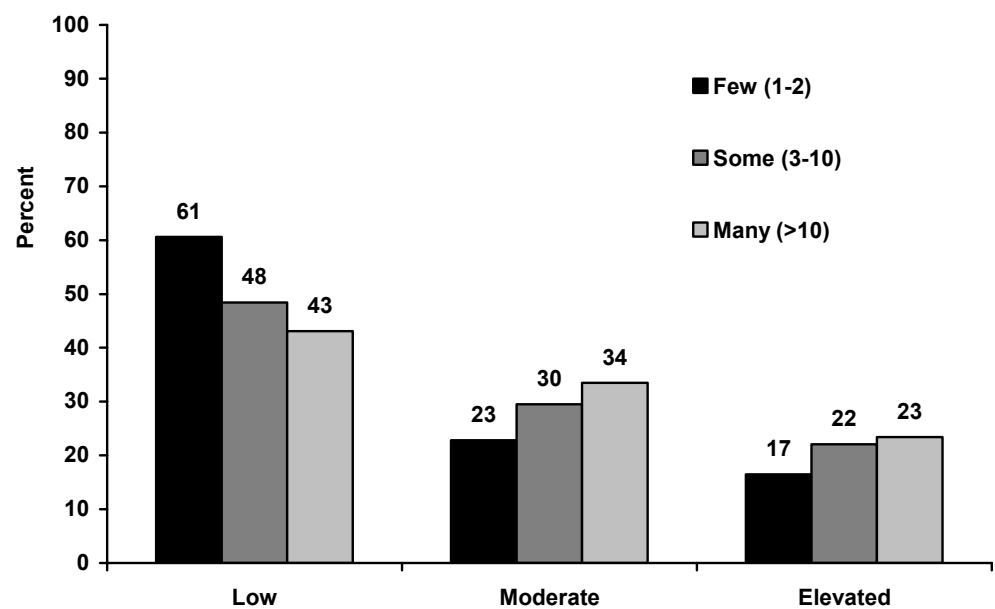


Table 12. Percent distribution of selected demographic, behavioral and site characteristics among female respondents by contact group

	Low (n=195)	Moderate (n=113)	Elevated (n=81)	χ^2^*	P value
Socio-demographic characteristics					
Age Group					
18-19	37.3	37.3	25.4	12.5	<0.01 [†]
20-24	40.2	30.4	29.4		
25-29	38.2	41.6	20.2		
30-34	62.1	22.4	15.5		
35-39	69.2	15.4	15.4		
40+	80.0	10.9	9.1		
Years educated				7.2	<0.01 [†]
Primary or none	75.0	13.2	11.8		
Some/completed secondary	45.0	32.8	22.3		
Some/completed tertiary	44.1	29.4	26.5		
Years lived in study area				3.2	0.07
2 or more years	51.6	27.9	20.5		
0-1 year	63.3	23.3	13.3		
Not a resident	31.9	40.4	27.7		
Employment status				0.1	0.72
Not employed	51.0	28.2	20.8		
Employed part or full time	48.3	30.8	21.0		
Behavioral characteristics					
Ever met a new partner at the site				20.8	<0.01 [†]
Yes	7.4	33.7	59.0		
No	64.0	27.6	8.5		
Frequency of attendance at site				2.8	0.09
Daily	42.0	30.4	27.5		
4-6 times per week	51.1	28.9	20.0		
2-3 times per week	50.0	27.6	22.4		
Weekly or less	54.5	30.1	15.5		
No. of sites visited on day of interview				10.4	<0.01 [†]
1 site	58.3	27.5	14.2		
2 sites	44.7	29.4	25.9		
3+ sites	26.6	34.4	39.1		
Ever used a condom				16.5	<0.01 [†]
Yes	36.3	37.1	26.6		
No	71.7	16.5	11.8		
Ever exposed to HIV/AIDS prevention				7.2	<0.01 [†]
Yes	44.3	30.5	25.2		
No	58.3	27.0	14.7		
Has condom at time of interview				6.8	<0.01 [†]
Yes	20.0	42.5	37.5		
No	53.6	27.5	18.9		

	Low (n=195)	Moderate (n=113)	Elevated (n=81)	χ^2^*	P value
Site characteristics					
Number of community informants				6.0	0.02 [†]
Few (1-2)	60.6	22.8	16.5		
Some (3-10)	48.4	29.5	22.1		
Many (>10)	43.1	33.5	23.4		
The type of site				2.0	0.16
Bars, clubs, informal bars, hotels, restaurants	53.0	26.0	21.0		
Schools, churches, stores, stadiums, markets	38.0	40.0	22.0		
Unstructured/ Abandoned/Transportation	43.6	38.5	18.0		
The size of the site				0.2	0.60
Small (<30 people)	25.0	37.5	37.5		
Medium (30-100 people)	54.7	23.7	21.6		
Big (>100 people)	48.9	32.0	19.1		
Longevity of site				0.0	0.87
Less than or equal to 2 years	52.2	26.1	21.7		
More than 2 years	49.7	29.7	20.6		
Prop. patrons come from outside the study area				1.3	0.26
None	63.3	14.3	22.5		
Some	49.5	31.3	19.3		
Most	46.6	31.1	22.3		
Alcohol served				0.3	0.56
Yes	51.4	27.3	21.3		
No	44.3	37.1	18.6		
Dancing on premises				0.8	0.38
Yes	45.5	33.3	21.2		
No	52.5	26.9	20.6		
Close proximity to transportation				0.2	0.69
Yes	50.3	29.9	19.7		
No	49.5	26.3	24.2		
Men meet female partners at site				0.4	0.55
Yes	49.2	30.0	20.8		
No	54.8	24.2	21.0		
Gay men meet partners at site				1.1	0.30
Yes	40.0	45.0	15.0		
No	50.7	28.2	21.1		
Sex workers solicit				0.7	0.42
Yes	44.0	34.1	22.0		
No	52.0	27.5	20.5		
Prevention on site				1.6	0.20
Yes	51.8	28.3	20.0		
No	43.2	32.4	24.3		
Site verifier showed interviewer a condom				0.1	0.75
Yes	49.5	28.6	22.0		
No	50.7	29.5	19.8		

* Chi-square controlling for site of interview

† Significant at the alpha=0.05 level

Model Selected Determinants of Contact Group

Using backward elimination and keeping covariates in the model at the $\alpha=0.2$ level, final models were selected for men and women. Appendix 7 contains tables that provide the actions taken at each step for men and women. For both men and women, the interaction term of serving alcohol by size of site did not survive model selection.

Table 13 contains the adjusted ORs and corresponding 95% confidence intervals for male respondents by contact group controlling for the site of the interview. Many of the covariates significantly relate to the outcome, as indicated by an asterisk (*) in the table. In general, younger men who visited many sites on the day of the interview and were interviewed at a site reported by 10 or more community informants that does not serve alcohol were significantly more likely to be in the elevated contact group. In fact, 18-29 year old men are 1.7 times more likely than men over 29 to be in the moderate or elevated group versus the low contact group. Employed men are 1.4 times more likely than unemployed men to be in the moderate or elevated contact group versus the low. Although there was not a significant difference between men who visited two versus one site the day of the interview, men who visited 3+ versus one site were 2.2 times more likely to be in an increased contact group than the low contact group (P value <0.0001). The site-level variables that remained in the model for the men include the service of alcohol at the site, size of the site and number of community informants reporting the site. Although only moderately significant, men interviewed at small or medium sized sites tended to be in the higher contact groups.

Table 14 provides the findings from the model selection for female respondents.

Young well-educated women who visited multiple sites the day of the interview had the poorest outcomes. For the women, age has the most striking effect on contact group with an odds ratio of 3.29 for 18-29 year olds versus women 30+ years old. Greater educational attainment also relates to a higher contact group. Women who have completed secondary school are 2.8 times more likely than women who have no or some primary education to be in the moderate or elevated group versus the low contact group (P value <0.01). Additionally, women who attended 3+ sites versus one site the day of the interview were 5.5 times more likely to be in the moderate or elevated contact group than the low. Lastly, although not significant, women who have lived in the study area for over two years are less likely to have poor outcomes.

Table 13. Odds ratios with 95% confidence interval for the model-selected covariates of male contact group

Variable	Odds Ratio	Lower CL	Upper CL
Age group			
18-29 years old versus greater than 29 years old	1.69	1.16	2.46*
Migration			
Lived in study area less than 2 years or from outside the study area versus lived in the study area 2 or more years	0.74	0.50	1.10
Unemployment			
Employed part or full time versus not employed	1.36	0.97	1.90
Number of sites visited day of interview			
3 or more sites versus 1 site	2.21	1.17	4.15*
2 sites versus 1 site	1.37	0.85	2.21
Number of community informants reporting the site			
3-9 community informants versus 1-2	1.91	1.13	3.24*
Greater or equal to 10 community informants versus 1-2	1.76	1.21	2.54*
Size of site			
Small or medium versus large	1.41	1.01	1.96*
Alcohol served at the site			
No versus yes	2.53	1.43	4.49*

*Significant based on the Bonferoni correction for multiple comparisons.

Table 14. Odds ratios with 95% confidence interval for the covariates selected for model of female contact group

Variable	Odds Ratio	Lower CL	Upper CL
Age group			
18-29 years old versus greater than 29 years old	3.29	2.28	4.75
Migration			
Lived in study area less than two years or from outside the study area versus lived in the study area two or more years	0.67	0.42	1.07
Education			
Some/completed secondary versus none/some primary	2.36	0.66	8.48
Some/completed tertiary versus none/some primary	5.48	2.84	10.59
Number of sites visited day of interview			
3 or more sites versus 1 site	2.84	1.45	5.57
2 sites versus 1 site	1.83	1.15	2.91

Discussion

The sample of sites selected for individual interviews differs in type, size and activities from the population of all verified sites. (With this in mind, the findings are representative of all patrons at sites where individual interviews were performed rather than patrons at all verified sites.) Although this limits the generalizability of the data, the study team sampled some of the sites due to their popularity and therefore their potential as places of high partnership rates requiring HIV prevention. Consequently, by over sampling sites with these characteristics, the findings provide data on sexual networking and new partnership acquisition for the intervention team that may have been difficult to discern from a simple random sample of sites.

The outcome variable relies on self-reported partnership data, which may be biased by a respondent's unwillingness to disclose their coital activities. Ideally, biological evidence of the individual's HIV status should be collected in conjunction with the individual and site survey data. This information would provide a much clearer picture of the actual behaviors and site characteristics associated with HIV acquisition. However, the goal of the PLACE method is to provide an inexpensive, rapid assessment tool to resource-poor areas. The constructed outcome variable provides the best proxy measure for HIV transmission assuming that people who have more risky behavior are more likely to transmit the virus. However, this assumption may in fact be incorrect, since as the data have shown, people in the elevated contact group are more likely to carry a condom with them and are possibly more likely to use a condom.

Identifying Priority Sites by Determining Key Populations

Ultimately, the PLACE method aims to identify sites with the greatest need for HIV prevention based on site characteristics conducive to the formation of new sexual partnerships. In part, the method meets this goal by elucidating information on the individuals socializing at the sites. Socio-demographic and site-related behaviors provide researchers with necessary information to focus interventions at sites where key populations socialize and meet sexual partners.

The findings show that the key populations vary slightly by gender. Among women, age group, education, site-related behaviors, exposure to prevention programs, and condom use significantly relate to the contact group. As one would expect from the course of the epidemic, the associations showed that moderate and elevated contact groups primarily consist of younger women and the higher education group. Current literature supports this finding, since women typically contract the virus earlier than men, as evidenced by the presentation of AIDS-related symptoms in their mid- to late-twenties. Additionally, due to greater opportunities to travel, paid sex, and more exposure to the virus, HIV/AIDS devastated the well-educated of South Africa first, before spreading to other populations. Perhaps our findings indicate that the highly educated still face greater risk for HIV acquisition.

Similarly, age group, site-related behaviors, and exposure to prevention characterize the contact groups for the men. Specifically, the direction of the association shows that men who are younger (but slightly older than the women), have ever used a condom, have been exposed to prevention, have ever met

a partner at the site, or have visited multiple sites the day of the interview are significantly associated with the outcome. Although these associations control for the site of the interview, they are unadjusted for other covariates.

For both men and women, frequency of attendance at the site was not significantly associated with the outcome. In part, this may be due to the social constructs of the township. People may not primarily attend the site to meet new and previous partners, but rather as a place to socialize and drink alcohol.

Exposure to the intervention was associated with higher contact groups for both men and women. This finding is not surprising since the prevention program implemented over the two years prior to the survey targeted sites where the most partnerships were reported in the baseline survey. Additionally, respondents in the higher contact groups reported more condom use and were more likely to have a condom at the time of the interview. This finding is consistent with current literature that suggests that people who consider themselves at risk for HIV are more likely to use condoms (Kamya, McFarland, Hudes, Ssali, Busuulwa, & Hearst, 1997; Opio, Asimwe-Okiror, Musinguzi, Kaweesa-Kistu, Madraa, & Nsubuga 1997). Moreover, many of these respondents reported being exposed to the intervention. Therefore, it is possible that they became aware of their risk through the intervention and began using condoms.

In conclusion, the data provide insights into the characteristics of priority sites based on patrons who would benefit from new or continued HIV prevention programs. In particular, the interventions should be directed towards places frequented by young men or women between 20-29 years old with at least some high school education, and who frequent 3+ sites in an evening. Because women

frequently become involved with men many years their senior, intervention may be needed at sites with older men, in order to contact younger women. Additionally, employment status plays a role in partnership acquisition with employed men and unemployed women in the elevated contact group. Respondents who have ever met a new partner at the site are more likely to be in the moderate or elevated group. Therefore, sites with a high proportion of patrons who answered yes to this question should be targeted.

Identifying Priority Sites Based on Site Characteristics

To determine whether site-level characteristics related to the moderate and elevated contact groups, associations between key covariates and the outcome were assessed. However, few site-level variables proved to be significantly related to the outcome variable for men or women. Nevertheless, the findings provide some insights into the types of places where respondents with new partnerships and a high number of total partners patronize.

The results show that respondents in the moderate or elevated contact group frequented unstructured sites like streets, parks, and public toilets. This finding parallels the fact that sites where alcohol is not served contain higher percentages of respondent in the moderate and elevated contact groups. This may reflect that sex work occurs at these more informal sites. We also found that 37% of respondents at sites without HIV/AIDS prevention activities are in the elevated contact group, while only 27% of respondents at sites with the intervention were in the elevated contact group. This suggests that the prevention program is desperately needed in the informal places as well as the more structured bars and shebeens. More popular sites, small venues, places where alcohol is not served, sites where most of

the patrons come from outside the study area, and sites that are in close proximity to transportation routes should be targeted with prevention efforts.

Combining Individual- and Site-level Data to Identify Priority Sites

After combining individual- and site-level data, the best models by gender for determining the characteristics of respondents with increased risky contacts and the features of the sites where they socialize were found. Both models showed that young people who are less than 30 years old are more likely to be in the moderate or elevated group versus the low contact group. This makes sense intuitively, since sexual function and drive peak early in life and decrease with age. As previously mentioned, migration relates to increased risk of HIV acquisition. The models support this theory by showing that men and women who have lived in the study area for two or more years are less likely to be in the moderate or elevated contact group.

In contrast to women, employment status, the number of community informants, site size, and alcohol service at the site remained in the model for the male contact group. In part, employed men may be at greater risk since they have more resources to go to bars and pay for sex workers. Respondents in the moderate or elevated contact groups more often attend sites where alcohol is not served. As explained above, this finding may reflect those informal sites where sex work occurs.

Unlike the men, education level remained in the model for the women. Having completed any secondary education related to poorer outcomes for the women. Again, this finding may be due to increased exposure to larger sexual networks.

Most strikingly, the number of sites a respondent visited on the day of the

interview was significantly related to the outcome, for both men and women. Male respondents who visited 3+ sites versus one site the day of the interview were as much as 4.1 times more likely to be in the moderate or elevated contact groups versus the low group, and female respondents with the same characteristic were 5.5 times more likely. This finding has enormous implications for the intervention team. Clearly, individuals form risky partnerships at the sites, indicating the need for continued prevention efforts at these places. Notably, for both men and women the confidence intervals of these estimates are wide, however the strength of the associations is highly significant, especially for the women (P value $<.0001$).

Subsequent Applications of this Analysis Approach for PLACE Studies

PLACE attempts to identify unique local features of the venues where HIV is transmitted by focusing on areas with the highest transmission rates. With each completed study, new knowledge of country- or region-specific characteristics of the epidemic emerged. Although the findings help to elucidate the situation in the Eastern Cape of South Africa, other areas are likely to have different significant determinants of moderate and elevated contact groups. Therefore, it is essential to complete similar analyses of other areas to understand better the characteristics associated with risky sexual behavior.

One notable limitation of the specific area chosen for this analysis is the lack of heterogeneity among the sample of sites and the individuals in the township. In other areas where the PLACE method has been done, stronger associations between site variables in the outcome may be seen. For example, a PLACE assessment carried out in India included a wide breadth of sites, from the slums to a women's college.

Therefore, it would be interesting to apply this same analysis approach to data from other countries and explore these relationships.

Conclusions

The analysis objectives were to determine if there is an association between self-reported sexual partnership formation and socio-demographic, behavioral and site characteristics. The goals were achieved by examining unadjusted associations between the explanatory variables and the outcome and selecting the best model for characterizing the differences between the moderate and elevated contact groups versus the low contact group.

In conclusion, individual characteristics rather than site characteristics play a major role in identifying individuals more likely to be in the moderate or elevated contact groups. In particular, young age and high education are major determining factors for increased new partnership acquisition and a high number of recent partners. Additionally, mobility both in terms of being a non-resident of the study area and visiting multiple sites in the course of an evening relate to riskier behavior. Although site characteristics did not provide sufficient explanation of the differences in contact group in general, our findings show that the intervention should not only target bars, but also informal sites like parks and streets where alcohol is not served. The results of this analysis can be used to improve further the HIV/AIDS prevention activities at sites identified by the PLACE method.

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Appendix 1 – Questionnaires

Township 1 Baseline CHARACTERISTICS OF KEY INFORMANTS

No.	Questions	Coding categories
KI1	Study area	TOWNSHIP 1 1
KI2	Interviewer	___
KI3	Key Informant number	___
KI4	Date	___/___/00
KI5	Gender of Key Informant	MALE 1 FEMALE 2
KI6	Type of Key Informant: CIRCLE AND CODE. TAXI DRIVER 01 NATIONAL TRUCK DRIVER 02 INTERNATIONAL TRUCK DRIVER 03 SHEBEEN OWNER 04 BAR OR TAVERN OWNER 05 BARMAID 06 INDIVIDUAL SOCIALISING AT SITE 07 BOTTLE STORE/BREWERY DROP OFF 08 SEX WORKER 09 CBO/NGO STAFF 10 SANDF 11 NURSE 12 PEER HEALTH EDUCATOR 13 CODE: ___ COMMUNITY HEALTH WORKER 14 YOUTH IN SCHOOL 15 YOUTH OUT OF SCHOOL 16 TEACHER 17 SAPS (POLICE) 18 SECURITY GUARD 19 TRADER/BUSINESS 20 HAWKER/VENDOR 21 UNEMPLOYED 22 OTHER _____ 23	
KI7	Place where interview was conducted. TAXI STAND 01 TRUCK STOP 02 BAR OR TAVERN 03 SHEBEEN 04 BOTTLE STORE/BREWERY 05 CBO/NGO 06 POLICE STATION 07 HEALTH FACILITY 08 CODE: ___ OUTSIDE OF A SCHOOL 09 ON THE STREET 10 ON A DOCK 11 IN THE MARKET 12 OTHER _____ 13	

No.	Questions	Coding categories
Hello. I am working in this area to develop better health programs. We want to talk with people like you in the community and ask you a few questions. We won't ask you for your name. Your answers will be kept confidential. The questions include questions about where you think people meet sexual partners. Your participation is completely voluntary.		
KI8	Are you willing to answer a few questions? *IF NO, STOP INTERVIEW.	YES 1 IF NO, STOP INTERVIEW. NO 2
KI9	In what year were you born? *CONCLUDE INTERVIEW IF RESPONDENT IS BORN AFTER AUGUST 1986 (YOUNGER THAN 14)	19__ __
KI10	Where do you live? *USE GEOGRAPHIC CODES	__ __
KI11	How long have you lived there? *IN THIS CASE, 'THERE' REFERS TO WITHIN THE GEOGRAPHIC CODE MENTIONED ABOVE	LESS THAN ONE YEAR 0 NUMBER OF YEARS __ __ "ALL MY LIFE" 98
KI12	*HOW MANY SITES DID THIS KEY INFORMANT NAME?	NUMBER OF SITES ____

QUESTIONS TO ASK KEY INFORMANTS TO PROBE FOR SITES, AREAS AND EVENTS

The main questions that should be asked are:

- Where do people from Township 1 meet new sexual partners?

Other probing questions:

- Where do people from outside Township 1 meet new sexual partners?
- Where do *(students, youth, single women, single men, young people, older women, older men, people without cars)* go to *(socialize, find partners, meet friends, drink, dance, hang out, listen to music)*?
- Where do people go on Friday or Saturday night to relax?
- Is there a house nearby where people *(socialize, relax after work, drink beer, drink home brew)*?
- Is there a weekly sporting event *(soccer, cricket, rugby ...)* in Township 1? If so, where do players or spectators go after the match or game?

SITE EVENT AND REPORT FORM
Township 1 Baseline

S1	Key Informant Number / Site	_____ / _____
S2	Name of Site	_____
S3	Type of Site 01 Bar/Tavern 02 Shebeen/Home Brew 03 Nightclub 04 Gay bar 05 Brothel 06 Bottle Store 07 Private Dwelling 08 Taxi Stand 09 Truck Stop 10 Market Place 11 Church 12 School Yard 13 Street 14 Empty Plot 15 Unused House 16 Public Toilet 17 Spaza 18 Bus Station 19 Railway 20 Hotel 21 Braai vleis place 22 Other (specify) _____ *ENTER CODE: ____	
S4	Address of Site and how to find it	
S5	Geographic zone in Study Area where reported site is located *USE GEOGRAPHIC CODES	GEOGRAPHIC CODE ____
S6	Unique Site Number *CAN BE FILLED IN LATER	SITE NUMBER ____
S7	Location of site in relation to where interview is conducted	SAME GEOGRAPHIC CODE 1 AN ADJACENT GEOGRAPHIC CODE 2 ANOTHER GEOGRAPHIC CODE IN TOWNSHIP 1 3 GEOGRAPHIC CODE OUTSIDE OF TOWNSHIP 1 4

SITE VERIFICATION FORM
Township 1 Baseline

No.	Questions	Coding categories
V1	HTA	Township 1 1
V2	Site name	_____
V3	Unique Site Number	_____
V4	Geographic code indicating location of site	_____
V5	Interviewer	_____
V6	Date (DD/MM/YY)	___ / ___ / ___
V7	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
V8	Time of day (24 HOUR CLOCK)	___ : ___
V9	Outcome of site verification	SITE NOT FOUND 0 SITE FOUND AND ADDRESS CORRECT 1 SITE FOUND BUT ADDRESS INCORRECT 2 SITE FOUND BUT MANAGER REFUSED 3 SITE CLOSED TEMPORARILY 4 NO LONGER A SITE 5 CORRECT ADDRESS: _____ _____

No.	Questions	Coding categories																		
V10	Codes For Type Of Site: 01 Bar/Tavern 02 Shebeen/Home Brew 03 Nightclub 04 Gay bar 05 Brothel 06 Bottle Store 07 Private Dwelling 08 Taxi Stand 09 Truck Stop 10 Market Place 11 Church 12 School Yard 13 Street	*ENTER CODE ____ 14 Empty Plot 15 Unused House 16 Public Toilet 17 Spaza 18 Bus Station 19 Railway 20 Hotel 21 Braai vleis area 22 Other (specify) _____																		
V11	Number socializing upon interviewer arrival at site	MEN: ____ WOMEN: ____																		
V12	Gender of respondent	MALE 1 FEMALE 2																		
READ: Hello. I am working in Township 1 to help develop better health programmes for our city. We would like to ask you a few questions to get some information necessary to plan and evaluate the programs. We won't ask you for your name. Your answers will be kept confidential. The questions include questions about activities that occur at this place, the people who come here, and programmes that may take place here. We would also like to return during a busier moment to talk with some individuals socialising here. Your participation is completely voluntary.																				
V13	Are you willing to answer these questions?	YES 1 NO 2																		
V14	Would it be OK for someone to come back and ask approximately 24 people here some questions?	YES 1 NO 2																		
V15	In what year were you born? *STOP INTERVIEW IF RESPONDENT IS YOUNGER THAN 14 – BORN AFTER AUGUST 1986	19 ____																		
V16	Has this site been in operation for more than 2 years?	YES 1 NO 2																		
V17	How many men and women of the following types of people work here: *READ LIST	<table border="0"> <thead> <tr> <th></th> <th>MEN</th> <th>WOMEN</th> </tr> </thead> <tbody> <tr> <td>Bar workers</td> <td>____</td> <td>____</td> </tr> <tr> <td>Servers/waiters/waitresses</td> <td>____</td> <td>____</td> </tr> <tr> <td>Chambermaids</td> <td>____</td> <td>____</td> </tr> <tr> <td>Security Guards</td> <td>____</td> <td>____</td> </tr> <tr> <td><other types of employees></td> <td>____</td> <td>____</td> </tr> </tbody> </table>		MEN	WOMEN	Bar workers	____	____	Servers/waiters/waitresses	____	____	Chambermaids	____	____	Security Guards	____	____	<other types of employees>	____	____
	MEN	WOMEN																		
Bar workers	____	____																		
Servers/waiters/waitresses	____	____																		
Chambermaids	____	____																		
Security Guards	____	____																		
<other types of employees>	____	____																		

No.	Questions	Coding categories
V18	Which types of activities take place here? *CIRCLE CODE FOR EACH ACTIVITY	YES NO DK Beer Consumed 1 2 8 Hard Alcohol Consumed 1 2 8 TV Or Video Viewing 1 2 8 Dancing 1 2 8 Music 1 2 8 Stokvel 1 2 8
V19	How much alcohol is sold on a busy day/night?	BEER/CIDERS: DUMPIES/CANS ____ QUARTS (750ml) ____ HOT STUFF(SPIRITS): NIPS/HALFS ____ $\frac{3}{4}$ OR BOTTLES ____ HOME BREW IN PINTS (SKALI) ____ WINES/SHERRY IN BOTTLES ____
V20	Where do people come from who come here? PROBE: What branches of Township 1? What sections of the East London? Where outside East London? *USE GEOGRAPHIC CODES	GEOGRAPHIC CODES ____ ____ ____ ____ ____
V21	I have been told that people meet sexual partners at places like this. Do..... *READ LIST	YES NO DK Men Meet New Sexual Partners 1 2 8 Women Meet New Sexual Partners 1 2 8 Men Meet Up With Previous Sexual Partners 1 2 8 Women Meet Up With Previous Partners 1 2 8 Gay Men Meet Sexual Partners 1 2 8 A Person Onsite Facilitates Meeting Partners 1 2 8 Female Sex Workers Solicit Customers 1 2 8
V22	Do partners who meet here have sex..... *READ LIST	YES NO ON SITE 1 2 OUTSIDE, NEAR THE SITE 1 2 NEARBY HOTEL 1 2 OTHER _____ 1 2 Specify
V23	Where else do people who come here go to meet new sexual partners?	SITE NAME / SITE ID GEO. CODE _____ _____ _____

No.	Questions	Coding categories				
*READ: We would like some information on the characteristics of the men and women who come here during your busiest times. For each characteristic, tell me what proportion of the men or women have the characteristic						
V24	How many men who come here during the busiest times: (a) Are Unemployed (b) Are Students (c) Are < Age 18 (d) Live in this branch (e) Live in Township 1 but in another branch (f) Come here at least once a week (g) Drink alcohol here (h) Move to or come from another shebeen or bar on the same day and night (i) Find a new sexual partner while they are here (j) Find a previous sexual partner while they are here	<u>None/Very Few</u>	<u>< Half</u>	<u>Half</u>	<u>>Half</u>	<u>Almost All/All</u>
		0	1	2	3	4
		0	1	2	3	4
		0	1	2	3	4
		0	1	2	3	4
		0	1	2	3	4
		0	1	2	3	4
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No.	Questions	Coding categories				
			Morning	Afternoon	Evening	Late night
V26	What are the busiest time(s) here? *PROBE FOR DAYS AND TIMES OF DAY AND CHECK OFF BOXES	MON				
		TUES				
		WED				
		THURS				
		FRI				
		SAT				
		SUN				
V27	Why are these times so busy? _____					
V28	Approximately how many men come here during the course of a busy day? Try to estimate the total number of men who come at any time between opening and closing. *READ OPTIONS	< 10 1				
		11-20 2				
		21-50 3				
		51-100 4				
		101-300 5				
		301-500 6				
		501-1000 7				
V29	Approximately how many women come here during the course of a busy day? Try to estimate the total number of women who come at any time between opening and closing. *READ OPTIONS IF NECESSARY	< 10 1				
		11-20 2				
		21-50 3				
		51-100 4				
		101-300 5				
		301-500 6				
		501-1000 7				
V30	What are the busiest times of the year? *CAN MARK MORE THAN ONE OPTION	SUMMER 1				
		WINTER 2				
		SCHOOL HOLIDAYS 3				
		PUBLIC HOLIDAYS 4				
		FESTIVE SEASON (DEC – JAN) 5				
		DON'T KNOW 8				
		OTHER _____ 9 specify				
V31	Have there ever been any AIDS prevention activities at this site?	YES 1				
		NO 2				
		DESCRIBE: _____ _____ _____				
		ACTIVITY CODES ____ ____ ____ ____				

No.	Questions	Coding categories
V32	In the past year, how often have condoms been available here?	ALWAYS 1 SOMETIMES 2 NEVER 3
V33	Are there any condoms here today? If YES, can I see one? IF YES, Brand and Price.	YES, BUT YOU CANT SEE ONE 1 YES, AND A CONDOM WAS SEEN 2 NO 3 BRAND OF CONDOM SEEN: _____ PRICE _____ RANDS FOR ____ (number) CONDOMS
V34	In the past four weeks, how many condoms were sold or taken?	SOLD: ____ ____ ____ TAKEN FREELY: ____ ____ ____
V35	Are condoms available nearby?	YES 1 NO 2
V36	Would you be willing to: (1) have an AIDS prevention programme for people? (2) sell condoms here?	YES 1 NO 2 YES 1 NO 2 NOT APPLICABLE 9
V37	Observation: Evidence of AIDS prevention activities noted by interviewer at the site	NUMBER OF AIDS POSTERS DISPLAYED ____ ____ NUMBER OF AIDS BROCHURES AT SITE ____ ____ NUMBER OF CONDOMS VISIBLE ____ ____

QUESTIONNAIRE FOR INDIVIDUALS SOCIALISING AT SITES OR EVENTS
Township 1 Baseline

No.	Questions	Coding categories
Q1	Study Area (HTA)	Township 1
Q2	Interviewer Number	__ __
Q3	Interview number	__ __ __
Q4	Name of site or event and unique site number	__ __ __ _____
Q5	Geographic code for site	__ __ __
Q6	Date (DD/MM/YY)	__ __ / __ __ / __ __
Q7	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
Q8	Time of day (24 hour clock)	__ __ : __ __
Q9	Number socializing upon interviewer arrival at site	MEN: __ __ __ WOMEN: __ __ __
Q10	Gender of respondent	MALE 1 FEMALE 2
Hello. I am working in Township 1 to help develop better health programmes for our city. We would like to ask you few questions to get some information necessary to plan and evaluate the programs. We won't ask you for your name. Your answers will be kept confidential. The questions include questions about your behaviour including your sexual behaviour. Your participation is completely voluntary.		
Q11A	Are you willing to answer these questions? *IF NO, STOP INTERVIEW	YES 1 NO 2

No.	Questions	Coding categories
Q11B	Is this the first time you have been approached to answer these questions? *IF NO, ASK WHERE THEY WERE INTERVIEWED PREVIOUSLY	YES 1 NO 2 PREVIOUS SITE NAME: _____ UNIQUE SITE NUMBER: _____ GEOGRAPHIC CODE: _____
Q12	In what year were you born? *STOP INTERVIEW IF RESPONDENT IS YOUNGER THAN 14 = BORN AFTER OCTOBER 1986	19__ __
Q13	IF YOUNGER THAN 25 (BORN AFTER OCTOBER 1975): Are you currently a student?	YES 1 NO 2 OLDER THAN 25 YEARS 9
Q14	Where do you live? *USE PROBES: What section of Township 1? Where in East London? Where outside East London?	*USE GEOGRAPHIC CODES __ __
Q15	*IF PERSON LIVES IN TOWNSHIP 1: How long have you lived in Township 1?	LESS THAN ONE YEAR 0 NUMBER OF YEARS __ __ ALL MY LIFE 97 LIVES OUTSIDE TOWNSHIP 1 99
Q16	*IF PERSON HAS <u>NOT</u> LIVED IN TOWNSHIP 1 ALL THEIR LIFE: Where did you live before?	*USE GEOGRAPHIC CODES __ __ LIVES OUTSIDE TOWNSHIP 1 OR IN TOWNSHIP 1 ALL THEIR LIFE 99
Q17	Are you currently employed?	NO, LOOKING FOR WORK 0 NO, NOT LOOKING FOR WORK 1 YES, OCCASIONAL WORK OR PARTTIME 2 YES, FULLTIME 3
Q18	How many years of school did you complete?	NUMBER OF YEARS __ __

No.	Questions	Coding categories
Q19	How often do you come here? *CIRCLE ONLY 1 RESPONSE.	EVERYDAY 1 4-6 TIMES PER WEEK 2 2-3 TIMES PER WEEK 3 ONE TIME PER WEEK 4 2-3 TIMES PER MONTH 5 ONE TIME PER MONTH 6 THIS IS MY FIRST VISIT 7
Q20	When did you come here the first time?	THIS IS MY FIRST VISIT 1 WITHIN PAST 4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5 OVER 5 YEARS AGO 6
Q21	How many shebeens or taverns have you been to today? How many others will you go to today or tonight?	ALREADY BEEN TO ____ WILL GO TO ____
Q22	Some people come to places like this to meet new sexual partners or to meet up with people they had sex with previously. Do you believe that people find sexual partners here? *PROBE FOR NEW AND PREVIOUS	YES NO NEW PARTNERS 1 2 PREVIOUS PARTNERS 1 2
Q23	In order to develop health education programs for people here, we want to know whether people come here to meet sexual partners, to drink alcohol, or just to socialize with friends. Why did you come here?	YES NO TO DRINK ALCOHOL 1 2 TO MEET A SEXUAL PARTNER 1 2 TO SOCIALIZE WITH FRIENDS 1 2 OTHER (SPECIFY):_____1 2
Q24	Have you ever met a new or previous sexual partner here? *PROBE FOR NEW AND PREVIOUS	YES NO NEW PARTNERS 1 2 PREVIOUS PARTNERS 1 2
Q25	*CHECK IF MET A <u>NEW</u> PARTNER HERE: How recently did you attract a new sexual partner at this site?	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5 NEVER MET A NEW PARTNER HERE 9

No.	Questions	Coding categories																																																															
Q26	*CHECK IF MET A <u>NEW</u> PARTNER HERE: The last time you met a new partner here, what day of the week was it and at about what time did you arrive here?	DAY OF WEEK: _____ TIME OF ARRIVAL (24Hour Clock): _____ NEVER MET A NEW PARTNER HERE 9																																																															
Q27	*CHECK IF MET A <u>PREVIOUS</u> PARTNER HERE When did you last make contact with someone you previously had sex with here?	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5 NEVER MET PREVIOUS PARTNER HERE 9																																																															
Q28	In the past 3 months where have you gone to meet new sexual partners? ASK FOR EACH BRANCH AND PROBE FOR OTHER PLACES IN EAST LONDON, IN EASTERN CAPE, AND SOUTH AFRICA USING GEOGRAPHIC CODE LIST. RECORD OTHER PLACES.	<table border="0"> <thead> <tr> <th></th><th>YES</th><th>NO</th></tr> </thead> <tbody> <tr><td>ZONE A</td><td>1</td><td>2</td></tr> <tr><td>ZONE B</td><td>1</td><td>2</td></tr> <tr><td>ZONE C</td><td>1</td><td>2</td></tr> <tr><td>ZONE D</td><td>1</td><td>2</td></tr> <tr><td>ZONE E</td><td>1</td><td>2</td></tr> <tr><td>ZONE F</td><td>1</td><td>2</td></tr> <tr><td>ZONE G</td><td>1</td><td>2</td></tr> <tr><td>ZONE H</td><td>1</td><td>2</td></tr> <tr><td>ZONE I</td><td>1</td><td>2</td></tr> <tr><td>ZONE J</td><td>1</td><td>2</td></tr> <tr><td>ZONE K</td><td>1</td><td>2</td></tr> <tr><td>ELSEWHERE EAST LONDON</td><td>1</td><td>2</td></tr> <tr><td colspan="3">IF YES, GEO CODES:</td></tr> <tr><td colspan="3">_____</td></tr> <tr><td>ELSEWHERE EASTERN CAPE</td><td>1</td><td>2</td></tr> <tr><td colspan="3">IF YES, GEO CODES:</td></tr> <tr><td colspan="3">_____</td></tr> <tr><td>ELSEWHERE SOUTH AFRICA</td><td>1</td><td>2</td></tr> <tr><td colspan="3">IF YES, GEO CODES:</td></tr> <tr><td colspan="3">_____</td></tr> </tbody> </table>		YES	NO	ZONE A	1	2	ZONE B	1	2	ZONE C	1	2	ZONE D	1	2	ZONE E	1	2	ZONE F	1	2	ZONE G	1	2	ZONE H	1	2	ZONE I	1	2	ZONE J	1	2	ZONE K	1	2	ELSEWHERE EAST LONDON	1	2	IF YES, GEO CODES:			_____			ELSEWHERE EASTERN CAPE	1	2	IF YES, GEO CODES:			_____			ELSEWHERE SOUTH AFRICA	1	2	IF YES, GEO CODES:			_____		
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Q29	Where do your regular sexual partners live? What section of Township 1? Where in East London, outside East London? .	GEOGRAPHIC CODES _____ _____ _____																																																															
Q30	How many different people have you had sex with in the last 4 weeks?	_____																																																															

No.	Questions	Coding categories
Q31	How many of these were new partners?	____ _
*READ IF HAD AT LEAST 1 PARTNER: Now I want to ask you about the partners you had in the past 4 weeks, starting with the last person you had sex with.		
Q32	Was this person a new partner?	NEW 1 PREVIOUS 2
Q33	What is your relationship to this person? *PROBE FOR ACCURATE ANSWER	HUSBAND/WIFE/LIVE-IN PARTNER 1 BOYFRIEND/GIRLFRIEND (NOT LIVE-IN) 2 SOMEONE YOU PAID FOR SEX 3 SOMEONE WHO PAID YOU FOR SEX 4 OTHER CASUAL ACQUAINTANCE 5 OTHER _____ 6
Q34	The last time you had sex, where did you meet up with that person? Was it here? *PROBE FOR ACCURATE ANSWERS	HERE 1 HOME 2 NAME OF SITE _____ UNIQUE SITE ID ____ _ GEOGRAPHIC CODE FOR SITE ____ _
Q35	Did you use a condom the last time you had sex with this person?	YES 1 NO 2
*READ IF HAD AT LEAST 2 PARTNERS: Now what about the partner before your last one?		
Q36	Was this person a new partner?	NEW 1 PREVIOUS 2
Q37	What is your relationship to this person? *PROBE FOR ACCURATE ANSWER	HUSBAND/WIFE/LIVE-IN PARTNER 1 BOYFRIEND/GIRLFRIEND (NOT LIVE-IN) 2 SOMEONE YOU PAID FOR SEX 3 SOMEONE WHO PAID YOU FOR SEX 4 OTHER CASUAL ACQUAINTANCE 5 OTHER _____ 6
Q38	The last time you had sex, where did you meet up with that person? *PROBE FOR ACCURATE ANSWERS	HERE 1 HOME 2 NAME OF SITE _____ UNIQUE SITE ID ____ _ GEOGRAPHIC CODE FOR SITE ____ _

No.	Questions	Coding categories
Q39	Did you use a condom the last time you had sex with this person?	YES 1 NO 2
*READ IF HAD AT LEAST 3 PARTNERS: Now what about the partner before that one?		
Q40	Was this person a new partner?	NEW 1 PREVIOUS 2
Q41	What is your relationship to this person? *PROBE FOR ACCURATE ANSWER	HUSBAND/WIFE/LIVE-IN PARTNER 1 BOYFRIEND/GIRLFRIEND (NOT LIVE-IN) 2 SOMEONE YOU PAID FOR SEX 3 SOMEONE WHO PAID YOU FOR SEX 4 OTHER CASUAL ACQUAINTANCE 5 OTHER _____ 6
Q42	The last time you had sex, where did you meet up with that person? *PROBE FOR ACCURATE ANSWERS	HERE 1 HOME 2 NAME OF SITE _____ UNIQUE SITE ID ____ ____ GEOGRAPHIC CODE FOR SITE ____ ____
Q43	Did you use a condom the last time you had sex with this person?	YES 1 NO 2
*READ IF HAD AT LEAST 4 PARTNERS: Now what about the partner before that one?		
Q44	Was this person a new partner?	NEW 1 PREVIOUS 2
Q45	What is your relationship to this person? *PROBE FOR ACCURATE ANSWER	HUSBAND/WIFE/LIVE-IN PARTNER 1 BOYFRIEND/GIRLFRIEND (NOT LIVE-IN) 2 SOMEONE YOU PAID FOR SEX 3 SOMEONE WHO PAID YOU FOR SEX 4 OTHER CASUAL ACQUAINTANCE 5 OTHER _____ 6
Q46	The last time you had sex, where did you meet up with that person? *PROBE FOR ACCURATE ANSWERS	HERE 1 HOME 2 NAME OF SITE _____ UNIQUE SITE ID ____ ____ GEOGRAPHIC CODE FOR SITE ____ ____
Q47	Did you use a condom the last time you had sex with this person?	YES 1 NO 2

No.	Questions	Coding categories
Q48	Including the _____ people you had sex with in the past 4 weeks, how many different people have you had sex with in the past 12 months?	12 MONTH TOTAL: ____ ____
Q49	Of these, how many were new sexual partners for you in the past 12 months?	12 MONTH NEW: ____ ____
Q50	Have you ever used a condom?	YES 1 NO 2
Q51	Do you have a condom with you?	YES 1 NO 2
Q52	If YES, may I please see it? *IF SEEN: IDENTIFY BRAND.	NOT SEEN 0 BRAND: _____
Q53	How many group AIDS educational sessions have you attended in Township 1? Of those, how many were at this site? When was the last one you attended?	NO. OF SESSIONS IN TOWNSHIP 1: ____ ____ NUMBER OF SESSIONS AT SITE: ____ ____ MONTH/YEAR: ____ ____/____ ____
Q54	How many times have you talked individually with a peer health educator about AIDS in Township 1? Of those, how many times have you talked to one at this site? In someone's home? When was the last time?	NO. OF TIMES IN TOWNSHIP 1: ____ ____ NUMBER OF TIMES AT SITE: ____ ____ NUMBER OF TIMES IN A HOME? ____ ____ MONTH/YEAR: ____ ____/____ ____
Q55	How much alcohol do you usually drink when you come here?	BEER/CIDERS: DUMPIES/CANS ____ ____ QUARTS (750ml) ____ ____ HOT STUFF(SPIRITS): NIPS/HALFS ____ ____ ¾ OR BOTTLES ____ ____ HOME BREW IN PINTS (SKALI) ____ ____ WINES/SHERRY IN BOTTLES ____ ____
Q56	WOMEN ONLY: Has a man forced you to have sex against your will in the past year?	YES 1 NO 2 MALE RESPONDENT 9

No.	Questions	Coding categories																
Q57	MEN ONLY: Some men experience pain during urination, have an unusual discharge from the penis, or have sores in the genital area. During the past 4 weeks, have you had *READ LIST	<table border="0"> <thead> <tr> <th>SYMPTOMS</th><th>YES</th><th>NO</th><th>N/A</th></tr> </thead> <tbody> <tr> <td>PAIN ON URINATION?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>UNUSUAL DISCHARGE?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>SORES?</td><td>1</td><td>2</td><td>9</td></tr> </tbody> </table>	SYMPTOMS	YES	NO	N/A	PAIN ON URINATION?	1	2	9	UNUSUAL DISCHARGE?	1	2	9	SORES?	1	2	9
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Q58	WOMEN ONLY: Some women have lower abdominal pain, an unusual discharge from the vagina, or sores in the genital area. During the past 4 weeks, have you had *READ LIST	<table border="0"> <thead> <tr> <th><u>SYMPTOMS</u></th><th>YES</th><th>NO</th><th>N/A</th></tr> </thead> <tbody> <tr> <td>LOWER ABDOMINAL PAIN?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>UNUSUAL DISCHARGE?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>SORES?</td><td>1</td><td>2</td><td>9</td></tr> </tbody> </table>	<u>SYMPTOMS</u>	YES	NO	N/A	LOWER ABDOMINAL PAIN?	1	2	9	UNUSUAL DISCHARGE?	1	2	9	SORES?	1	2	9
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Q59	*IF MEN OR WOMEN HAVE ANY SYMPTOMS (Q53 or Q54): Did you go to a clinic for treatment? *IF YES: Which clinic?	<table border="0"> <tbody> <tr> <td>YES</td><td>1</td></tr> <tr> <td>NO</td><td>2</td></tr> <tr> <td colspan="2">IF YES, CLINIC NAME:</td></tr> <tr> <td colspan="2"> </td></tr> <tr> <td colspan="2">GEOGRAPHIC CODE OF CLINIC: ____</td></tr> </tbody> </table>	YES	1	NO	2	IF YES, CLINIC NAME:				GEOGRAPHIC CODE OF CLINIC: ____							
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Township 1 Follow-up
CHARACTERISTICS OF COMMUNITY INFORMANTS

No.	Questions	Coding categories																												
C1	Study area	Township 1 1																												
C2	Interviewer Number	__ __																												
C3	Community Informant number	__ __ __																												
C4	Date (Day, Month)	__ __ / __ __ / 03																												
C5	Gender of Key Informant	MALE 1 FEMALE 2																												
C6	Type of Community Informant: CIRCLE AND CODE. CODE: __ __ <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">TAXI DRIVER 01</td> <td style="width: 50%;">YOUTH IN SCHOOL 15</td> </tr> <tr> <td>NATIONAL TRUCK DRIVER 02</td> <td>YOUTH OUT OF SCHOOL 16</td> </tr> <tr> <td>INTERNATIONAL TRUCK DRIVER 03</td> <td>TEACHER 17</td> </tr> <tr> <td>SHEBEEN OWNER 04</td> <td>SAPS (POLICE) 18</td> </tr> <tr> <td>BAR OR TAVERN OWNER 05</td> <td>SECURITY GUARD 19</td> </tr> <tr> <td>BARMAID, WAIT STAFF, BAR WORKER 06</td> <td>TRADER/BUSINESS 20</td> </tr> <tr> <td>INDIVIDUAL SOCIALISING AT SITE 07</td> <td>HAWKER/ STREET VENDOR 21</td> </tr> <tr> <td>BOTTLE STORE/BREWERY DROP OFF 08</td> <td>UNEMPLOYED 22</td> </tr> <tr> <td>SEX WORKER 09</td> <td>MECHANICS, PETROL ATTENDANT 23</td> </tr> <tr> <td>CBO/NGO STAFF 10</td> <td>HAIRDRESSER 24</td> </tr> <tr> <td>SANDF 11</td> <td>COMMUNITY LEADER 25</td> </tr> <tr> <td>NURSE 12</td> <td>STD PATIENT 26</td> </tr> <tr> <td>PEER HEALTH EDUCATOR 13</td> <td>OTHER _____ 27</td> </tr> <tr> <td>COMMUNITY HEALTH WORKER 14</td> <td></td> </tr> </table>		TAXI DRIVER 01	YOUTH IN SCHOOL 15	NATIONAL TRUCK DRIVER 02	YOUTH OUT OF SCHOOL 16	INTERNATIONAL TRUCK DRIVER 03	TEACHER 17	SHEBEEN OWNER 04	SAPS (POLICE) 18	BAR OR TAVERN OWNER 05	SECURITY GUARD 19	BARMAID, WAIT STAFF, BAR WORKER 06	TRADER/BUSINESS 20	INDIVIDUAL SOCIALISING AT SITE 07	HAWKER/ STREET VENDOR 21	BOTTLE STORE/BREWERY DROP OFF 08	UNEMPLOYED 22	SEX WORKER 09	MECHANICS, PETROL ATTENDANT 23	CBO/NGO STAFF 10	HAIRDRESSER 24	SANDF 11	COMMUNITY LEADER 25	NURSE 12	STD PATIENT 26	PEER HEALTH EDUCATOR 13	OTHER _____ 27	COMMUNITY HEALTH WORKER 14	
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SANDF 11	COMMUNITY LEADER 25																													
NURSE 12	STD PATIENT 26																													
PEER HEALTH EDUCATOR 13	OTHER _____ 27																													
COMMUNITY HEALTH WORKER 14																														
READ: Hello. I am working on a study to identify where better health programs are needed in Township 1. We want to talk to people like you in the community and ask you a few questions. We want you to tell us the names and locations of places where you think people meet new sexual partners. We don't want to know the names of any private residences. We are just interested in public places. If you tell us where these places are then we will visit those places to see if they want to have a health program there. Telling us the names and locations of sites should take between 5 and 15 minutes. We won't ask your name or ask you to provide any identifying information. You will not be contacted in the future. Your answers cannot be linked back to you. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. You may be embarrassed by the questions. You may not personally benefit directly from this study, but in a few months a new health program will be carried out in this area. If you have any questions you can ask our Field Coordinator. He can be reached at: _____																														

No.	Questions	Coding categories
C7	Are you willing to answer a few questions? *IF NO, STOP INTERVIEW.	YES 1 IF NO, STOP INTERVIEW. NO 2
C8	How old are you? *CONCLUDE INTERVIEW IF RESPONDENT IS YOUNGER THAN 15	____
C9	We want to know places and events where people go to meet new sexual partners. This will help us plan health education programs there. We especially want to know: • Where do people from Township 1 socialize and meet new sexual partners in Township 1? • Where do people from Township 1 meet new sexual partners outside Township 1? • Where do youth or students socialize and meet new sexual partners? • Where do other people-- such as single men and women, gay men, temporary residents, migrant workers-- go to find new sexual partners? • Where can men buy sex? • Where do people who live outside Township 1 come in Township 1 to meet new sexual partners? • Where do people go on Friday or Saturday night to relax? • At what type of events do people meet new sexual partners? WRITE EACH PLACE NAMED ON THE LIST BELOW. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
C10	Number of places or events named that are inside Township 1 and number of places or events that are outside Township 1.	INSIDE: ____ OUTSIDE: ____ TOTAL: ____

LIST PLACES AND EVENETS NAMED ON LINES BELOW (UP TO 5 PER COMMUNITY INFORMANT) FILL OUT A SITE REPORT FORM FOR EACH SITE OR EVENT NAMED.

1. _____
2. _____
3. _____
4. _____
5. _____

SITE EVENT AND REPORT FORM

Township 1 Follow-up

UNIQUE SITE NUMBER: _____

S1	Interviewer Number	_____
S2	Community Informant Number/ Site Report Number	_____ / _____
S3	What is the name of this site? Is it known by any other names?	_____ Other names: _____
S4	Type of Site 01 Bar/Tavern 02 Shebeen/Home Brew 03 Nightclub 04 Gay bar 05 Brothel 06 Bottle Store 07 Private Dwelling 08 Taxi Stand 09 Truck Stop 10 Market Place 11 Church 12 Primary School Yard 13 Secondary School Yard 14 Street 15 Empty Plot 16 Unused House 17 Public Toilet 18 Spaza 19 Bus Station 20 Railway 21 Hotel 22 Braai Vleis place 23 Other (specify): _____ Events: 30 Wedding, Funeral 31 Concert 32 Sports Event * ENTER CODE: _____	
S5	Address of Site and how to find it	
S6	Geographic zone where reported site is located <u>Inside Township 1</u> Zone A 10 Zone B 11 Zone C 12 Zone C 13 Zone E 14 Zone F 15 Zone G 16 Zone H 17 Zone I 18 Zone J 19 Zone K 20 ENTER GEOGRAPHIC CODE _____ <u>Outside Township 1</u> Township 2 22 Zone L 23 Zone M 24 Zone N 25 Zone O 26 Zone P 27 Zone Q 28 Zone R 29 Zone S 30 Zone T 31 Zone U 32 Other Township in East London _____ 33 Elsewhere in East London _____ 34 Elsewhere in EasternCape _____ 35 Other _____ 36	

SITE VERIFICATION FORM

Township 1 Follow-up

UNIQUE SITE NUMBER: _____

No.	Questions	Coding Categories
V1 THROUGH V5 ARE TO BE COMPLETED BY FIELD COORDINATOR BEFORE THIS FORM IS GIVEN TO The INTERVIEWER.		
V1	Name of HTA	Township 1 1
V2	Geographic Code of Site <u>Inside Township 1</u> Zone A 10 Zone B 11 Zone C 12 Zone D 13 Zone E 14 Zone F 15 Zone G 16 Zone H 17 Zone I 18 Zone J 19 Zone K 20 <u>Outside Township 1</u> Township 2 22 Zone L 23 Zone M 24 <u>Outside Township 1 (cont.)</u> Zone N 25 Zone O 26 Zone P 27 Zone Q 28 Zone R 29 Zone S 30 Zone T 31 Zone U 32 Other Township in East London _____ 33 Elsewhere in East London _____ 34 Elsewhere in EasternCape _____ 35 Other _____ 36 ENTER CODE: ____	
V3	How many Key Informants Reported This Site	____
V4	Name of Site Per Key Informant	_____
V5	Address of Site Given by Key Informant	_____
V6 – V13 SHOULD BE COMPLETED BY THE INTERVIEWER BEFORE THE INTERVIEW		
V6	GPS Coordinates	Latitude: _____ Longitude: _____
V7	What is the current proper name and correct site address? NAME: _____ CORRECT ADDRESS: _____ _____	

No.	Questions	Coding Categories
V8	Type of Site or Event 01 Bar/Tavern 02 Shebeen/Home Brew 03 Nightclub 04 Gay bar 05 Brothel 06 Bottle Store 07 Private Dwelling 08 Taxi Stand 09 Truck Stop 10 Market Place 12 Primary School Yard 13 Secondary School Yard 14 Street	*ENTER CODE: ____ ____ 15 Empty Plot 16 Unused House 17 Public Toilet 18 Spaza 19 Bus Station 20 Railway 21 Hotel 22 Braai vleis place 23 Other (specify _____) EVENTS: 30 Wedding, Funeral 31 Concert 32 Sports Event
V9	Is this site within two blocks of a ... READ LIST	YES NO A BUSY ROAD? 1 2 A TAXI RANK? 1 2 A BUS STOP? 1 2 A METRO OR TRAIN STOP? 1 2 A TRUCKING ROUTE? 1 2
V10	Interviewer Gender and Number	MALE 1 FEMALE 2 Number: ____ ____
V11	Date (DD/MM/YY)	____ ____ / ____ ____ / 03
V12	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
THE INTERVIEWER SHOULD IDENTIFY SOMEONE KNOWLEDGEABLE ABOUT THIS SITE AND THEN COMPLETE THE REST OF THIS QUESTIONNAIRE		
V13	Gender of respondent	MALE 1 FEMALE 2

No.	Questions	Coding Categories
	Hello. I am working on a study approved by the Department of Health in the Eastern Cape and the local AIDS Training and Information Center (ATICC). We want to talk to people like you who know about this community and ask you a few questions. The purpose of the study is to identify where better health programs are needed in this area in order to prevent the further spread of diseases that are transmitted by sex. I would like to ask you some questions about activities that occur at this place, the people who come here, and programs that may take place here. The interview should take between 20 and 30 minutes of your time. I won't ask your name or any other identifying information. Some people feel anxious or embarrassed when asked these questions. Your participation is completely voluntary and you may decline to answer any specific question or completely refuse to participate. We would greatly appreciate your help in responding to these questions, even though we are not able to financially compensate you for your time. You may not personally benefit directly from this study, but the results may be used to plan a new health program for this area. This is what we will do with the information you give us. Your answers will be recorded on a paper that only identifies this place with a number. Your name will not be recorded anywhere and we won't ask any personal information about you except to make sure you are age 18 or older. We are asking people these questions at hundreds of places in this area. The questionnaires will be kept at ATICC in a locked cabinet. The only people who will see the questionnaires are people working on this study. An ethical review board has reviewed this study. If you have any questions you can ask the Field Coordinator. He can be reached at _____.	
V14	Are you willing to answer these questions?	YES 1 NO 2
V15	How old are you? STOP IF RESPONDENT IS YOUNGER THAN 18.	____
V15 INDICATES WHETHER AN INTERVIEW IS COMPLETED OR NOT. DO NOT ASK THIS QUESTION TO THE RESPONDENT.		
V16	Was an interview completed? IF NO: WHY NOT? NOTES:	YES 1 NO BECAUSE: NO WILLING RESPONDENT 2 ALL POTENTIAL RESPONDENTS TOO YOUNG 3 SITE CLOSED TEMPORARILY 4 SITE CLOSED PERMANENTLY/ NO LONGER SITE 5 ADDRESS INSUFFICIENT / SITE NOT FOUND 6 DUPLICATE SITE/ SITE ALREADY VISITED 7
IF RESPONDENT IS 18 OR OLDER AND WILLING TO PARTICIPATE, BEGIN INTERVIEW HERE.		
V17	How many years has this site been in operation?	< 1 YEAR 1 1-2 YEARS 2 MORE THAN 2 YEARS 3 NOT APPLICABLE 9
V18	How many men and women work here during a busy day from morning until closing, including yourself if you are one of the staff?	MEN: ____ WOMEN: ____

No.	Questions	Coding Categories
V19	Which types of activities take place here? READ LIST CIRCLE ONE CODE FOR EACH ACTIVITY	YES NO DK BEER CONSUMED 1 2 8 HARD ALCOHOL CONSUMED 1 2 8 TV OR VIDEO VIEWING 1 2 8 DANCING 1 2 8 MUSIC 1 2 8
V20	Where do people come from who come here? PROBE: What branches of Township 1? What sections of the East London? Where outside East London? *CIRCLE UP TO 4 GEOGRAPHIC CODES <u>Inside Township 1:</u> Zone A 10 Zone B 11 Zone C 12 Zone D 13 Zone E 14 Zone F 15 Zone G 16 Zone H 17 Zone I 18 Zone J 19 Zone K 20 From all over Township 1 21	<u>Outside Township 1</u> Township 2 22 Zone L 23 Zone M 24 Zone N 25 Zone O 26 Zone P 27 Zone Q 28 Zone R 29 Zone S 30 Zone T 31 Zone U 32 Other Township in East London _____ 33 Elsewhere in East London _____ 34 Elsewhere in EasternCape _____ 35 Other _____ 36
V21	I have been told that people meet sexual partners at places like this. READ LIST	YES NO DK Do men meet new female sexual partners here? 1 2 8 Do women meet new sexual partners here? 1 2 8 Do men meet male (gay) sexual partners? 1 2 8 Does someone onsite facilitate partnerships? 1 2 8 Do female sex workers solicit customers? 1 2 8 Do partners who meet here have sex onsite? 1 2 8 Do female staff meet new sexual partners here? 1 2 8
V22	What other places do people who come here go to meet new sexual partners?	SITE NAME SITE ID GEO. CODE 1. _____ 2. _____ 3. _____
READ: We would like some information on the characteristics of the men and women who come here during your busiest times. For each characteristic, tell me if most of the men or women have the characteristic, some of them or none of them.		

No.	Questions	Coding Categories				
V23	How many women who come here during the busiest times:	None Some Most				
	(k) Are unemployed	0	1	2		
	(l) Are students	0	1	2		
	(m) Are less than age 18	0	1	2		
	(n) Live in this branch	0	1	2		
	(o) Live in Township 1	0	1	2		
	(p) Live outside Township 1	0	1	2		
	(q) Come here at least once a week	0	1	2		
	(r) Drink alcohol here	0	1	2		
	(s) Find a new sexual partner here	0	1	2		
	(t) Come by car or taxi	0	1	2		
V24	How many men who come here during the busiest times:	None Some Most				
	(a) Are unemployed	0	1	2		
	(b) Are students	0	1	2		
	(c) Are less than age 18	0	1	2		
	(d) Live in this branch	0	1	2		
	(e) Live in Township 1	0	1	2		
	(f) Live outside Township 1	0	1	2		
	(g) Come here at least once a week	0	1	2		
	(h) Drink alcohol here	0	1	2		
	(i) Find a new sexual partner here	0	1	2		
	(j) Come by car or taxi	0	1	2		
	(k) Find male sexual (gay) partners here?	0	1	2		
V25	What are the busiest time(s) here?	Morning 6am-12	Afternoon 12-6pm	Evening 6-10pm	Late night 10pm-6 am	
	PROBE FOR DAYS AND TIMES OF DAY AND CHECK OFF BOXES	MON				
		TUES				
		WED				
		THUR				
		FRI				
		SAT				
		SUN				
V26	Approximately how many people are socializing here during one of the busy times?	1-10 1 11-25 2 26-50 3 51-75 4 76-100 5 101-300 6 301-500 7 501-1000 8 >1000 9				
	READ OPTIONS					

No.	Questions	Coding Categories
V27	During the most recent busy time, about how many men and women were socializing here?	MEN: ____ WOMEN: ____
V28	What are the busiest times of the year? READ OPTIONS	YES NO SUMMER 1 2 WINTER 1 2 SCHOOL HOLIDAYS 1 2 PUBLIC HOLIDAYS 1 2 FESTIVE SEASON 1 2 MONTH END 1 2 OTHER (Specify) _____
V29	Have there ever been any AIDS prevention activities at this site? Has there been any: Educational talks on AIDS? Peer health education program? Condom promotion? AIDS video shown onsite? AIDS Radio program broadcast? AIDS Posters? AIDS Leaflets?	YES NO Any AIDS prevention? 1 2 Educational talks on AIDS 1 2 Peer health education program 1 2 Condom promotion 1 2 AIDS video shown onsite 1 2 AIDS Radio program broadcast 1 2 AIDS Posters 1 2 AIDS Leaflets 1 2
V30	In the past year, how often have condoms been available here?	ALWAYS 1 MORE THAN HALF OF THE TIME 2 ABOUT HALF THE TIME 3 LESS THAN HALF THE TIME 4 NEVER 5
V31	Where have you obtained condoms in the past 12 months? Have you ever received condoms from someone wearing a maroon Peer Health Educator T-shirt? From any other source?	Condoms Obtained At: _____ YES NO Peer health educators 1 2 Source besides peer health educators 1 2 Other Specify: _____ NEVER OBTAINED CONDOMS 9
V32	When did you last receive condoms from someone wearing a maroon Peer Health Educator T-shirt?	WITHIN PAST 4 WEEKS 1 WITHIN PAST 2-6 MONTHS 2 WITHIN PAST 6 MONTHS TO 1 YEAR 3 OVER A YEAR AGO 4 NEVER RECEIVED CONDOMS FROM PEER EDUCATOR 5

No.	Questions	Coding Categories
	How many boxes did you receive? Are there any condoms left?	Number of boxes received: ____ ____ Any left? YES 1 NO 2
V33	In the past four weeks, how many condoms were sold or taken freely?	SOLD: ____ ____ ____ TAKEN FREELY: ____ ____ ____
V34	Are there any condoms here today? If YES, can I see one?	YES, BUT YOU CANT SEE ONE 1 YES, AND A CONDOM WAS SEEN 2 NO 3
V35	Is it possible for someone to find a condom at night either here or within 10 minutes of this place?	YES, HERE OR WITHIN 10 MINUTES OF HERE 1 NO, NOT HERE NOR WITHIN 10 MINUTES OF HERE 2
V36	Observation: Evidence of AIDS prevention activities noted by interviewer at the site	NUMBER OF AIDS POSTERS DISPLAYED: ____ ____ NUMBER OF AIDS BROCHURES AT SITE: ____ ____ NUMBER OF CONDOMS VISIBLE: ____ ____

QUESTIONNAIRE FOR INDIVIDUALS SOCIALISING AT SITES OR EVENTS
Township 1 Follow-up

No.	Questions	Coding categories
Q1	Study Area (HTA)	Township 1 1
Q2	Interviewer Gender and Number	MALE 1 FEMALE 2 INTERVIEWER NUMBER: ____
Q3	Individual Interview number	____
Q4	Name of site, type of site, and Unique Site Number	NAME: _____ TYPE OF SITE: ____ UNIQUE SITE NUMBER: ____
Q5	Geographic Code for Site	____
Q6	Date (DD/MM/YY)	____/____/03
Q7	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
Q8	Time of day (24 hour clock)	____:____
Q9	Number socializing upon interviewer arrival at site	MEN: WOMEN: Inside Site ____ ____ Outside Site ____ ____
Q10	Gender of respondent	MALE 1 FEMALE 2

No.	Questions	Coding categories
	Hello. I am working on a study approved by the Department of Health in the Eastern Cape and the local AIDS Training and Information Center (ATICC). We want to talk to people like you who know about this community and ask you a few questions. The purpose of the study is to identify where better health programs are needed in this area in order to prevent the further spread of diseases that are transmitted by sex. We would like to ask you a few questions to get some information necessary to develop and monitor the programs. I would like to ask you some questions about your behavior, including your sexual behavior. The interview should take between 20 and 30 minutes of your time and you will not be contacted in the future. We will not ask you for your name. Your answers are confidential and cannot be linked back to you. The questionnaires will be kept at ATIC in a locked cabinet. The only people who will see the questionnaires are people working on this study. Some people feel anxious or embarrassed when asked questions about their behavior. Your participation is completely voluntary and you may decline to answer any specific question or completely refuse to participate. We would greatly appreciate your help in responding to these questions, even though we are not able to financially compensate you. You may not personally benefit directly from this study, but the results may be used to plan a new health program for this area. Some of the questions are about symptoms that might indicate you have an infection. If you have symptoms that may indicate an infection, we will refer you to a clinic. An ethical review board has reviewed this study. If you have any questions you can ask the Field Coordinator. He can be reached at _____.	
Q11	Are you willing to answer these questions? *IF NO, STOP INTERVIEW *STOP INTERVIEW IF RESPONDENT ALREADY INTERVIEWED	YES 1 NO 2 NOT APPLICABLE, RESPONDENT INTERVIEWED ALREADY DURING STUDY PERIOD 9
Q12	How old are you? *STOP INTERVIEW IF RESPONDENT IS YOUNGER THAN 15	____ ____
Q13	Do you live in Township 1? *IF YES: What part of Township 1 do you live in? *IF NO; Where in the city or district do you live?	RESIDES IN TOWNSHIP 1 1 DOES NOT RESIDE IN TOWNSHIP 1 2 GEOGRAPHIC CODE OF RESIDENCE USE LIST BELOW: ____ ____
	GEOGRAPHIC CODES <u>Inside Township 1</u> Zone A 10 Zone B 11 Zone C 12 Zone D 13 Zone E 14 Zone F 15 Zone G 16 Zone H 17 Zone I 18 Zone J 19 Zone K 20	<u>Outside Township 1</u> Township 2 22 Zone L 23 Zone M 24 Zone N 25 Zone O 26 Zone P 27 Zone Q 28 Zone R 29 Zone S 30 Zone T 31 Zone U 32 Other Township in East London 33 Elsewhere in East London 34 Elsewhere in EasternCape 35 Other 36

No.	Questions	Coding categories															
Q14	How long have you lived there?	LESS THAN ONE YEAR 0 NUMBER OF YEARS ____ ALL MY LIFE 97															
Q15	How often do you come here? *CIRCLE ONLY 1 RESPONSE.	EVERYDAY 1 4-6 TIMES PER WEEK 2 2-3 TIMES PER WEEK 3 ONE TIME PER WEEK 4 2-3 TIMES PER MONTH 5 ONE TIME PER MONTH 6 LESS THAN ONCE A MONTH 7 THIS IS MY FIRST VISIT 8															
Q16	In the past seven days, including today, how many days (or nights) did you come here?	ENTER NUMBER FROM 1-7: ____															
Q17	When did you come here for the first time? READ OPTIONS	THIS IS MY FIRST VISIT 1 WITHIN PAST 4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5 OVER 5 YEARS AGO 6															
Q18	How many shebeens or taverns have you been to today (including this one)? How many others will you go to today or tonight?	ALREADY BEEN TO ____ WILL GO TO ____															
Q19	Some people come to places like this to meet new sexual partners or to meet up with people they had sex with previously. Do you believe that people meet sexual partners here? Do people meet <u>new</u> sexual partners here? Do people meet <u>previous</u> sexual partners?	<table border="0"> <thead> <tr> <th></th><th>YES</th><th>NO</th></tr> </thead> <tbody> <tr> <td>MEET SEXUAL PARTNERS?</td><td>1</td><td>2</td></tr> <tr> <td>MEET NEW SEXUAL PARTNERS?</td><td>1</td><td>2</td></tr> <tr> <td>MEET PREVIOUS SEXUAL PARTNERS?</td><td>1</td><td>2</td></tr> </tbody> </table>		YES	NO	MEET SEXUAL PARTNERS?	1	2	MEET NEW SEXUAL PARTNERS?	1	2	MEET PREVIOUS SEXUAL PARTNERS?	1	2			
	YES	NO															
MEET SEXUAL PARTNERS?	1	2															
MEET NEW SEXUAL PARTNERS?	1	2															
MEET PREVIOUS SEXUAL PARTNERS?	1	2															
Q20	In order to develop health education programs for people, we want to know whether people come here to meet sexual partners, to drink alcohol, socialize with friends, or for some other reason. Why did you come here? ASK EACH ACTIVITY.	<table border="0"> <thead> <tr> <th></th><th>YES</th><th>NO</th></tr> </thead> <tbody> <tr> <td>TO DRINK ALCOHOL?</td><td>1</td><td>2</td></tr> <tr> <td>TO MEET A SEXUAL PARTNER?</td><td>1</td><td>2</td></tr> <tr> <td>TO SOCIALIZE WITH FRIENDS?</td><td>1</td><td>2</td></tr> <tr> <td>OTHER?</td><td>1</td><td>2</td></tr> </tbody> </table> SPECIFY: _____ CODE FOR OTHER: _____		YES	NO	TO DRINK ALCOHOL?	1	2	TO MEET A SEXUAL PARTNER?	1	2	TO SOCIALIZE WITH FRIENDS?	1	2	OTHER?	1	2
	YES	NO															
TO DRINK ALCOHOL?	1	2															
TO MEET A SEXUAL PARTNER?	1	2															
TO SOCIALIZE WITH FRIENDS?	1	2															
OTHER?	1	2															

No.	Questions	Coding categories
Q21	Have you ever met a new or previous sexual partner here? *PROBE FOR NEW AND PREVIOUS	YES NO NEW PARTNERS 1 2 PREVIOUS PARTNERS 1 2
Q22	*CHECK IF MET A <u>NEW</u> PARTNER HERE: When did you most recently attract a new sexual partner at this site?	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2 WITHIN PAST 2-3 MONTHS 3 WITHIN PAST 4-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5 OVER A YEAR AGO 6 NEVER MET A NEW PARTNER HERE 9
Q23	Where (else) have you met new sexual partners in the past 12 months? At a public place such as a shebeen, bar, hotel, market, park, or school? At a private residence or house? At a workplace? *IF THEY MET SOMEONE AT A PUBLIC PLACE, ASK THEM WHERE. NAME UP TO TWO DIFFERENT SITES OR EVENTS.	YES NO PUBLIC PLACE 1 2 PRIVATE HOUSE OR RESIDENCE? 1 2 WORKPLACE? 1 2 NO NEW PARTNERS IN PAST 12 MONTHS: 9 NAME OF PUBLIC SITE1: _____ _____ TYPE OF SITE: ____ GEOGRAPHIC CODE: ____ UNIQUE SITE ID: ____ NAME OF PUBLIC SITE2: _____ _____ TYPE OF SITE: ____ GEOGRAPHIC CODE: ____ UNIQUE SITE ID: ____
READ: Now I need to know the number of different sexual partners you have had in the past 4 weeks. This includes people you met here, your regular partners, and anyone else you had sex with in the past four weeks. Your responses are completely confidential.		
Q24	How many different people have you had sex with in the past 4 weeks?	4 WEEK TOTAL ____
Q25	How many of these people were new sexual partners in the past four weeks? In other words, they were new lovers.	4 WEEK NEW ____
Q26	About how many new sexual partners have you had in the past <u>12 months</u> ?	12 MONTH NEW: ____

No.	Questions	Coding categories
Q27	The last time you had sex with your most recent new partner, did you use a condom?	YES 1 NO 2
Q28	Of all the people that you had sex with in the past 12 months, how many did you have sex with regularly, that is at least once each month in the past year? This could be a spouse, a live-in boyfriend or girlfriend or someone else you see regularly. IF ANY REGULAR PARTNERS IN THE PAST 12 MONTHS: The last time you had sex with a regular partner, did you use a condom?	12 MONTH REGULAR: ____ ____ IF HAS REGULAR PARTNER: USED A CONDOM LAST TIME 1 DID NOT USE A CONDOM LAST TIME 2 NO REGULAR PARTNERS 9
Q29	Including your new partners, your regular partners, and any other partners, how many different people have you had sex with in the past 12 months?	12 MONTH TOTAL: ____ ____
Q30	We've talked about condom use, but I need to confirm now if you have ever used a condom and if so, how recently. Did you use a condom...READ OPTIONS	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2 WITHIN PAST 2-3 MONTHS 3 WITHIN PAST 4-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5 OVER A YEAR AGO 6 NEVER USED A CONDOM 9
Q31	Do you have a condom with you? *IF YES, May I see it?	CONDOM WITH ME BUT YOU CANT SEE 1 YES AND CONDOM SEEN 2 NO CONDOM WITH ME 3
Q32	In the past three months, how many group AIDS educational sessions have you attended in Township 1? How many have you attended at this site?	NUMBER OF SESSIONS IN TOWNSHIP 1: ____ ____ NUMBER OF SESSIONS AT SITE: ____ ____
Q33	Have you ever heard a group of peer health educators wearing maroon shirts singing songs in this community? What were the songs about?	YES 1 NO 2 SONGS ABOUT: _____ _____ Respondent mentioned: YES NO HIV/AIDS 1 2 CONDOMS 1 2 STI's 1 2

No.	Questions	Coding categories																																																															
Q34	How many times have you talked individually with a peer health educator in Township 1? How many times have you talked to one at this site? When was the last time you had one of these contacts with a peer educator?	NUMBER OF TIMES IN TOWNSHIP 1: ____ NUMBER OF TIMES AT SITE: ____ MONTH/YEAR: ____/____																																																															
Q35	-MEN ONLY: Some men experience pain during urination, have an unusual discharge from the penis, or have sores in the genital area. During the past 4 weeks, have you had ... *READ LIST	<table border="0"> <thead> <tr> <th><u>SYMPTOMS</u></th><th>YES</th><th>NO</th><th>FEMALE</th></tr> </thead> <tbody> <tr> <td>PAIN ON URINATION?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>UNUSUAL DISCHARGE?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>SORES?</td><td>1</td><td>2</td><td>9</td></tr> </tbody> </table>	<u>SYMPTOMS</u>	YES	NO	FEMALE	PAIN ON URINATION?	1	2	9	UNUSUAL DISCHARGE?	1	2	9	SORES?	1	2	9																																															
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Q36	WOMEN ONLY: Some women have lower abdominal pain, an unusual discharge from the vagina, or sores in the genital area. During the past 4 weeks, have you had ... *READ LIST	<table border="0"> <thead> <tr> <th><u>SYMPTOMS</u></th><th>YES</th><th>NO</th><th>MALE</th></tr> </thead> <tbody> <tr> <td>LOWER ABDOMINAL PAIN?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>UNUSUAL DISCHARGE?</td><td>1</td><td>2</td><td>9</td></tr> <tr> <td>SORES?</td><td>1</td><td>2</td><td>9</td></tr> </tbody> </table>	<u>SYMPTOMS</u>	YES	NO	MALE	LOWER ABDOMINAL PAIN?	1	2	9	UNUSUAL DISCHARGE?	1	2	9	SORES?	1	2	9																																															
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Q37	*IF MEN OR WOMEN HAVE ANY SYMPTOMS (Q35 or Q36): Did you get treated? *IF YES: Where did you get treated? *IF TREATED AT CLINIC: Which clinic?	<table border="0"> <tbody> <tr> <td>Treated?</td><td>YES</td><td>1</td></tr> <tr> <td></td><td>NO</td><td>2</td></tr> <tr> <td>Where treated?</td><td></td><td></td></tr> <tr> <td></td><td>CLINIC</td><td>1</td></tr> <tr> <td></td><td>PHARMACY</td><td>2</td></tr> <tr> <td></td><td>SELF TREATED</td><td>3</td></tr> <tr> <td></td><td>PRIVATE DOCTOR</td><td>4</td></tr> <tr> <td></td><td>TRADITIONAL HEALER</td><td>5</td></tr> <tr> <td>Which Clinic?</td><td></td><td></td></tr> <tr> <td></td><td>CLINIC A</td><td>1</td></tr> <tr> <td></td><td>CLINIC B</td><td>2</td></tr> <tr> <td></td><td>CLINIC C</td><td>3</td></tr> <tr> <td></td><td>CLINIC D</td><td>4</td></tr> <tr> <td></td><td>CLINIC E</td><td>5</td></tr> <tr> <td></td><td>CLINIC F</td><td>6</td></tr> <tr> <td></td><td>CLINIC G</td><td>7</td></tr> <tr> <td></td><td>CLINIC H</td><td>8</td></tr> <tr> <td></td><td>TOWNSHIP 1 HOSPITAL</td><td>9</td></tr> <tr> <td></td><td>CLINIC I</td><td>10</td></tr> <tr> <td></td><td>CLINIC J</td><td>11</td></tr> <tr> <td>OTHER (SPECIFY) _____</td><td></td><td>12</td></tr> </tbody> </table>	Treated?	YES	1		NO	2	Where treated?				CLINIC	1		PHARMACY	2		SELF TREATED	3		PRIVATE DOCTOR	4		TRADITIONAL HEALER	5	Which Clinic?				CLINIC A	1		CLINIC B	2		CLINIC C	3		CLINIC D	4		CLINIC E	5		CLINIC F	6		CLINIC G	7		CLINIC H	8		TOWNSHIP 1 HOSPITAL	9		CLINIC I	10		CLINIC J	11	OTHER (SPECIFY) _____		12
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Q38	*IF CLINIC VISITED: During your visit to the clinic, did you receive counseling about behavior changes you could make to reduce your risk of infection? Were you offered condoms? Were you offered an HIV test?	<table border="0"> <thead> <tr> <th></th><th>YES</th><th>NO</th></tr> </thead> <tbody> <tr> <td>COUNSELLED ABOUT BEHAVIOR CHANGES?</td><td>1</td><td>2</td></tr> <tr> <td>CONDOMS OFFERED?</td><td>1</td><td>2</td></tr> <tr> <td>OFFERED HIV TEST?</td><td>1</td><td>2</td></tr> </tbody> </table>		YES	NO	COUNSELLED ABOUT BEHAVIOR CHANGES?	1	2	CONDOMS OFFERED?	1	2	OFFERED HIV TEST?	1	2																																																			
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OFFERED HIV TEST?	1	2																																																															

No.	Questions	Coding categories
Q39	Within the past three months, have you given or received money, alcohol, or both in exchange for sex?	YES NO GIVEN OR RECEIVED MONEY? 1 2 GIVEN OR RECEIVED ALCOHOL? 1 2 GIVEN OR RECEIVED BOTH? 1 2
Q40	Are you currently employed?	NO, LOOKING FOR WORK 0 NO, NOT LOOKING FOR WORK 1 YES, OCCASIONAL / PART-TIME WORK 2 YES, FULL-TIME 3
Q41	Are you currently a student?	YES 1 NO 2
Q42	What is the highest level of education you have completed?	NONE 1 ≤ STANDARD 5 2 STANDARD 6-8 3 STANDARD 9-10 4 TERTIARY 5

Township 2 Baseline
CHARACTERISTICS OF KEY INFORMANTS

No.	Questions	Coding categories																								
K1	Study area	Township 2 1																								
K2	Interviewer Number	___																								
K3	Key Informant Number	___																								
K4	Date	___/___/02																								
K5	Gender of Key Informant	MALE 1 FEMALE 2																								
K6	Type of Key Informant: CIRCLE AND CODE.	CODE: ___ <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">TAXI DRIVER 01</td> <td style="width: 50%;">PEER HEALTH EDUCATOR 13</td> </tr> <tr> <td>NATIONAL TRUCK DRIVER 02</td> <td>COMMUNITY HEALTH WORKER 14</td> </tr> <tr> <td>INTERNATIONAL TRUCK DRIVER 03</td> <td>YOUTH IN SCHOOL 15</td> </tr> <tr> <td>SHEBEEN OWNER 04</td> <td>YOUTH OUT OF SCHOOL 16</td> </tr> <tr> <td>BAR OR TAVERN OWNER 05</td> <td>TEACHER 17</td> </tr> <tr> <td>BARMAID 06</td> <td>SAPS (POLICE) 18</td> </tr> <tr> <td>INDIVIDUAL SOCIALISING AT SITE 07</td> <td>SECURITY GUARD 19</td> </tr> <tr> <td>BOTTLE STORE/BREWERY DROP OFF 08</td> <td>TRADER/BUSINESS 20</td> </tr> <tr> <td>SEX WORKER 09</td> <td>HAWKER/VENDOR 21</td> </tr> <tr> <td>CBO/NGO STAFF 10</td> <td>UNEMPLOYED 22</td> </tr> <tr> <td>SANDF 11</td> <td>OTHER _____ 23</td> </tr> <tr> <td>NURSE 12</td> <td></td> </tr> </table>	TAXI DRIVER 01	PEER HEALTH EDUCATOR 13	NATIONAL TRUCK DRIVER 02	COMMUNITY HEALTH WORKER 14	INTERNATIONAL TRUCK DRIVER 03	YOUTH IN SCHOOL 15	SHEBEEN OWNER 04	YOUTH OUT OF SCHOOL 16	BAR OR TAVERN OWNER 05	TEACHER 17	BARMAID 06	SAPS (POLICE) 18	INDIVIDUAL SOCIALISING AT SITE 07	SECURITY GUARD 19	BOTTLE STORE/BREWERY DROP OFF 08	TRADER/BUSINESS 20	SEX WORKER 09	HAWKER/VENDOR 21	CBO/NGO STAFF 10	UNEMPLOYED 22	SANDF 11	OTHER _____ 23	NURSE 12	
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Hello. I am working to develop better health programs in Township 2. The purpose of this survey is to improve AIDS prevention programs. We are talking with people who are knowledgeable about this community. We want to find the places in this community where people go to meet new sexual partners so that we can bring educational programs to the people who socialize there. Do you know of any places where you think people meet new sexual partners? We are not interested in private places such as someone's house. We are interested in public places where we might be able to bring health education messages and distribute condoms. The places could be bars, clubs, churches, schools, markets, or anywhere people socialize and meet a new girlfriend, boyfriend, or lover. We don't need to know your name. We won't ask you to provide any identifying information about yourself. You will not be contacted in the future. Your answers will be kept confidential and cannot be linked back to you. Your participation is completely voluntary and you may refuse to participate. You may not personally benefit directly from this study, but everyone could benefit if health programs are improved. This should take between five and fifteen minutes.																										
K7	Are you willing to participate? *IF NO, STOP INTERVIEW.	YES 1 IF NO, STOP INTERVIEW. NO 2																								
K8	How old are you? STOP IF RESPONDENT IS < 14.	___																								

SITE EVENT AND REPORT FORM
Township 2 Baseline

S1	Key Informant Number	_____
S2	Name of Site	_____
S3	Type of Site 01 Bar/Tavern 02 Shebeen/Home Brew 03 Nightclub 04 Gay bar 05 Brothel 06 Bottle Store 07 Private Dwelling 08 Taxi Stand 09 Truck Stop 10 Market Place 11 Church 12 School Yard	• ENTER CODE: ____ Street 13 Empty Plot 14 Unused House 15 Public Toilet 16 Spaza 17 Bus Station 18 Railway 19 Hotel 20 Braai vleis place 21 Other (specify) _____ 22
S4	Address of Site and how to find it	
S5	Area where site is located	TOWNSHIP 2 1 TOWNSHIP 1 2 OTHER TOWNSHIP IN EAST LONDON 3 ELSEWHERE IN EAST LONDON 4 OTHER: _____ 8

SITE VERIFICATION FORM **Township 2 Baseline**

No.	Questions	Coding categories
V1	HTA	Township 2 1
V2	Site name and correct address	NAME: _____ ADDRESS: _____ _____
V3	Unique Site Number	_____
V4	Location of site	Township 2 1 Township 1 2 Other Township in East London 3 Elsewhere in East London 4 Other: _____ 8
V5	Interviewer Number	_____
V6	Date (DD/MM/YY)	____/____/____
V7	Was an interview completed?	YES, INTERVIEW COMPELTED 1 NOT COMPELETED BECAUSE: NO WILLING RESPONDENT 2 ALL POTENTIAL RESPONDENTS TOO YOUNG 3 SITE CLOSED TEMPORARILY 4 SITE CLOSED PERMANENTLY/NO LONGER A SITE 5
V8	Type of Site 1. Bar/Tavern 2. Shebeen/Home Brew 3. Nightclub 4. Gay Bar 5. Brothel 6. Bottle Store 7. Private Dwelling 8. Taxi Stand	9. Truck Stop 10. Market Place 11. Church 12. School Yard 13. Street 14. Empty Plot 15. Unused House 16. Public Toilet ENTER CODE: ____ 17. Spaza 18. Bus Station 19. Railway 20. Hotel 21. Braai vleis place 22. Other: _____
V9	Number socializing upon interviewer arrival at site	COUNT CAREFULLY MEN: ____ WOMEN: ____
V10	Gender of respondent	MALE 1 FEMALE 2

No.	Questions	Coding categories																																			
Hello. I am working in Township 2 to help develop better health programmes for this area. We would like to ask you a few questions to get some information necessary to plan and evaluate the programs. We won't ask you for your name. Your answers will be kept confidential. The questions include questions about activities that occur at this place, the people who come here, and programmes that may take place here. We would also like to return during a busier moment to talk with some individuals socialising here. Your participation is completely voluntary.																																					
V11	Are you willing to answer these questions?	YES 1 NO 2																																			
V12	How old are you? STOP IF YOUNGER THAN 14.	___																																			
V13	Has this site been in operation for more than 2 years?	YES 1 NO 2																																			
V14	How many men and women work here?	MEN: _____ WOMEN: _____																																			
V15	Which types of activities take place here? *CIRCLE CODE FOR EACH ACTIVITY	<table border="0"> <thead> <tr> <th></th><th>YES</th><th>NO</th><th>DK</th></tr> </thead> <tbody> <tr> <td>Beer Consumed</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>Hard Alcohol Consumed</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>TV or Video Viewing</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>Dancing</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>Music</td><td>1</td><td>2</td><td>8</td></tr> </tbody> </table>		YES	NO	DK	Beer Consumed	1	2	8	Hard Alcohol Consumed	1	2	8	TV or Video Viewing	1	2	8	Dancing	1	2	8	Music	1	2	8											
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V16	I have been told that people meet sexual partners at places like this. Do..... READ EACH ITEM AND TRY TO AVOID DON'T KNOW (DK) RESPONSE.	<table border="0"> <thead> <tr> <th></th><th>YES</th><th>NO</th><th>DK</th></tr> </thead> <tbody> <tr> <td>Men Meet New Sexual Partners?</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>Women Meet New Sexual Partners?</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>Gay Men Meet Sexual Partners?</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>A Person Onsite Facilitates Meeting Partners?</td><td>1</td><td>2</td><td>8</td></tr> <tr> <td>Female Sex Workers Solicit Customers?</td><td>1</td><td>2</td><td>8</td></tr> </tbody> </table>		YES	NO	DK	Men Meet New Sexual Partners?	1	2	8	Women Meet New Sexual Partners?	1	2	8	Gay Men Meet Sexual Partners?	1	2	8	A Person Onsite Facilitates Meeting Partners?	1	2	8	Female Sex Workers Solicit Customers?	1	2	8											
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Female Sex Workers Solicit Customers?	1	2	8																																		
READ: We would like some information on the characteristics of the men and women who come here during your busiest times. For each characteristic, tell me what proportion of the men or women who come here have the characteristic. First tell me about the men.																																					
V17	How many men who come here during the busiest times:	<table border="0"> <thead> <tr> <th>None/Very Few</th><th>< Half</th><th>Half</th><th>>Half</th><th>Almost All/All</th></tr> </thead> <tbody> <tr> <td>(u) Are Unemployed</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>(v) Are Students</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>(w) Are < Age 18</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>(x) Live in Township 2</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>(y) Find a new sexual partner while at site</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> </tbody> </table>	None/Very Few	< Half	Half	>Half	Almost All/All	(u) Are Unemployed	0	1	2	3	4	(v) Are Students	0	1	2	3	4	(w) Are < Age 18	0	1	2	3	4	(x) Live in Township 2	0	1	2	3	4	(y) Find a new sexual partner while at site	0	1	2	3	4
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No.	Questions	Coding categories																														
V18	How many women who come here during the busiest times: (k) Are Unemployed (l) Are Students (m) Are < Age 18 (n) Live in Township 2 (o) Find a new sexual partner while at site	<table border="1"> <thead> <tr> <th>None/Very Few</th><th>< Half</th><th>Half</th><th>>Half</th><th>Almost All/All</th></tr> </thead> <tbody> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td></tr> </tbody> </table>	None/Very Few	< Half	Half	>Half	Almost All/All	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4
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V19	Approximately how many men come here during the course of a busy day? Try to estimate the total number of men who come at any time between opening and closing. *	<table border="1"> <thead> <tr> <th>READ OPTIONS</th><th></th></tr> </thead> <tbody> <tr> <td>< 10</td><td>1</td></tr> <tr> <td>11-20</td><td>2</td></tr> <tr> <td>21-50</td><td>3</td></tr> <tr> <td>51-100</td><td>4</td></tr> <tr> <td>101-300</td><td>5</td></tr> <tr> <td>301-500</td><td>6</td></tr> <tr> <td>501-1000</td><td>7</td></tr> </tbody> </table>	READ OPTIONS		< 10	1	11-20	2	21-50	3	51-100	4	101-300	5	301-500	6	501-1000	7														
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V20	Approximately how many women come here during the course of a busy day? Try to estimate the total number of women who come at any time between opening and closing.	<table border="1"> <thead> <tr> <th>READ OPTIONS</th><th></th></tr> </thead> <tbody> <tr> <td>< 10</td><td>1</td></tr> <tr> <td>11-20</td><td>2</td></tr> <tr> <td>21-50</td><td>3</td></tr> <tr> <td>51-100</td><td>4</td></tr> <tr> <td>101-300</td><td>5</td></tr> <tr> <td>301-500</td><td>6</td></tr> <tr> <td>501-1000</td><td>7</td></tr> </tbody> </table>	READ OPTIONS		< 10	1	11-20	2	21-50	3	51-100	4	101-300	5	301-500	6	501-1000	7														
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V21	Have there ever been any AIDS prevention activities at this site?	<table border="1"> <thead> <tr> <th>YES</th><th></th></tr> </thead> <tbody> <tr> <td>YES</td><td>1</td></tr> <tr> <td>NO</td><td>2</td></tr> </tbody> </table> DESCRIBE: _____ _____	YES		YES	1	NO	2																								
YES																																
YES	1																															
NO	2																															
V22	In the past year, how often have condoms been available here?	<table border="1"> <thead> <tr> <th>ALWAYS</th><th></th></tr> </thead> <tbody> <tr> <td>ALWAYS</td><td>1</td></tr> <tr> <td>SOMETIMES</td><td>2</td></tr> <tr> <td>NEVER</td><td>3</td></tr> </tbody> </table>	ALWAYS		ALWAYS	1	SOMETIMES	2	NEVER	3																						
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SOMETIMES	2																															
NEVER	3																															
V23	Are there any condoms here today? If YES, can I see one?	<table border="1"> <thead> <tr> <th>YES, BUT YOU CANT SEE ONE</th><th></th></tr> </thead> <tbody> <tr> <td>YES, BUT YOU CANT SEE ONE</td><td>1</td></tr> <tr> <td>YES, AND A CONDOM WAS SEEN</td><td>2</td></tr> <tr> <td>NO</td><td>3</td></tr> </tbody> </table>	YES, BUT YOU CANT SEE ONE		YES, BUT YOU CANT SEE ONE	1	YES, AND A CONDOM WAS SEEN	2	NO	3																						
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V24	In the past four weeks, how many condoms were sold or taken?	<table border="1"> <thead> <tr> <th>SOLD: _____</th><th></th></tr> </thead> <tbody> <tr> <td>SOLD: _____</td><td></td></tr> <tr> <td>TAKEN FREELY: _____</td><td></td></tr> <tr> <td>TAKEN FREELY: _____</td><td></td></tr> </tbody> </table>	SOLD: _____		SOLD: _____		TAKEN FREELY: _____		TAKEN FREELY: _____																							
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V25	Is it possible for someone to find a condom at night either here or within 10 minutes of this place?	<table border="1"> <thead> <tr> <th>YES</th><th></th></tr> </thead> <tbody> <tr> <td>YES</td><td>1</td></tr> <tr> <td>NO</td><td>2</td></tr> </tbody> </table>	YES		YES	1	NO	2																								
YES																																
YES	1																															
NO	2																															

No.	Questions	Coding categories
V26	Would you be willing to: (2) have an AIDS prevention programme for people? (2) sell condoms here?	YES, WILLING TO HAVE PROGRAM 1 NO 2 NOT APPLICABLE 9 YES, WILLING TO SELL CONDOMS 1 NO 2 NOT APPLICABLE 9
V27	Observation: Evidence of AIDS prevention activities noted by interviewer at the site	NUMBER OF AIDS POSTERS DISPLAYED ____ ____ NUMBER OF AIDS BROCHURES AT SITE ____ ____ NUMBER OF CONDOMS VISIBLE: ____ ____ ____

QUESTIONNAIRE FOR INDIVIDUALS SOCIALISING AT SITES OR EVENTS
Township 2 Baseline

No.	Questions	Coding categories
Q1	Study Area (HTA)	Township 2 1
Q2	Interviewer Number	__ __
Q3	Interview number	__ __
Q4	Name of site and unique site number	UNIQUE SITE NUMBER: __ __ __ NAME: _____
Q5	Date (DD/MM/YY)	__ __ / __ __ / __ __
Q6	Time of day (24 hour clock)	__ __ : __ __
Q7	Number socializing upon interviewer arrival at site	INSIDE SITE OUTSIDE SITE MEN: __ __ __ __ __ __ WOMEN: __ __ __ __ __ __
Q8	Gender of respondent	MALE 1 FEMALE 2
Hello. I am working in Township 2 to help develop better health programmes. We would like to ask you few questions to get some information necessary to plan and evaluate the programs. We won't ask you for your name. Your answers will be kept confidential. The questions include questions about your behaviour including your sexual behaviour. Your participation is completely voluntary.		
Q9	Are you willing to answer these questions? IF NO, STOP INTERVIEW	YES 1 NO 2
Q10	How old are you? *STOP IF RESPONDENT IS < 14.	AGE: __ __
Q11	IF YOUNGER THAN 25: Are you currently a student?	YES 1 NO 2 OLDER THAN 25 YEARS 9

No.	Questions	Coding categories
Q12	Where do you live?	Township 2 1 Township 1 2 Zone L 3 Other Township in East London 4 Elsewhere in East London 5 Port Elizabeth 6 Elsewhere in the Eastern Cape 7 Other: _____ 8
Q13	IF PERSON LIVES IN TOWNSHIP 2: How long have you lived in Township 2?	LESS THAN ONE YEAR 0 NUMBER OF YEARS ____ ____ ALL MY LIFE 97 LIVES OUTSIDE TOWNSHIP 2 99
Q14	Are you currently employed?	NO, LOOKING FOR WORK 0 NO, NOT LOOKING FOR WORK 1 YES, OCCASIONAL WORK OR PARTTIME 2 YES, FULLTIME 3
Q15	How many years of school did you complete?	NUMBER OF YEARS ____ ____
Q16	How often do you come here? *CIRCLE ONLY 1 RESPONSE.	EVERYDAY 1 4-6 TIMES PER WEEK 2 2-3 TIMES PER WEEK 3 ONE TIME PER WEEK 4 2-3 TIMES PER MONTH 5 ONE TIME PER MONTH 6 THIS IS MY FIRST VISIT 7
Q17	When did you come here the first time?	THIS IS MY FIRST VISIT 1 WITHIN PAST 4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5 OVER 5 YEARS AGO 6
Q18	How many shebeens or taverns have you been to today (including this one)? How many others will you go to today or tonight?	ALREADY BEEN TO ____ ____ WILL GO TO ____ ____

No.	Questions	Coding categories
Q19	Some people meet new sexual partners at places like this. Do you believe that people attract new sexual partners here?	YES 1 NO 2
Q20	In order to develop health education programs for people here, we want to know whether people come here to meet sexual partners, to drink alcohol, or just to socialize with friends. Why did you come here?	YES NO TO DRINK ALCOHOL 1 2 TO MEET A SEXUAL PARTNER 1 2 TO SOCIALIZE WITH FRIENDS 1 2
Q21	Have you ever met a new sexual partner here?	YES 1 NO 2
Q22	When did you last attract a new sexual partner here?	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5 NEVER MET A NEW PARTNER HERE 9
Q23	The last time you had sex with this partner, did you use a condom?	YES 1 NO 2 NEVER MET A NEW PARTNER HERE 9
READ: Now I need to know the number of different sexual partners you have had in the past 4 weeks. This includes people you met here, your regular partners, and anyone else you had sex with in the past four weeks. Your responses are completely confidential.		
Q24	How many different people have you had sex with in the past 4 weeks?	4 WEEK TOTAL ____
Q25	How many of these people were new sexual partners in the past four weeks? In other words, they were new lovers.	4 WEEK NEW ____
Q26	ASK ANYONE WHO HAS A NEW PARTNER IN THE PAST 4 WEEKS: I want to ask you about your most recent new sexual partner. The last time you had sex with that partner, did you use a condom?	YES 1 NO 2

No.	Questions	Coding categories
Q27	In the past four weeks, have you given or received money or gifts in exchange for sex?	YES 1 NO 2
Q29	About how many new sexual partners have you had in the past <u>12 months</u> ?	12 MONTH NEW: ____
Q29	Of all the people that you had sex with in the past 12 months, how many did you have sex with regularly, that is at least once each month in the past year? IF ANY REGULAR PARTNERS: The last time you had sex with a regular partner, did you use a condom?	12 MONTH REGULAR: ____ IF HAS A REGULAR PARTNER: USED A CONDOM LAST TIME 1 DID NOT USE A CONDOM LAST TIME 2 NO REGULAR PARTNERS 9
Q30	Including your new partners, your regular partners, and any other partners, how many different people have you had sex with in the past 12 months?	12 MONTH TOTAL: ____
Q31	Have you ever used a condom?	YES, ALREADY REPORTED USE 1 YES 1 NO 2
Q32	Do you have a condom with you? *IF YES, May I see it?	CONDOM WITH ME BUT YOU CANT SEE 1 YES AND CONDOM SEEN 2 NO CONDOM WITH ME 3
Q33	In the past year, how many group AIDS educational sessions have you attended in Township 2? Of those, how many were at this site? When was the last one you attended?	NUMBER OF SESSIONS IN TOWNSHIP 2: ____ NUMBER OF SESSIONS AT SITE: ____ MONTH/YEAR: ____/____
Q34	In the past year, how many times have you talked individually with a peer health educator about AIDS in Township 2? Of those, how many times have you talked to one at this site? In someone's home? When was the last time?	NUMBER OF TIMES IN TOWNSHIP 2: ____ NUMBER OF TIMES AT SITE: ____ NUMBER OF TIMES IN A HOME? ____ MONTH/YEAR: ____/____

No.	Questions	Coding categories			
Q35	MEN ONLY: Some men experience pain during urination, have an unusual discharge from the penis, or have sores in the genital area. During the past 4 weeks, have you had ... *READ LIST	<u>SYMPTOMS</u> YES NO N/A PAIN ON URINATION? 1 2 9 UNUSUAL DISCHARGE? 1 2 9 SORES? 1 2 9			
Q36	WOMEN ONLY: Some women have lower abdominal pain, an unusual discharge from the vagina, or sores in the genital area. During the past 4 weeks, have you had ... *READ LIST	<u>SYMPTOMS</u> YES NO N/A LOWER ABDOMINAL PAIN? 1 2 9 UNUSUAL DISCHARGE? 1 2 9 SORES? 1 2 9			
Q37	*IF MEN OR WOMEN HAVE ANY SYMPTOMS (Q53 or Q54): Did you go to a clinic for treatment? *IF YES: Which clinic?	YES 1 NO 2 IF YES, CLINIC NAME:			

Appendix 2 – Community Informant Interview Tables

Table A.1. Summary of community informant field work, East London townships, PLACE assessments 2000, 2003			
	Township 1 Baseline, 2000 N=276	Township 2 Follow-up, 2003 N=256	Township 2 2003 N=226
Days of Community Informant interviewing	5	4	14
Number of interviewers	14	10	14
Number of Community Informant approached	297	400	582
Number of sites reported	--	382	428
Sites inside Township	284	254	304
Sites outside Township	--	128	124
Number of Community Informants who refused	0	2	0
Number of Community Informants Interviewed	297	398	579
Gender of community informants (%)			
Male	52.2	49.5	52.7
Female	47.8	49.8	47.0
Missing	0.0	0.8	0.9
Total	100.0	100.0	100.0

Table A.2. Self-reported characteristics of community informants, East London townships, PLACE assessments 2000, 2003									
	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=155	Twp 1 2003 N=197	Twp 2 2003 N=305	Twp 1 2000 N=142	Twp 1 2003 N=198	Twp 2 2003 N=272	Twp 1 2000 N=297	Twp 1 2003 N=400	Twp 2 2003 N=579
Type of community informant									
Taxi driver	12.9	9.1	7.4	0.0	0.5	0.7	6.7	4.8	3.8
National Truck Driver	1.9	5.1	3.3	0.0	0.0	0.3	1.0	2.5	1.7
International Truck Driver	0.0	2.0	0.0	0.0	0.0	0.0	0.0	1.0	0.0
Shebeen owner	7.1	8.6	6.3	12.0	6.0	6.2	9.4	7.3	6.2
Bar or Tavern owner	0.7	1.0	1.5	2.1	1.5	0.0	1.4	1.3	0.7
Barmaid, wait staff, bar worker	0.7	2.0	0.0	1.4	5.0	1.3	1.0	3.5	0.7
Individual socializing at site	2.6	3.5	2.9	4.2	2.5	0.7	3.4	3.0	1.7
Bottle store/ brewery drop off	0.0	2.0	0.0	0.0	0.0	0.0	0.0	1.0	0.0
Sex worker	0.0	1.0	1.8	0.0	2.5	3.6	0.0	1.8	2.8
CBO/NGO staff	6.5	1.5	0.0	4.2	5.0	0.0	5.4	3.3	0.0
SANDF	1.9	1.0	1.1	0.0	0.5	0.0	1.0	0.8	0.5
Nurse	3.2	1.5	1.1	3.5	4.5	0.7	3.4	3.0	0.9
Peer Health Educator	0.0	2.0	0.4	1.4	1.0	0.3	0.7	1.5	0.4
Community Health Worker	4.5	1.0	1.5	7.8	3.0	1.6	6.1	2.0	1.6
Youth in school	8.4	9.1	9.2	8.5	9.6	14.7	8.4	9.8	12.3
Youth out of school	7.7	9.6	9.2	7.0	10.6	9.8	7.4	10.0	9.5
Teacher	7.7	3.0	1.8	11.3	4.5	1.6	9.4	3.8	1.7
SAPS (Police)	5.8	1.5	1.1	0.0	2.0	0.7	3.0	2.0	0.9
Security guard	5.2	4.0	7.0	3.5	2.0	2.3	4.4	3.0	4.5
Trader/Business	1.3	1.5	2.6	4.9	1.5	2.3	3.0	1.5	2.4
Hawker/ Street Vendor	0.7	3.5	2.6	6.3	9.6	4.6	3.4	6.5	3.6
Unemployed Adult	10.3	11.1	34.2	16.9	14.1	44.4	13.5	12.5	39.6
Mechanics, Petrol Attendant	0.0	4.0	0.0	0.0	0.0	0.0	0.0	2.0	0.0
Hairdresser	0.0	2.0	0.0	0.0	2.5	0.0	0.0	2.3	0.0
Community Leader	0.0	3.0	0.0	0.0	2.0	0.0	0.0	2.5	0.0
STI Patient	0.0	4.6	0.0	0.0	8.5	0.0	0.0	6.5	0.0
Other	11.0	1.5	5.2	4.9	1.0	4.3	8.1	1.3	4.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Age groups									
15-19	7.7	9.1	16.2	7.0	10.1	17.3	7.4	10.0	16.9
20-24	9.7	17.2	11.8	11.3	20.1	20.3	10.4	18.5	16.2
25-29	15.5	16.2	16.5	19.7	17.6	20.6	17.5	16.8	18.7
30-34	21.3	16.2	20.2	22.5	15.1	13.1	21.9	15.8	16.4
35-39	20.7	14.1	12.9	18.3	12.1	12.1	19.5	13.0	12.4
>=40	25.2	27.3	21.7	21.1	23.6	16.0	23.2	25.3	18.7
Missing	0.0	0.0	0.7	0.0	1.5	0.7	0.0	0.0	0.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Appendix 3 – Site Verification Tables

Table B.1. Summary of site verification field work, East London townships, PLACE assessments 2000, 2003			
	Twp 1 Baseline 2000 N=276	Twp 1 Follow-up 2003 N=256	Twp 2 2003 N=226
Days of site verification	10 Days	6 Days	6 Days
Days of week (%)			
Monday	14.9	19.1	--
Tuesday	35.9	0.0	--
Wednesday	11.6	2.7	--
Thursday	2.9	19.1	--
Friday	12.3	18.4	--
Saturday	12.3	19.1	--
Sunday	9.4	19.9	--
Missing	0.7	1.6	--
Total	100.0	100.0	--
Number of interviewers	14	10	15
Number of community informant reported site (%)			
1	--	48.8	--
2	--	12.1	--
3	--	8.6	--
4	--	6.3	--
5-9	--	14.1	--
10-19	--	7.4	--
20+	--	2.7	--
Total	--	100.0	--
Outcome of site verification visits (%)			
Site found and interview completed	85.1	76.2	96.0
Site found but respondent refused interview	4.0	1.6	4.0
Site not found, no longer a site, site closed, duplicate site	10.9	21.5	0.0
Missing	0.0	0.8	0.4
Total	100.0	100.0	100.0

**Table B.2. Characteristics of found sites, East London townships, PLACE assessments
2000, 2003**

	Twp 1 Baseline 2000 N=276	Twp 1 Follow-up 2003 N=256	Twp 2 2003 N=226
Gender of respondents (%)			
Male	57.6	32.0	42.0
Female	27.5	49.6	57.1
Missing	14.9	18.4	0.9
Total	100.0	100.0	100.0
Willingness of respondents (%)			
Yes	85.1	77.3	96.0
No	4.0	2.7	2.7
Missing	10.9	19.9	1.3
Total	100.0	100.0	100.0
Location of sites (%)			
Zone A	18.8	19.1	0.0
Zone B	33.3	21.5	0.0
Zone C	5.8	10.2	0.0
Zone D	6.2	11.3	0.0
Zone E	5.4	6.3	0.0
Zone F	8.7	7.4	0.0
Zone G	1.1	1.6	0.0
Zone H	3.3	0.0	0.0
Zone I	12.0	15.6	0.0
Zone J	2.9	3.5	0.0
Zone K	2.5	3.5	0.0
Zone 1	0.0	0.0	15.5
Zone 2	0.0	0.0	5.3
Zone 3	0.0	0.0	20.4
Zone 4	0.0	0.0	18.6
Zone 5	0.0	0.0	21.2
Zone 6	0.0	0.0	18.6
Total	100.0	100.0	100.0

Table B.2. Characteristics of found sites, East London townships, PLACE assessments 2000, 2003			
	Twp 1 Baseline 2000 N=276	Twp 1 Follow-up 2003 N=256	Twp 2 2003 N=226
Type of sites (%)			
Bar/tavern	1.8	4.7	1.8
Shebeen/home brew	87.7	80.9	46.0
Private dwelling	0.4	0.0	0.0
Taxi stand	0.0	0.4	1.8
Truck stop	0.0	0.0	0.4
Market place	0.7	0.0	1.8
Church	1.5	0.0	11.5
School yard	0.0	0.0	1.8
Street	0.0	1.6	3.5
Empty plot	0.0	0.4	4.9
Unused house	0.0	0.0	0.9
Public toilet	0.0	0.0	0.9
Spaza	1.5	3.5	15.9
Hotel	0.4	0.0	0.0
Braai vleis place	1.5	1.2	0.0
Sport event	0.0	1.2	0.0
Other	2.9	2.7	8.4
Missing	0.0	3.5	0.4
Total	100.0	100.0	100.0
Percent of sites within two blocks of a ...			
Busy road	--	62.1	--
Taxi rank	--	4.7	--
Bus stop	--	5.9	--
Train stop	--	0.0	--
Trucking route	--	0.0	--

Table B.3. Characteristics of found and verified sites, interviews with site representatives (N=total number of verified sites), East London townships, PLACE assessments 2000, 2003									
Age of Respondents	Men (%)			Women (%)			Total (%)		
	Township 1		Twp 2	Township 1		Twp 2	Township 1		Twp 2
	2000 N=158	2003 N=79	2003 N=91	2000 N=75	2003 N=116	2003 N=126	2000 N=235	2003 N=195	2003 N=217
16-19	1.3	6.3	6.6	2.7	3.5	7.9	1.7	4.6	7.4
20-24	3.8	19.0	7.7	6.7	8.6	12.7	4.7	12.8	10.6
25-29	14.6	15.2	17.6	20.0	9.5	18.3	16.2	11.8	18.0
30-34	12.0	17.7	17.6	12.0	15.5	19.8	11.9	16.4	18.9
35-39	19.0	12.7	16.5	17.3	18.1	19.8	18.7	15.9	18.4
>= 40	49.4	29.1	34.1	41.3	44.8	21.4	46.8	38.5	26.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean	39.5±	33.9±	36.1±	38.1±	38.1±	32.8±	39.1±	36.4±	34.2 ±
	10.7	11.1	11.7	11.6	10.8	10.0	11.0	11.1	10.9
Median	39.0	32.0	35.0	36.0	38.0	32.0	38.0	37.0	33.0
				Township 1 (%)				Twp 2, 2003 N=217	
				Baseline, 2000 N=235		Follow-up, 2003 N=195			
Number of Years Site Been in Operation									
≤ 2 years				16.6		22.6		19.4	
More than 2 years				83.4		68.7		80.7	
Not Applicable				0.0		8.7		0.0	
Total				100.0		100.0		100.0	
Activities On-site									
Beer consumed				85.5		87.7		47.9	
Hard alcohol consumed				71.1		67.7		27.7	
TV or Video viewing				33.6		43.1		12.0	
Dancing				46.4		40.5		17.1	
Music				64.7		65.1		40.1	
Men meet new female sexual partners here				54.0		68.2		47.5	
Women meet new sexual partners here				53.6		65.6		47.0	
Men meet gay sexual partners here				2.6		5.1		2.8	
Someone on site facilitates partnerships				3.0		3.6		3.7	
Female sex workers solicit customers				1.7		10.3		8.8	
Partners who meet at site have sex on site				3.4		6.2		--	
Female staff meet new partners here				--		6.2		--	
No. of Workers (2000)									
No. of Workers during Busy Time (2003)	Men (%)			Women (%)			Total (%)		
	Township 1		Twp 2	Township 1		Twp 2	Township 1		Twp 2
	2000 N=235	2003 N=195	2003 N=217	2000 N=235	2003 N=195	2003 N=217	2000 N=235	2003 N=195	2003 N=217
0	66.4	24.1	69.6	54.0	17.4	63.1	42.1	1.5	54.8
1-2	24.7	66.7	21.7	36.6	73.9	30.4	38.7	59.0	31.8
3-5	3.0	6.2	4.1	3.4	7.2	2.3	9.8	34.4	4.6
6+	3.4	3.1	4.1	2.6	1.5	4.1	4.7	5.1	8.3
Missing	2.6	0.0	0.5	3.4	0.0	0.0	4.7	0.0	0.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean	0.9	1.6	0.8	1.0	2.1	0.9	2.0	3.7	1.8
± St. Dev	±3.1	±3.9	±2.3	±3.1	±7.7	±2.7	±6.2	±10.7	±4.3

Table B.3. Characteristics of found and verified sites, interviews with site representatives (N=total number of verified sites), East London townships, PLACE assessments 2000, 2003			
Patrons of site come from...	Twp 1 Baseline, 2000 N=235	Twp 1 Follow- up, 2003 N=195	Twp 2, 2003 N=217
Zone A	31.5	28.7	--
Zone B	60.0	54.4	--
Zone C	20.0	32.3	--
Zone D	17.9	24.6	--
Zone E	19.6	24.1	--
Zone F	21.7	27.7	--
Zone G	4.7	10.8	--
Zone H	9.4	3.6	--
Zone I	16.0	22.1	--
Zone J	5.5	7.2	--
Zone K	9.4	18.5	--
From all over Township 1	0.4	18.5	--
Township 2	0.4	0.5	--
Zone L	0.0	29.7	--
Zone M	0.0	8.2	--
Zone N	0.0	6.2	--
Zone O	0.0	3.6	--
Zone P	0.0	2.1	--
Zone Q	0.0	0.5	--
Zone R	0.0	11.3	--
Zone S	12.8	0.0	--
Zone T	6.8	0.0	--
Zone U	0.4	0.0	--
Other Township in East London	0.4	0.0	--
Elsewhere in East London	2.1	0.5	--
Elsewhere in Eastern Cape	0.0	0.5	--
Other	8.5	0.0	--

Table B.4. Characteristics of patrons coming to sites, interviews with site representatives, East London Townships, PLACE Assessments 2000, 2003

	None (%)			Some (%)			Most (%)		
	Township 1		Twp 2	Township 1		Twp 2	Township 1		Twp 2
	2000 N=235	2003 N=195	2003 N=217	2000 N=235	2003 N=195	2003 N=217	2000 N=235	2003 N=195	2003 N=217
Proportion of sites with female patrons who ...									
Are unemployed	42.1	6.7	29.5	47.2	64.1	44.2	10.2	29.2	24.9
Are students	75.7	63.1	44.7	21.3	28.7	40.6	2.6	8.2	12.4
Are less than age 18	80.9	80.0	47.9	18.3	13.3	31.0	0.4	6.7	18.4
Live in this branch	10.6	2.6	--	38.3	16.9	--	50.2	80.5	--
Live in Township 1	44.7	13.9	--	47.2	46.2	--	7.2	40.0	--
Live outside Twp 1	--	44.1	--	--	46.7	--	--	9.2	--
Live in Township 2	--	--	7.8	--	--	22.6	--	--	67.7
Come to site at least once a week	60.4	6.2	--	34.9	83.6	--	4.3	10.3	--
Drink alcohol at site	29.4	13.9	--	29.4	33.8	--	40.0	55.4	--
Find a new sexual partner at site	54.9	33.3	34.6	42.6	56.9	31.3	42.1	9.7	8.3
Come by car or taxi	--	52.8	--	--	32.3	--	--	14.9	--
Proportion of sites with male patrons who ...									
Are unemployed	43.4	7.2	22.6	50.2	61.0	50.7	6.0	31.8	25.4
Are students	74.0	63.1	40.1	23.0	29.7	42.5	2.1	7.2	15.2
Are less than age 18	80.9	80.0	44.2	17.0	13.3	35.0	0.9	6.7	18.9
Live in this branch	3.0	0.0	--	30.6	15.9	--	65.5	84.1	--
Live in Township 1	38.3	12.8	--	52.8	40.5	--	0.9	46.7	--
Live outside Twp 1	--	38.0	--	--	52.3	--	--	9.7	--
Live in Township 2	--	--	8.8	--	--	28.6	--	--	61.3
Come to site at least once a week	61.7	4.6	--	32.8	85.6	--	4.7	9.7	--
Drink alcohol at site	20.4	10.8	--	27.7	25.6	--	51.1	63.6	--
Find a new sexual partner at site	56.2	31.8	37.8	40.9	58.5	29.5	2.1	9.7	9.2
Come by car or taxi	--	45.1	--	--	37.5	--	--	15.4	--
Find male sexual (gay) partners here	--	91.8	--	--	5.6	--	--	5.6	--

Table B.5. Number of patrons and busy times at sites, interviews with site representatives, East London townships, PLACE assessments 2000, 2003									
				Township 1 (%)			Twp 2 (%) 2003, N=217		
				2000, N=235		2003, N=195			
Number of patrons during busy time									
1-10				--		9.7		--	
11-25				--		27.2		--	
26-50				--		31.8		--	
51-75				--		10.3		--	
76-100				--		10.8		--	
101-300				--		5.6		--	
301-500				--		1.5		--	
501-1000				--		2.1		--	
>1000				--		0.5		--	
Missing				--		0.5		--	
Total				--		100.0		--	
	Men (%)			Women (%)			Total (%)		
	Township 1		Twp 2 2003 N=217	Township 1		Twp 2 2003 N=217	Township 1		Twp 2 2003 N=217
	2000 N=235	2003 N=195		2000 N=235	2003 N=195		2000 N=235	2003 N=195	
Number of patrons during busy day (Twp 1 2001, Twp 2 2003)/most recent busy time (Twp 1 2003)									
<10	13.2	15.4	29.0	35.7	45.7	23.0	--	8.7	--
11-50	66.4	62.6	51.6	53.2	44.1	56.7	--	57.5	--
51-100	11.1	11.8	12.4	4.3	4.7	11.5	--	22.6	--
101-300	6.4	7.2	2.3	2.1	4.1	5.5	--	6.2	--
301-500	1.7	1.5	1.4	2.1	0.5	0.5	--	2.1	--
501-1000	0.9	0.0	1.8	2.1	0.5	1.8	--	1.5	--
>1000	0.0	0.0	0.0	0.0	0.0	0.0	--	0.5	--
Missing	0.4	1.0	1.4	0.4	0.5	0.9	--	1.0	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	--	100.0	--
Mean	--	47.1	--	--	31.6	--	--	78.7	--
± Std. Deviation		± 70.7			± 67.2			± 133.8	
Median	--	28.0	--	--	15.0	--	--	45.0	--
		Morning (%)		Afternoon (%)		Evening (%)		Late Night (%)	
		2000 N=235	2003 N=195	2000 N=235	2003 N=195	2000 N=235	2003 N=195	2000 N=235	2003 N=195
Busy times (Township 1 only)									
Monday		17.0	31.8	10.2	21.5	29.4	23.6	7.7	2.1
Tuesday		5.1	5.6	7.7	8.7	10.2	5.1	2.6	1.0
Wednesday		3.4	4.6	6.8	8.2	8.5	5.6	2.1	1.0
Thursday		3.4	6.2	11.9	23.1	22.1	24.6	6.4	3.1
Friday		19.6	19.0	54.5	54.4	83.0	87.7	40.4	18.5
Saturday		76.6	87.2	88.1	94.9	88.9	92.3	40.0	15.4
Sunday		82.1	85.6	74.0	87.7	70.2	73.3	22.1	7.7
Busy times of the year				Township 1 (%)				Twp 2, 2003 (%)	
				Baseline, 2000		Follow-up, 2003			
Summer				72.8		94.4		--	
Winter				9.4		36.4		--	
School Holidays				17.9		40.0		--	
Public Holidays				50.2		79.5		--	
End of month				--		95.4		--	
Festival Season (Dec-Jan)				--		92.8		--	
Other				31.3		1.0		--	

Table B.6. AIDS prevention activities and condom availability at sites, interviews with site representatives, East London Townships, PLACE assessments 2000, 2003

	Township 1 (%)		Twp 2
	Baseline, 2000 N=235	Follow-up, 2003 N=195	2003 (%) N=217
AIDS prevention activities at the site			
Ever been any AIDS prevention activities	23.4	67.2	0.5
Willing to have AIDS prevention on site	91.9	--	70.1
Any AIDS educational talks	--	53.3	--
Peer health education program	--	47.7	--
Condom promotion	--	66.7	--
AIDS video shown on site	--	1.5	--
AIDS radio program broadcast	--	5.6	--
AIDS posters	--	3.1	--
AIDS leaflets	--	7.7	--
AIDS posters observed	4.7	1.5	0.5
AIDS brochures observed	1.7	1.0	0.5
Condoms visible	8.1	39.5	0.5
Condoms available in past year			
Always	5.1	32.3	5.5
Sometimes	13.6	34.4	12.0
Never	80.0	31.7	82.5
Missing	1.3	1.5	0
Total	100.0	100.0	100.0
Condoms obtained from ...			
Peer health educators	--	66.67	--
Other source	--	6.15	--
Last received Condoms from PHE			
Within past 4 weeks	--	35.4	--
Within past 2-6 months	--	19.0	--
Within past 6 months to 1 year	--	7.2	--
Over a year ago	--	4.6	--
Never received condoms from PHE	--	30.8	--
Missing	--	3.1	--
Total	--	100.0	--
Number of boxes received from PHE at last visit			
0	--	7.2	--
1	--	28.7	--
2	--	19.0	--
≥ 3	--	13.9	--
Never received condoms from PHE	--	30.8	--
Missing	--	0.5	--
Total	--	100.0	--

Table B.6. AIDS prevention activities and condom availability at sites, interviews with site representatives, East London Townships, PLACE assessments 2000, 2003			
	Township 1 (%)		Twp 2
	Baseline, 2000 N=235	Follow-up, 2003 N=195	2003 (%) N=217
Any condoms left from last PHE visit?			
Yes	--	40.5	--
No	--	27.7	--
Never received condoms from PHE	--	30.8	--
Missing	--	1.0	--
Total	--	100.0	--
Condoms on-site at time of visit?			
Yes, but not seen	4.7	3.1	4.6
Yes, condom seen	9.8	39.5	7.8
No	84.3	57.4	87.6
Total	100.0	100.0	100.0
Condoms distribution in past four weeks			
Sold			
0	--	100.0	100.0
Total	--	100.0	100.0
Provided freely			
0	--	48.7	94.9
1-50	--	10.3	2.8
51-100	--	23.6	1.4
101+	--	16.9	0.9
Missing	--	0.5	0.0
Total	--	100.0	100.0
Condoms available within 10 minutes of site?			
Yes	42.6	67.7	10.2
No	56.6	32.3	89.9
Missing	0.9	0.0	0.0
Total	100.0	100.0	100.0

Appendix 4 –Interviews with Individuals Socializing at Sites Tables

Table C.1. Summary of field work for interviews with individuals socializing at sites, East London townships, PLACE assessments 2000, 2003			
	Township 1 Baseline 2000 N=2084	Township 1 Follow-up 2003 N=1059	Township 2 Baseline 2003 N=1001
Number of days of individual interviews	8	12	8
Days of week (%)			
Monday	10.0	14.5	--
Tuesday	4.5	7.7	--
Wednesday	5.3	4.4	--
Thursday	6.4	14.2	--
Friday	16.0	21.7	--
Saturday	15.9	22.5	--
Sunday	41.8	15.0	--
Missing	0.2	0.0	--
Total	100.0	100.0	--
Number of sites visited for individual interviews	58	35	42
Type of sites (%)			
Bar/Tavern	5.2	20.0	7.2
Shebeen/Home Brew	84.5	60.0	83.3
Taxi stand	0.0	2.9	0.0
School Yard	0.0	5.7	0.0
Unused house	0.0	0.0	4.8
Hotel	1.7	0.0	0.0
Braai Vleis Place	3.5	2.9	0.0
Other	3.5	5.7	2.4
Missing	1.7	0.0	2.4
Total	100.0	100.0	100.0
Number of interviewers	14	10	14
Gender of respondent (%)			
Male	69.0	59.9	56.0
Female	31.1	40.1	44.0
Total	100.0	100.0	100.0

Table C.1. Summary of field work for interviews with individuals socializing at sites, East London townships, PLACE assessments 2000, 2003									
	Men			Women			Total		
	Township 1		Twp 2	Township 1		Twp 2	Township 1		Twp 2
	2000 N=1437	2003 N=634	2003 N=561	2000 N=647	2003 N=425	2003 N=440	2000 N=2084	2003 N=1059	2003 N=1001
Willingness of respondent (%)									
Yes	99.8	99.7	99.5	99.1	99.8	99.6	99.6	99.7	99.5
No	0.2	0.3	0.5	0.9	0.0	0.0	0.4	0.2	0.3
Not applicable, respondent interviewed already during study period	0.0	0.0	0.0	0.0	0.2	0.5	0.0	0.1	0.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C.2. Self-reported socio-demographic characteristics, interviews with individuals socializing at sites, East London Townships, PLACE assessments 2000, 2003									
	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
Age									
14	0.6	0.0	0.0	0.8	0.0	0.0	0.7	0.0	0.0
15-19	9.7	12.7	11.3	13.6	22.2	18.5	10.9	16.5	14.5
20-24	18.1	21.0	16.5	22.2	24.1	21.7	19.4	22.3	18.8
25-29	20.3	21.7	24.9	20.6	21.0	20.6	20.4	21.4	23.0
30-34	19.7	15.2	19.5	16.7	13.7	19.2	18.8	14.6	19.4
35-39	13.2	13.1	13.8	11.4	6.1	8.7	12.6	10.3	11.6
40+	17.9	16.1	14.0	14.4	13.0	11.2	16.8	14.9	12.8
Missing	0.5	0.16	0	0.5	0.0	0.2	0.5	0.1	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean	30.9	30.2	30.2	29.1	27.8	27.8	30.4	29.2	29.2
± St Dev	± 9.9	± 10.4	± 9.2	± 9.7	± 10.5	± 9.0	± 9.8	± 10.5	± 9.2
Median	30	28	30	28	25	27	29	27	28
Current residence									
In Township 1	91.5	88.3	1.3	95.2	88.9	0.7	92.6	88.5	1.0
Not in Township 1	6.7	11.7	98.8	3.9	11.1	99.3	5.8	11.5	99.0
Missing	1.8	0.0	0.0	0.9	0.0	0.0	1.5	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Area where respondent resides									
Zone A	18.0	29.6	1.3	20.0	32.8	0.7	18.6	30.9	1.0
Zone B	31.3	19.3	--	34.4	17.7	--	32.3	18.7	--
Zone C	7.4	5.7	--	6.4	5.0	--	7.1	5.4	--
Zone D	4.0	5.9	--	3.0	7.1	--	3.7	6.3	--
Zone E	5.7	5.1	--	4.1	3.8	--	5.2	4.6	--
Zone F	4.5	5.5	--	5.5	5.4	--	4.8	5.5	--
Zone G	2.2	3.0	--	1.7	1.7	--	2.0	2.5	--
Zone H	4.2	1.3	--	3.0	1.4	--	3.8	1.3	--
Zone I	7.1	9.0	--	10.8	9.4	--	8.2	9.2	--
Zone J	3.1	1.3	--	2.5	1.4	--	2.9	1.3	--
Zone K	1.8	1.7	--	2.0	1.9	--	1.9	1.8	--
Township 2	--	--	92.1	--	--	95.9	--	--	93.8
Zone L	--	--	0.9	--	--	1.4	--	--	1.1
Other	10.0	12.7	5.7	6.1	12.5	2.1	8.6	12.6	4.1
Missing	1.1	0.0	0.0	0.6	0.0	0.0	0.9	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C.2. Self-reported socio-demographic characteristics, interviews with individuals socializing at sites, East London Townships, PLACE assessments 2000, 2003									
	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
Years residing in Township 1 (2000)/district (Township 1 [2003])/ Township 2 (2003)									
<1	2.6	3.2	9.7	2.3	4.3	5.0	2.5	3.6	7.6
1 year	2.2	1.7	6.8	2.5	3.8	3.4	2.3	2.6	5.3
2-4 years	8.8	14.4	44.8	8.9	14.2	48.0	8.8	14.3	46.2
5-10 years	17.6	22.3	23.5	17.6	23.1	28.3	17.5	22.6	25.6
>10 years	14.0	19.5	9.3	13.0	14.4	10.1	13.7	17.4	9.6
All of life	46.4	38.6	3.1	50.9	39.6	2.5	47.8	39.0	2.8
Lives in other location	6.7	--	2.9	3.9	--	2.7	5.8	--	2.8
Missing	1.8	0.3	0.0	0.9	0.7	0.0	1.6	0.5	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Frequency of attendance at site									
Every day	12.1	23.9	19.7	11.4	19.1	22.8	11.9	22.0	21.1
4-6 times per week	6.6	15.2	9.5	5.6	11.3	15.5	6.3	13.6	12.2
2-3 times per week	45.7	35.8	31.2	42.3	37.7	27.2	44.6	36.6	29.4
One time per week	12.9	10.0	23.3	16.2	13.2	21.0	13.9	11.3	22.3
2-3 times per month	8.6	6.3	5.0	8.6	6.6	4.6	8.6	6.4	4.8
One time per month	6.1	4.1	6.5	5.3	4.7	4.8	5.9	4.4	5.7
<1 time per month	--	1.7	--	--	1.7	--	--	1.7	--
First time today	7.4	2.9	4.1	10.0	5.7	4.1	8.2	4.0	4.1
Missing	0.8	0.2	0.7	0.6	0.0	0	0.7	0.1	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
First attendance to site									
Today	8.0	3.8	6.1	11.1	6.4	5.5	8.9	4.8	5.8
Within past 4 weeks	4.2	2.4	16.9	3.7	3.1	12.1	4.1	2.7	14.8
Within past 2-6 months	13.7	9.0	18.1	17.9	10.4	21.9	15.0	9.6	19.8
Within past 7-12 months	17.7	8.7	17.0	17.2	12.7	13.0	17.5	10.3	15.3
Over a year ago	32.2	42.1	31.0	33.1	37.7	37.9	32.4	40.3	34.0
Over 5 years ago	23.2	33.9	10.8	16.2	28.8	9.6	21.0	31.8	10.2
Missing	1.2	0.2	0.2	0.8	0.9	0.0	1.1	0.5	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C.2. Self-reported socio-demographic characteristics, interviews with individuals socializing at sites, East London Townships, PLACE assessments 2000, 2003									
	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
Number of sites went to before interview (Including interview site)									
0	4.1	16.3	1.6	4.7	18.9	2.5	4.3	17.3	2.0
1	68.4	57.9	66.3	69.4	61.6	62.1	68.7	59.4	64.5
2	20.7	19.2	23.5	20.9	16.0	22.6	20.8	17.9	23.1
3+	5.9	6.7	8.4	4.5	3.5	12.8	5.5	5.4	10.3
Missing	0.9	0.0	0.2	0.5	0.0	0.0	0.8	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of sites plan to visit after interview									
0	75.6	67.1	39.8	78.2	70.3	40.6	76.4	68.4	40.2
1	20.2	25.2	37.6	16.5	21.9	34.3	19.1	23.9	36.1
2	2.9	4.8	12.9	3.6	4.7	13.0	3.1	4.7	13.0
3+	0.4	3.0	8.6	0.9	2.8	11.2	0.6	2.9	9.7
Missing	0.9	0.0	1.1	0.8	0.2	0.9	0.9	0.1	1.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Student status									
Currently a student	18.6	22.5	16.1	22.3	25.2	23.1	19.7	23.6	19.2
Not Currently a Student	80.1	76.4	17.4	77.2	74.5	20.8	29.2	75.7	18.9
Missing	1.4	1.1	66.5	0.5	0.2	56.2	1.1	0.8	62.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Education level									
None	1.4	2.5		2.0	1.9		1.6	2.3	
<= Standard 5	17.9	11.7		18.1	14.9		17.9	13.0	
Standard 6-8	33.9	31.0		38.2	39.6		35.7	34.5	
Standard 9-10	33.3	44.8		31.7	35.6		32.8	41.1	
Tertiary	11.1	9.7		8.4	8.0		10.4	9.0	
Missing	1.7	0.3		1.6	0.00		1.6	0.2	
Total	100.0	100.0		100.0	100.0		100.0	100.0	
Employment status									
Not Employed, Looking for Work	27.6	24.4	37.5	41.3	41.5	46.4	31.9	31.3	41.4
Not Employed, Not Looking for Work	20.1	17.1	13.4	25.1	24.1	22.8	21.6	19.9	17.6
Employed, Occasionally/Part-Time	15.7	25.5	23.8	14.7	21.0	17.4	15.4	23.7	21.0
Employed, Full-Time	34.9	32.3	24.9	16.9	13.2	13.2	16.9	24.6	19.8
Missing	1.7	0.8	0.4	2.0	0.2	0.2	0.8	0.6	0.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C.3. Rate of partnership acquisition and condom use, interviews with individuals socializing at sites, East London townships, PLACE assessments 2000, 2003

	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
People attract new partners at site									
Yes	83.8	85.8	88.4	86.3	85.9	85.4	84.6	85.8	87.1
No	14.9	14.2	10.9	12.6	14.2	13.9	14.2	14.2	12.3
Missing	1.3	0.0	0.7	1.1	0.0	0.7	1.3	0.0	0.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Patron ever attracted new partner at site									
Yes	25.7	25.6	53.4	22.2	23.8	47.5	24.6	24.9	50.8
No	73.4	74.2	44.3	77.2	76.2	51.4	74.6	75.0	47.4
Missing	0.9	0.2	2.3	0.6	0.0	1.1	0.8	0.1	1.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Last attracted new partner									
Within past 7 days	2.6	6.2	21.7	1.6	4.0	20.1	2.3	5.3	21.0
Within past 2-4 weeks	5.7	5.4	17.7	5.0	3.3	14.8	5.5	4.6	16.5
Within past 2-6 months	6.4	7.6	9.5	7.2	11.1	9.8	6.6	9.0	9.6
Within past 7-12 months	5.0	1.9	5.0	4.2	3.3	5.9	4.7	2.5	5.4
Over a year ago	5.3	3.6	6.1	4.7	1.2	5.3	5.1	2.7	5.7
Never met a new partner at site	73.8	74.2	40.0	76.3	76.2	44.1	74.6	75.0	41.8
Missing	1.4	1.1	0.0	1.1	0.9	0.0	1.3	1.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ever attracted previous sexual partner at site									
Yes	12.8	16.1	--	13.4	15.3	--	13.0	15.8	--
No	86.3	83.5	--	85.8	84.7	--	86.2	84.0	--
Missing	0.9	0.3	--	0.8	0.0	--	0.9	0.2	--
Total	100.0	100.0	--	100.0	100.0	--	100.0	100.0	--
Number of partners in past four weeks									
0	12.8	17.7	25.3	11.5	21.5	29.5	12.1	19.2	27.1
1	57.0	60.3	27.4	68.8	61.6	28.8	60.7	60.8	28.0
2	20.6	15.5	17.9	13.3	12.0	18.3	18.4	14.1	18.1
3	6.5	3.8	10.0	4.5	3.8	7.5	5.9	3.8	8.9
4 – 9	1.9	2.5	16.7	1.3	1.2	12.1	1.7	2.0	14.7
10 +	0.4	0.2	2.7	0.3	0.0	3.9	0.3	0.1	3.2
Missing	1.3	0.0	0.0	0.3	0.0	0.0	1.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean	1.3	1.2	2.1	1.2	1.0	2.1	1.3	1.1	2.1
± St Dev	± 1.3	± 1.0	± 2.3	± 1.0	± 0.8	± 2.8	± 1.2	± 0.9	± 2.5
Median	1	1	1	1	1	1	1	1	1

Table C.3. Rate of partnership acquisition and condom use, interviews with individuals socializing at sites, East London townships, PLACE assessments 2000, 2003

	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
Number of new partners in past four weeks									
0	63.0	76.4	41.4	72.4	80.2	45.4	65.9	77.9	43.2
1	25.8	17.1	29.2	21.5	15.8	28.3	24.5	16.6	28.8
2	6.9	4.0	15.2	4.4	3.8	14.8	6.1	3.9	15.1
3	1.5	1.1	7.2	0.8	0.2	3.7	1.3	0.8	5.6
4+	0.8	1.3	7.0	0.3	0.0	7.8	0.7	0.7	7.3
Missing	2.0	0.2	0.0	0.6	0.0	0.0	1.5	0.1	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean	0.5	0.4	1.1	0.4	0.2	1.2	0.4	0.3	1.2
± St Dev	± 1.0	± 0.9	± 1.3	± 0.7	± 0.5	± 1.9	± 0.9	± 0.8	± 1.6
Median	0	0	1	0	0	1	0	0	1
Number of new partners in past 12 Months									
0	43.3	56.7	19.0	55.9	58.7	24.9	47.2	57.5	21.6
1	27.4	25.8	20.4	25.7	30.0	23.5	26.9	27.5	21.8
2	13.6	8.2	18.8	11.7	7.3	17.6	13.0	7.9	18.3
3	6.6	4.9	11.7	5.5	1.9	7.8	5.5	3.7	9.9
4 – 9	6.2	3.5	22.6	3.1	1.9	19.4	5.6	2.8	21.1
10+	1.1	0.6	6.3	0.0	0.0	5.9	0.8	0.4	6.1
Missing	1.3	0.3	1.3	0.5	0.0	0.9	1.0	0.3	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean	1.3	0.8	3.0	1.2	0.6	3.1	1.1	0.7	3.0
± St Dev	± 2.1	± 1.6	± 3.9	± 2.6	± 0.9	± 7.3	± 1.9	± 1.4	± 5.6
Median	1	0	2	0	0	2	1	0	2
Respondent met new partner within 12 months in public place									
Yes	--	24.4	--	--	24.5	--	--	24.4	--
No	--	16.8	--	--	13.4	--	--	15.4	--
No new partners in pst yr	--	56.7	--	--	58.7	--	--	57.5	--
Missing	--	2.2	--	--	3.3	--	--	2.7	--
Total	--	100.0	--	--	100.0	--	--	100.0	--
Respondent met new partner within 12 months in private house or residence									
Yes	--	9.3	--	--	7.6	--	--	8.6	--
No	--	28.5	--	--	26.9	--	--	27.8	--
No new partners in pst yr	--	56.7	--	--	58.7	--	--	57.5	--
Missing	--	5.5	--	--	6.8	--	--	6.1	--
Total	--	100.0	--	--	100.0	--	--	100.0	--
Respondent met new partner within 12 months at work									
Yes	--	1.3	--	--	0.7	--	--	1.0	--
No	--	36.2	--	--	33.7	--	--	35.2	--
No new partners in pst yr	--	56.7	--	--	58.7	--	--	57.5	--
Missing	--	5.9	--	--	6.8	--	--	6.3	--
Total	--	100.0	--	--	100.0	--	--	100.0	--

Table C.3. Rate of partnership acquisition and condom use, interviews with individuals socializing at sites, East London townships, PLACE assessments 2000, 2003

	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
Used a condom during last sex with most recent new partner									
Yes	11.7	16.3	24.6	10.1	12.7	25.1	11.2	14.9	24.8
No	23.1	7.0	33.3	16.9	7.1	28.3	21.2	7.0	31.1
No new partner in the past 4 weeks	63.0	76.4	41.4	72.4	80.2	45.4	65.9	77.9	43.2
Missing	2.2	0.3	0.7	0.6	0.0	1.1	1.7	0.2	0.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of regular partners in last 12 months									
0	--	12.5	12.9	--	19.0	20.6	--	15.2	16.3
1	--	74.2	47.7	--	71.9	41.6	--	73.3	45.0
2	--	10.0	18.6	--	5.7	18.3	--	8.2	18.5
3	--	1.4	9.7	--	1.2	9.1	--	1.3	9.4
4+	--	0.6	10.9	--	0.2	10.0	--	0.5	10.7
Missing	--	1.3	0.2	--	1.9	0.0	--	1.5	0.1
Total	--	100.0	100.0	--	100.0	100.0	--	100.0	100.0
Mean	--	1.0	1.8	--	1.0	1.6	--	0.9	1.7
± St Dev	--	± 0.7	± 1.7	--	± 0.7	± 1.7	--	± 0.6	± 1.7
Median	--	1	1	--	1	1	--	1	1
Condom used with last regular partner									
Used Condom	--	34.2	30.7	--	38.5	24.7	--	36.7	28.0
Did not use condom	--	45.3	54.5	--	47.0	53.2	--	46.3	53.9
No regular partners	--	19.1	12.9	--	12.5	21.0	--	15.2	16.8
Missing	--	1.4	2.0	--	2.1	1.1	--	1.8	1.3
Total	--	100.0	100.0	--	100.0	100.0	--	100.0	100.0
Total number of partners in last 12 months									
0	4.2	6.2	9.9	4.2	9.9	13.2	4.2	7.7	11.4
1	37.9	46.2	26.9	54.3	51.9	30.8	42.9	48.5	28.6
2	24.4	22.3	14.9	20.8	20.3	17.6	23.3	21.5	16.1
3	12.3	11.4	10.0	10.5	11.3	6.4	11.7	11.4	8.4
4-9	16.5	12.3	24.6	8.7	6.4	19.6	14.1	9.9	22.4
10+	3.5	1.4	11.9	0.9	0.2	11.7	2.7	0.9	11.7
Missing	1.3	0.2	2.0	0.6	0.0	0.7	1.1	0.1	1.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean ± St Dev	2.5 ± 5.1	1.9 ± 1.8	4.1 ± 5.6	1.8 ± 1.7	2.1 ± 2.1	4.6 ± 9.5	2.5 ± 4.4	1.6 ± 1.3	4.3 ± 7.6
Median	2	1	2	1	1	2	2	1	2
Ever used a condom									
Yes	35.9	62.3	45.0	32.9	60.1	40.4	35.0	61.5	43.0
No	62.7	37.3	52.7	66.0	39.6	56.9	63.7	38.3	54.5
Missing	1.4	0.3	2.3	1.1	0.2	2.7	1.3	0.3	2.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C.3. Rate of partnership acquisition and condom use, interviews with individuals socializing at sites, East London townships, PLACE assessments 2000, 2003

	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
Last used a condom									
Within past 7 days	--	28.5	--	--	25.5	--	--	27.3	--
Within past 2-4 weeks	--	11.7	--	--	11.6	--	--	11.7	--
Within past 2-3 months	--	6.7	--	--	6.6	--	--	6.6	--
Within past 4-6 months	--	2.4	--	--	5.7	--	--	3.7	--
Within past 7-12 months	--	6.0	--	--	5.2	--	--	5.7	--
Over a year ago	--	7.1	--	--	5.7	--	--	6.5	--
Never used a condom	--	37.3	--	--	39.6	--	--	38.3	--
Missing	--	0.3	--	--	0.2	--	--	0.3	--
Total	--	100.0	--	--	100.0	--	--	100.0	--
Possession of condom at time of interview									
Yes, condom not seen	5.7	12.5	31.2	2.6	10.6	26.9	4.7	11.7	29.3
Yes, condom seen									
No	91.8	87.0	68.3	95.8	89.4	71.9	93.0	88.0	69.9
Missing	2.6	0.5	0.5	1.6	0.0	1.1	2.3	0.3	0.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C.4. AIDS education program coverage, interviews with individuals socializing at sites, East London townships, PLACE assessments 2000, 2003									
	Men (%)			Women (%)			Total (%)		
	Twp 1 2000 N=1434	Twp 1 2003 N=632	Twp 2 2003 N=558	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438	Twp 1 2000 N=2075	Twp 1 2003 N=1056	Twp 2 2003 N=996
Number of AIDS education sessions attended in Township 1 in past three months (baseline 2000, follow-up 2003)/ sessions attended in Township 2 in the past 12 months (baseline 2003)									
0	86.4	47.0	73.5	82.4	45.5	79.0	85.2	46.4	75.9
1	7.0	28.3	14.2	11.5	30.2	12.8	8.4	29.1	13.6
2	2.0	13.3	4.5	2.8	13.4	2.7	2.3	13.4	3.7
3+	3.1	11.4	1.1	1.9	10.9	3.0	2.8	11.2	1.9
Missing	1.4	0.0	6.8	1.4	0.0	2.5	1.4	0.0	4.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Heard of peer health educators wearing maroon shirts									
Yes	--	32.1	--	--	35.9	--	--	33.6	--
No	--	67.9	--	--	64.2	--	--	66.4	--
Missing	--	0	--	--	0	--	--	0	--
Total	--	100.0	--	--	100.0	--	--	100.0	--
Number of times spoke with a peer educator in Township 1 (baseline 2000, follow-up 2003)/ peer educator in Township 2 (baseline 2003)									
0	96.2	77.9	89.6	96.3	77.6	90.9	96.2	77.7	90.2
1	1.5	15.5	9.5	1.7	14.4	7.5	1.5	15.1	8.6
2+	1.1	4.1	0.5	1.1	5.7	0.9	1.1	4.7	0.7
Missing	1.3	2.5	0.4	0.9	2.4	0.7	1.2	2.5	0.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C.5. STI symptoms and sex work, interviews with women socializing at sites, East London Townships, PLACE Assessments 2000, 2003			
	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438
Symptoms in past four weeks (%)			
Lower abdominal pain	35.6	30.9	49.3
Unusual discharge	36.8	26.2	40.0
Sores	12.6	5.9	21.0
Clinic for treatment (%)			
Yes	31.8	27.8	36.1
No	14.8	18.6	36.5
Not Applicable	52.9	53.5	11.0
Missing value	0.5	0.0	16.4
Total	100.0	100.0	100.0
Women received money for sex (%)			
Yes	--	6.6	--
No	--	93.4	--
Missing	--	0.0	--
Total	--	100.0	--

Table C.6. Symptoms and treatment of men interviewed at sites, interviews with men socializing at sites, East London townships, PLACE assessments 2000, 2003			
	Twp 1 2000 N=641	Twp 1 2003 N=424	Twp 2 2003 N=438
Symptoms in past four weeks (%)			
Pain on urination	25.8	22.5	42.5
Unusual Discharge	20.7	13.0	29.6
Sores	9.3	5.2	21.3
Clinic for treatment (%)			
Yes	22.0	19.9	26.9
No	7.7	16.0	50.2
Not Applicable	69.8	64.1	11.1
Missing	0.5	0.0	11.8
Total	100.0	100.0	100.0
Men gave money for sex (%)			
Yes	--	3.5	--
No	--	96.2	--
Missing	--	0.3	--
Total	--	100.0	--

Appendix 5 – Column Percent Distribution of Selected Demographic and Behavioral Characteristics of the Respondents by Contact Group Tables

Table 5.1. Percent distribution of selected demographic and behavioral characteristics among male respondents by contact group

	Low (n=268) (%)	Moderate (n=160) (%)	Elevated (n=173) (%)
Age Group			
18-19	6.3	10.6	9.0
20-24	19.0	24.3	25.0
25-29	20.9	23.8	25.0
30-34	15.3	15.3	18.1
35-39	13.1	15.3	13.2
40+	25.4	10.6	9.7
Years educated			
Primary or none	18.7	12.7	8.3
Some/completed secondary	70.0	77.3	83.3
Some/completed tertiary	11.2	10.1	8.3
Years lived in study area			
2 or more years	86.2	79.9	83.5
0-1 year	4.1	4.8	4.1
Not a resident	9.7	15.3	12.4
Employment status			
Not employed	41.5	39.9	32.6
Employed part or full time	58.5	60.1	67.4
Ever met a new partner at the site			
Yes	5.6	28.6	62.8
No	94.4	71.4	37.2
Frequency of attendance at site			
Daily	23.9	19.1	29.0
4-6 times per week	14.6	16.9	14.5
2-3 times per week	36.6	36.5	33.8
Weekly or less	25.0	27.5	22.8
No. of sites visited on day of interview			
1 site	62.3	60.3	33.1
2 sites	23.1	25.9	24.8
3+ sites	14.6	13.8	42.1
Ever used a condom			
Yes	44.0	77.8	76.6
No	56.0	22.2	23.5
Ever exposed to HIV/AIDS prevention			
Yes	47.8	53.4	70.3
No	52.2	46.6	29.7
Has condom on person at time of interview			
Yes	3.0	16.4	23.5
No	97.0	83.6	76.6

Table 5.2. Percent distribution of selected demographic and behavioral characteristics among female respondents by contact group

	Low (n=195) (%)	Moderate (n=102) (%)	Elevated (n=92) (%)
Age Group			
18-19	11.3	19.5	18.5
20-24	21.0	27.4	37.0
25-29	17.4	32.7	22.2
30-34	18.5	11.5	11.1
35-39	9.2	3.5	4.9
40+	22.6	5.3	6.2
Years educated			
Primary or none	26.2	8.0	9.9
Some/completed secondary	66.2	83.2	79.0
Some/completed tertiary	7.7	8.9	11.1
Years lived in study area			
2 or more years	82.6	77.0	79.0
0-1 year	9.7	6.2	4.9
Not a resident	7.7	16.8	16.1
Employment status			
Not employed	64.4	61.1	63.0
Employed part or full time	35.6	38.9	37.0
Ever met a new partner at the site			
Yes	3.6	28.3	69.1
No	96.4	71.7	30.9
Frequency of attendance at site			
Daily	14.9	18.6	23.5
4-6 times per week	11.8	11.5	11.1
2-3 times per week	39.0	37.2	42.0
Weekly or less	34.4	32.7	23.5
No. of sites visit on day of interview			
1 site	71.8	58.4	42.0
2 sites	19.5	22.1	27.2
3+ sites	8.7	19.5	30.9
Ever used a condom			
Yes	44.1	77.9	77.8
No	55.9	22.1	22.2
Ever exposed to HIV/AIDS prevention			
Yes	51.3	61.1	70.4
No	48.7	38.9	29.6
Has condom on person at time of interview			
Yes	4.1	15.0	18.5
No	95.9	85.0	81.5

Appendix 6 – Variables Considered for Backwards Model Selection

Table 6.1. Variables considered for backwards model selection

Variable	Description
INDIVAGE	Age categorized 1=18-29 years 2=Greater than or equal to 30 years
INDIVEDUC	Education 1=Some/completed tertiary 2=Some/completed secondary 3=None some primary
INDIVEMPLOY	Employment status 1=Employed part or full time 2=Unemployed
NEWRES	Years living in HTA 1=Less than 2 or from outside HTA 2=2+ years
INDIVSITES	Number of sites visited day of interview 1=3+ sites 2=2 sites 3=1 site
KEYNUMCAT	No. of Community informants that reported the site 1=>10 community informants 2=3-10 community informants
ALCOHOL	Alcohol served at site 0=No 1=Yes
SITESIZE	Size of site 1=Number of people >100 2=Number of people between 30-100 3=Number of people <30
ALCOHOL * SITESIZE	Alcohol by size of site interaction

Appendix 7 – Model Selection Elimination Process

Table 7.1. Results of backwards elimination for male respondents

	Variable	DF	ChiSq	p-value	Action Taken
Step 1					
1	Age of individual respondent	1	5.1	0.02	Removed interaction term
2	Education of individual respondent	2	3.2	0.21	
3	Employment status	1	2.2	0.13	
4	New resident	1	2.6	0.11	
5	No. of sites attend on the day of the interview	2	4.6	0.10	
6	Number of community informants report site	2	9.3	0.01	
7	Alcohol served at the site	1	1.3	0.25	
8	Size of the site	1	0.7	0.39	
9	Alcohol * Size of site interaction	1	0.1	0.75	
Step 2					
1	Age of individual respondent	1	5.1	0.02	Removed Education
2	Education of individual respondent	2	3.2	0.21	
3	Employment status	1	2.3	0.13	
4	New resident	1	2.6	0.11	
5	No. of sites attend on the day of the interview	2	4.6	0.10	
6	Number of community informants report site	2	8.7	0.01	
7	Alcohol served at the site	1	5.9	0.02	
8	Size of the site	1	3.9	0.05	
Step 3					
1	Age of individual respondent	1	5.8	0.02	Keep all remaining variables
2	Employment status	1	2.7	0.10	
3	New resident	1	2.1	0.15	
4	No. of sites attend on the day of the interview	2	4.7	0.09	
5	Number of community informants report site	2	8.8	0.01	
6	Alcohol served at the site	1	6.5	0.01	
7	Size of the site	1	3.7	0.05	

Table 7.2. Results of backwards elimination for female respondents

	Variable	DF	ChiSq	p-value	Action Taken
Step 1					
1	Age of individual respondent	1	16.9	<.0001	Remove employment status
2	Education of individual respondent	2	5.2	0.07	
3	Employment status	1	0.1	0.71	
4	New resident	1	2.0	0.16	
5	No. of sites attend on the day of the interview	2	12.9	0.00	
6	Number of community informants report site	2	2.0	0.37	
7	Alcohol served at the site	1	1.4	0.23	
8	Size of the site	1	1.0	0.33	
Step 2					
1	Age of individual respondent	1	17.9	<.0001	Remove number of community informants
2	Education of individual respondent	2	5.2	0.07	
3	New resident	1	2.0	0.16	
4	No. of sites attend on the day of the interview	2	11.9	0.00	
5	Number of community informants report site	2	1.9	0.38	
6	Alcohol served at the site	1	1.4	0.24	
7	Size of the site	1	0.9	0.33	
Step 3					
1	Age of individual respondent	1	18.6	<.0001	Remove size of site
2	Education of individual respondent	2	6.2	0.05	
3	New resident	1	2.9	0.09	
4	No. of sites attend on the day of the interview	2	12.1	0.00	
5	Alcohol served at the site	1	0.9	0.35	
6	Size of the site	1	0.6	0.46	
Step 4					
1	Age of individual respondent	1	18.1	<.0001	Remove alcohol served on site
2	Education of individual respondent	2	6.3	0.04	
3	New resident	1	2.5	0.11	
4	No. of sites attend on the day of the interview	2	11.8	0.00	
5	Alcohol served at the site	1	0.7	0.39	
Step 5					
1	Age of individual respondent	1	18.7	<.0001	Keep all remaining variables
2	Education of individual respondent	2	6.3	0.04	
3	New resident	1	2.7	0.10	
4	No. of sites attend on the day of the interview	2	11.4	0.00	