

HIV/AIDS and its effect on Commercial Sex Worker (CSW)

*Dr. Uday Kumar Ujjwal

Research Scholar, Patna University, Bihar (India)

ARTICLE DETAILS

Article History

Published Online: 02 June 2018

Keywords

AIDS, HIV, CSW, Sex, Behavioral Change, Social menace

Corresponding Author

Email: udayujjwal[at]gmail.com

ABSTRACT

A notion that puts the sex workers in comparison to Ganga has always prevailed in our society. It is a common belief that just like Ganga, the sex workers or prostitutes also drench themselves into the sins of others and make them pure. Now that HIV or AIDS has made its way into India it compels us to rethink our presumptions and ask an important and relevant question- are these sex workers really comparable to Ganga which washes away all the sins of a person and leaves him pure as gold or are they more like Vaitarani river where the uninfected diver if comes out uninfected he is lucky, otherwise he becomes the one who has to face the wrath.

1. Introduction

AIDS (Acquired Immuno Deficiency Syndrom) is an incurable disease which occurs by the entrance of HIV (human immuno efficiency virus) into the human body. HIV /AIDS causing virus was first recognized in 1981 in America. In India it was found in a few sex workers in Chennai in the year 1986. The numbers of cases have been going up at a very fast rate. As per the latest data of 2004, the total number of cases registered worldwide has crossed four hundred thirty million out of which fifty one lakh cases have been registered in India. The first case in Bihar was found in the year 1992 and at present there are 5765 people suffering from the disease in the state.

After entering the human body, HIV attacks the white blood cells. This causes a gradual decline in the immunity of the body and in the end it is completely depleted. This virus causes such a decline in the immunity of the body over a period of 3-12 years that it is unable to resist itself against attacks from other disease causing virus, bacteria or fungus. Then the patient starts showing different kind of symptoms like loss of weight up to 10 percent, continuous fever or cough which remains for more than a month, pimples and blisters in different parts of the body, diarrhoea, jaundice and ulcer etc. This stage is known as AIDS.

HIV remains alive and active in the fluids like semen, fluids discharged from female genitalia and blood. This virus is transferred from one human to another in four major ways. These are as follows:

- 1) Unprotected sex
- 2) Use of infected needle or syringe
- 3) Transfer or transfusion of infected blood
- 4) To the foetus from infected parents.

A close study of infected persons or the factors of infections in Bihar/India/World will reveal that the maximum number of cases that is 80-90 percent is due to unprotected sex. Then comes the number of infected persons due to the use of infected syringe with 5-10%. Next comes the reason of infected blood transfusion which is 3-5% and the total percentage of

infection being carried to the foetus from the parents is only 0.1 percent.

When an infected man or woman has intercourse without condom or protection, then it is known as unprotected sex. This causes the semen and the female discharge to mix together which in turn results in the transfer of the in growing HIV from one person to another. This can be restricted by the use of condom. Since unprotected case is the largest factor in the spread of Aids, that is 80-90 percent cases are due to unprotected sex, therefore it becomes necessary to discuss the role of female sex workers who offer sex for money.

Female sex workers or prostitutes have existed in our society since ancient times. Be it sat yuga, dwapar yuga, treta yuga, or the present kala yuga. A notion that puts the sex workers in comparison to Ganga has always prevailed in our society. It is a common belief that just like Ganga, the sex workers or prostitutes also drench themselves into the sins of others and make them pure. Now that HIV or AIDS has made its way into India it compels us to rethink our presumptions and ask an important and relevant question- are these sex workers really comparable to Ganga which washes away all the sins of a person and leaves him pure as gold or are they more like Vaitarani river where the uninfected diver if comes out uninfected he is lucky, otherwise he becomes the one who has to face the wrath. Professional sex workers offer their body to anybody because it brings them money which enables her to provide for herself and those dependent upon her. Most of the female sex workers live a very substandard social and economic life. Moist and smelly residential arrangements, no or minimal hygiene, lack of clean or washed cloths, nutrition deficient food habits, lack of care, no discussions of ones own desires and wishes etc are the conditions that all most every female sex worker has to face.

When 3-15 persons have intercourse with a sex worker in these conditions then the chances of spreading of the virus also rises. Due to their physical built and social status a woman is more prone to be infected with this virus as compared to a man. An infected male has very high chances of infecting a female

sex worker when they come in contact. Once she gets infected she will keep transferring this virus to 3-15 persons everyday till she embraces death due to AIDS. Tata institute of social sciences, Mumbai had conducted a study on the vast spread of prostitution across India. It reveals an astonishing figure that around twenty lakh prostitutes reside in 817 colonies alongwith their fifty lakh kids. Be it Sonagachi in Kolkata, Sadanand Marg in New Delhi, Kamatipura in Mumbai, Chaturbhuj sthan in Muzaffarpur, Gulab bagh in pune or Shraavan Bazaar in Munger in the state of Bihar, where these prostitutes reside and prostitution is carried without restraint. These are like those factories which carries on large scale production of HIV. Apart from them there are prostitutes in every nook and corner of every district of the country who does the retail distribution of HIV among the common public as an unaware man pays to have unprotected sex with them and bring back AIDS as a gift.

There is another thing that is of great importance that should be noted here. A person suffering from a sexual disease is 10 times more susceptible to let it get infected from HIV or AIDS and since the female sex workers who trade their body in exchange for money are so busy doing so, that if they catch any sexual disease, they can't find the time to get themselves cured. Hence the threat of AIDS among these prostitutes who suffer from sexual diseases is pretty intense and it strengthens the chances of spreading of the virus to their customers whom they come in contact with.

AIDS has become an epidemic. It is affecting our society drastically. Social turmoil due to this disease will be quite evident. Social inequality will gain space. At acts of sex related violence will see a sharp rise. More and more families will break apart. Close attachments will be shattered. Even the economic conditions and structure of society is bound to take a blow because if HIV/AIDS keeps on spreading breaking all hell loose on people at this alarming rate then very soon the production will decrease and growth rate will go down. This will have an adverse effect on the growth of the nation and national income and AIDS will keep bringing on hits to the society.

Bihar might not have witnessed the rate at which AIDS or HIV has spread across the nation or world, but due to prevalent illiteracy, poverty, high rate of interstate and international outward migration it won't be long before Bihar is put under the state with high prevalence from low prevalence. It is therefore very important to analyze the real factors and work towards its prevention. It was only since last decade that Aids has taken the top spot in the list of prevailing disease. Due to its widespread nature is has not only drawing the attention of doctors but also economists social workers and psychologists.

2. Study procedure

The data of spread of AIDS in Bihar has been acquired from the secondary source, Bihar State AIDS Control committee. Whereas to study the role of female sex workers and how does it affect them, hundred such sex workers were chosen each from Muzaffarpur and Munger districts in Bihar and interviewed for data collection on the basis of questionnaire. Apart from this individual studies were also carried on in different places of Bihar with 2 individuals each from these places. This study was done keeping in mind the state of infection in these sex workers.

3. Analysis and results

Spread of HIV/AIDS in Bihar: A massive dynamic project was carried out in thirty districts of Bihar in 2005 under the name MAT. In a span of 40 days of MAT-I and MAT-II total nine hundred and fifteen such cases were recognized.

In the first stage of this mobile awareness program, total one lakh fifty seven thousand and fifty four people were given consultation and one lakh fifteen thousand five hundred sixty five people voluntarily agreed for a blood test. Seven hundred and two people were found to be HIV positive in blood test.

Second awareness program was also carried out by Bihar State AIDS Control Committee. It was attended by fifty three thousand six hundred sixty four people and out of thirty nine thousand six hundred and forty nine people that appeared for blood test, two hundred and fourteen were found positive. Two hundred and twenty three people were found to be positive in the year 2001, out of which

161 were men and the remaining were women. This means that 69 percent men and 31 percent women were tested positive in 2001. Whereas in 2002, 887 people were found to be HIV positive. 654 new cases were registered during one year. If we look at it in terms of percentage, it comes out to 280 percent. This number was 1159 in 2003. The percentage of women affected had become stable at 34 percent. Men were also stagnant at 66 percent. But one of the definitive lines of this game of data analysis appeared in the year 2005. When the total number of infected persons till April 2005 and that from May 2005 to Nov 2006. The total number of infected persons over a span of 5 years and that in one and half years was almost same. 2606 men and 1320 women i.e 3926 persons were found to be HIV positive in these five years whereas during the span of later one and half years the number of men and women was 205p and 1374 respectively i.e total number of persons was 3424.

Out of the total number of persons found out to be HIV positive, 54 percent were recognised in the later one and half year itself. The people in the age group of 15 to 49 are getting infected most. 6562 people out 7360 recognised cases of HIV positive persons fall in this category. This means that 89 percent people from the productive age group ar the ones who are getting affected most.

The maximum spread of HIV or AIDS is within the age group of 25 to 37 years. 4615 cases out of 7350 total number of infected persons falls under this age group. Another important point to be noted here is that our younger generation in the age group of 20 to 29 years are being affected massively by this disease. A total number of 2265 cases have been registered that come under this age group. this means that this age group of 20 to 29 years contribute 31% of total number of patients which is very alarming.

Out of 7028 infected people 6128 get infected due to hetro sexual intercourses while 36 people get infected due to homo sexual activities. in other words we can say that 88% cases have spread due to unprotected sexual activities. Out of this 87 percent cases have been found out where the reason of

infection is unprotected heterosexual activities. This means that only 1% cases in Bihar can be adhered to homosexual activities.

It's not that homosexual acts are uncommon in Bihar. There are high in Bihar although the number is quite low. The second largest medium of the spread of this virus is from infected parents to their children and it accounts for 5.25% cases. 5.72% cases of infected children below the age of 14 years actually get it from their parents. The total number of infected persons getting this infection by blood transfusion or the use of needle or syringe is 66 and 69 that is 98 and 99% respectively.

The spread of HIV or AIDS due to blood transfusion or the use of infected needles is quite low in Bihar where this number stands at 6.68 and 7.79% respectively in the Pan India context. This is because Bihar is an extremely backward state and due to the lack of Technology blood transfusions are quite rare in the state. Even if a patient needs a blood transfusion it is donated by one of his relatives where it is known that the person is not infected by HIV or AIDS. The number of persons doing drugs by needle is also quite low in Bihar. This is the reason why in comparison to India the total number of AIDS or HIV infected patients due to the use of infected needles or syringe is quite low in Bihar. While the vague and other reasons account for 4.38% of total number of cases which is quite high in comparison to that are the causes due to blood transfusion and in use of infected needles and syringe. 6 most infected districts that were recognised in MAT-I MAT-II are Sitamarhi, East Champaran, West Champaran, Khatwa, Madhubani and Muzaffarpur. The rate of infection in these districts are 1.34 1.32 0.74 2.65 3.14 and 0.65 respectively.

According to the mapping done by Dr. Sudhir Kumar, A.N. Sinha Institute of social sciences the above-mentioned districts have quite a high number of female sex workers. There are 4236 sex workers in East Champaran, 1604 in West Champaran, 1025 in Muzaffarpur, 453 in Madhubani, 365 in Khatwa and 205 in Sitamarhi.

The Indian government studies the spread out of AIDS or HIV by sentinel surveillance. Sentinel services were also started in Bihar in the year 1998. The prevailing rate of STD and HIV in 1998 was 1.19 in 1999 it was 1.53 in the year 2008 was 1.77 in 2001 it was 2.71 in 2002 it was 2.75 in 2003 it was 2.40 in 2004 it was 1.31 and in 2005 it was 0.42. The prevailing rate of this infection in pregnant women according to sentinel surveillance was 0.13 in 1999 0.22 in the year 2000 0.11 in the year 2001 0.29 in the year 2000 20.11 in the year 2003 0.22 in the year 2004 for the year 2005 it was 0.38. This work test was conducted in the population the results were astonishing. If the rate of infection in general population was 0.60 it is not astonishing that this sentinel surveillance is not as efficient tool.

AIDS or HIV is spreading at a very fast pace in the state of Bihar. Although the exact rate of expansion and spread out is yet to test to determine but the mobile awareness and inspection programs have shown away and made it quite clear that this HIV or AIDS virus can drop bombshells anytime in the state of Bihar and at that time it will be out of control for everybody.

4. Female sex workers

If unprotected sex is stopped completely the chances of a person being infected by HIV or AIDS virus goes down by 90%. But the real problem here is how to stop unprotected sex.

At this point it is important to discuss the places where unprotected sex takes place and also the conditions under which one is compelled to have unprotected sex. A test was conducted on the sex workers in Chaturbhuj Sthan in Muzaffarpur and Shraavan Bazar in Munger. Based on different social and individual parameters like the kind of sex workers literacy age social status economic status marital status the age in which they entered in this business age of marriage total time spent in this business the time span of business number of everyday customers types of customers the places where they meet the customers how they get new customers places where they do their business the reasons behind doing this et cetera a detailed data compilation was done.

5. Types of sex workers

424 Random selection of 200 female sex workers 114 showed the signs of being mobile or Nomadic in nature. This means that 57% sex workers careers of HIV or AIDS virus. Search mobile honour magic women do not have any permanent address. They might be in Muzaffarpur today Mumbai yesterday and in Arab countries tomorrow.

At 16.5% the next category is of those female sex workers who do their business in red light areas. Since they stay at one place it is easier to spread this virus amongst them. Chaturbhuj Sthan in Muzaffarpur, Shraavan Bazaar in Munger one of these primary red light areas. The prostitutes found near the roadside Dhaba and hotels I also quite high in numbers. 2% of the sex worker working are found in hotels.

Around 15% of the female sex workers were found to operate from their houses which shows that Such women do this business of sex in our neighborhood in great numbers.

There is another new trend which is occurred in the recent days. Cyber cafes and beauty parlours have sprung up like mushrooms in almost every City and this has become a hub of prostitution.

A survey was conducted on 200 sex workers in Chittoor district in Andhra Pradesh. In that survey it was found out that around 49% of the sex workers were mobile or Nomadic in nature and they were always on the move where is in this research this percentage is 57.

6. Literacy

Education is a social tool that enables all round development of an individual in almost every real life related matter. The female sex workers of Bihar are still lagging behind the field of education. Around 78% of these women cannot even read or write single letters. 16% of such women were found to have an education up to primary level while highly educated female sex workers counted only for 4 percentage.

7. Age

Age is an important factor that determines the physical growth of an individual. The sex organs are completely developed by the age of 15. Although there might be a few years up or down depending upon the lifestyle food style and genetic reasons. Pre marital sex why the age of 15 years is quite common in America and Europe but as per the Indian culture and Customs and the prevailing thoughts about virginity premarital sex is prohibited. To selling and buying of girls. Understand the life of a sex worker it is important to know the age she entered the sex business and the age in which she gets married.

The maximum number of women tour of 26 to 30 years of age as per the research. It is very evident that most of the women's involved in sex business are measured as per their age. Percentage of women were found to be below the age of 13 years which is evident to the fact that the number of Pre adolescent girls in this business is quite low. 84% of women involved in sex business belong to the category of 21 to 35 years of age. Most of the sex workers are involved in these activities during their age of productivity.

8. Social status

The number of women from scheduled caste and minority groups in the field of prostitution is quite high. Scheduled caste accounts for 48% while minority groups account for 26.5 percentage of situation. 19% of women belong to backward classes. The number of Christian and 6 women was quite low this could also be because their population in Bihar is very low.

The study conducted by Soumya jhulu in Hyderabad in 1998 found that the total number of sex workers belonging to a high class or more than 50% but for Bihar more than 60% of sex workers come from lower and backward classes. This could also be due to the fact that in Bihar prostitution is done to provide for food in lieu of hi aspirations. The upper class is still shy while the lower class is compelled to enter into prostitution.

9. Economic status

Around 62% of women who are involved in prostitution are still very poor. Therefore it can be believed the poverty is one of the major driving forces for prostitution. Prostitutes with high income account only for. Lower middle income prostitutes account for 23 and 8% respectively. Poverty is one of the main reasons for the spread of HIV or AIDS virus because poverty lead to compulsion and compulsion pushes the women into prostitution.

10. Marital status

Around 84% of women associated with prostitution where found to be the ones who entered this business after marriage. Only 12% prostitutes were found and married while widowed or those who have left by their husbands and the divorced were 2 1 and 1% respectively.

Marital status plays a very important role in sexual activities. Most of the women enter into the field of prostitution after marriage. Research conducted in Kamathipura found out that 17% of prostitutes were pushed into prostitution by their own husband because such men do not want to go to work and

Labour hard and want to fulfill their desires by easy money. 9% of women where those who had left their husbands out of misery or anger and reached in such areas.

11. Age of entrance into Prostitution

only 6% of women were such those who entered this business in the age of less than 15 years while 75% enter prostitution in the age of 15 to 24 years. In flesh trade the demand for the women of his this age group is quite high. Only 2% women versus those who entered prostitution after the age of 30 because after this age there demand keeps on decreasing.

12. Age of marriage

The minimum age for marriage of girls as this determined by the government of India is 18 years but around 65% of women involved in prostitution get married before this age. 28.57 percent of prostitutes were married in the age group of 18 to 21 while only 7.15% of prostitutes was those who were married after 22.

13. Total time span of business

Most of the women involving prostitution have been associated with this business for less than 5 years although 34% women wear such who had completed more than 5 years in this business.

It is very clear from the data that in the field of flesh trade the span of business is very low.

14. Time of business

64% sex workers do their business during the evenings. Early this time slot is between 4 to 8 p.m. 16% of prostitutes are ready to have sex anytime. The day workers account for 12% why 8% was such who had no fixed timings.

15. Number of everyday customer

Around 29% of prostitutes entertain 4 to 5 customers every day. 14% of prostitutes entertain more than 10 customers every day. The research also found out a prostitute who had had maximum 17 customers in a day. The average time spent for customer is around 2 minutes to 35 to 40 minutes. In an individual screening Poonam told us that some customers would get off even before doing anything while there was some who kept on ravaging for a long time.

16. Types of customers

400 out of 2000 customers belong to the business class. The so-called white collar people also visit these Brothels the amount for almost 13% of the total customers. Students also come to them while drivers and cleaners for a big group of their customers. People from almost every section of the society are included in the list of the customers. Places to find: the prostitutes look for their customers in the market which is very crowded and even their customers look for the prostitutes in these places. Brothel is another place which is frequented by the customers. They are also found at railway stations religious places parts in fields. They are always in search of new

customers and the customers are always eager to have them. A prostitute pleases almost everything in order to get a customer. A large portion of the earnings go into buying food and makeup.

Another subject Chanda tells us that when she was about to have sex for the first time he was given new saree, jewellery, powder, lipstick perfume et cetera and she was made to look like a bride. But after that day she had to get ready like a new bride everyday so that the customers would/ could like her and apart from her money she might also get some tips.

17. The modes of getting the customers

Most of the prostitutes find their customers on their own. Around 62% of prostitutes are such who find their customers on their own while 12% do this with the help of some broker 20% of prostitutes get their customers through their earlier customers. Now they have also started using Technology for this and mobile phone has helped them the most in doing so.

18. Places where they have sex

Most of the prostitutes prefer to go to the places of likings of their customers because doing this lets them earn more money. Is also a risk that comes with this that they are told to have sex with one person while reaching up on the place they are forced to have sex with 34 percent of prostitutes prefer to have sex in the brothel are at their home.

19. Knowledge about Sex

186 out of 200 female sex workers have known about sex. 94% of female sex worker has also known about AIDS. But the difference between HIV and AIDS only 51 % had tell about this. When they asked about four ways of HIV/AIDS transmission only 50% had known about this.

Does mosquito bite spreads AIDS or HIV virus Almost 90% of people have answered this in yes in an answer to this question and shown that there is a confusion going on in their mind which needs to be cleared?

Should an AIDS patient be thrown out of the house?

70% people said yes in an answer to this question to show the confusions that prevail in their Minds and this also needs to be cleared. It gives rise to a sense of inequality in the society and creates a clear passage for the spread of HIV or AIDS virus.

Use of condoms can help in preventing from AIDS or HIV.

75% of the prostitute well knowing this fact. Do their customers allow them to do so? Found that only 10% of customers agreed to the use of condom before having sex while 90% do it without any protection and the prostitute in question has to agree to every demand of their customer so that she does not lose him. Doing so she not only puts herself but also the entire society in the line of HIV or AIDS but as straight forward it can be for prostitutes like Poonam who say that I do not allow any of my customers even to touch me without putting on a condom. If I leave I will learn much more but if I die then what use is this money for?

If a prostitute is offered some other respected job will she leave this business?

Apart from a few exceptions almost everybody answer in a unanimous yes.

What was surprising hear that even though they wanted to leave this flesh trade but when the prostitutes in Muzaffarpur and Munger or try to make skillful their return to their own business after 2 to 4 days of work. According to Poonam " if I have to earn rupees 1200 per day and put my whole body to labour then why not earn 1200 per day when I don't have to do anything and I just have to give my body to some monster".

As far as behavioral changes concerned it does not happen in one day. According to the study it was found that the prostitutes acquire a business attitude over a period of time. They do unprotected sex, drinking and doing other kinds of drugs. They start talking in abusive languages and get cut from mainstream. This also enhances the chances of spread of AIDS or HIV virus in the society.

20. Conclusion

If the spread of HIV or AIDS virus has to be prevented then people should be made aware of the medium and reasons for its spread. The knowledge about sexually transmitted disease and its cure should be given to all those who need it. Government should ensure that everybody gets clean blood and new disposable syringe and needles. Banning prostitutes will not prevent unprotected sex. What should be done is that this business should be given a legal framework and proper reforms should be introduced also having protected sex should be encouraged. Marital relations should be strengthened and proper counseling and guidance should be provided to those who go through a tough time in their marriage. Child marriage has to be dealt with a very strong hand if we want to stop it and the persons involved in trafficking of women and girls should be lab and punished in the strictest manners possible. Every person must be educated unemployed so that illiteracy and unemployment and poverty which compel women to enter into prostitution are done away with. It should be ensured that everybody has an access to good quality condoms and apart from these new modes of entertainment should also be look for. There should be a behavioral change that needs to be encouraged among the prostitutes. They should be taught about morality and moral education. Their children should be taught well and it is through them that we can reach their hearts and encourage them for a behavioral change. Formation of self help groups will also help a lot. A good behavior and change can also be encouraged through this self help group. Small and educating visual stories can also help in changing their behavior. At target oriented interference in the lives of female sex workers with an attitude of imparting moral values and education in their life should be encouraged.

This job should be handed over to them only so that they could prepare their society for this fight against AIDS or HIV virus. People should also be made aware about HIV or AIDS and their behavior should also be changed by making them feel that AIDS is not an individual disease but a product of Social menace.

The people suffering from AIDS and HIV virus should be given confidence and protection and respect so that they get some treatment. It would help prevent this disease from spreading across the society and also result in creating factors that could actually stop this spread out. Some prostitutes could

be trained and motivated to go among people and talk to them about this disease. Behavior change in the prostitutes of the society is of utmost necessity in order to prevent the spread of HIV or AIDS virus.

References

1. Anil Kumar K., Female sex worker and their client in Mumbai Context of risky sexual Behaviour, Tata Institute of Social Sciences, Pg 71-77
2. Indu Prakash Singh, STD/HIV Intervention Programme-The Sonagachi Model, Health for the millions, 1998 Pg-24
3. Gudde and Hatt, Method in Social Research, Pg-133
4. Chandiramani R, Survey on Sex and Reproductive Health, 1998, Pg-111-117
5. Chamin, Experimental Design in Sociological Research, Pg-128
6. Tamashira H, Maskil W & Emmanuel et al, Reducing the caste of antibody testing, Lancet.1993 Pg 342-347
7. Nirmalamurti, Vasani Akhila, Study on sex and behaviour of young in India, 2001, Pg 212-225
8. Dr Sudhir Kumar, Study Mapping of female sex worker, Migrant Labour and Truckers in Bihar, AN Sinha Institute, 2005
9. Peltó P J, A Combined Study on Sex and Worker in Rajasthan, 1999, Pg-117-132
10. Maane and Maitra S A, AIDS Prevention for Socio Cultural Context in India, TISS, Mumbai, 1992 Pg 112-117
11. Yamul Das S, Deshmukh R, A Study on HIV/AIDS on Sex Worker in Central Mumbai, Venerology, 2003, Pg 184-191
12. Rodrigues J J, Mahendal S, Risk factor on HIV infections in people attending clinic for sexually transmitted disease in India, VMV1995, Pg 311
13. Ranjan Roy, AIDS Bomb ticking in Rajasthan Village, Times of India, New Delhi, 26 March 1994
14. Venkatraman, Extent and Speed of spread of HIV infection in India through the commercial Sex Worker, A perspective tropical medicine and International Health 2001, Pg 1040-61
15. Sah M P, Prostitution, Sex Work and Violence discursive and Political Context for five text on paid Sex 1987 2001 Gender, 2004
16. Sidharth Dubey, First Frame: AIDS Sex and Lies, Harper Collins, New Delhi, 2000, Pg 67-81
17. Sabina Indrajit, No to Sex Education in HIV/AIDS, Times of India, New Delhi, 21 Sep 1994
18. Editorial Board, AIDS Epidemic Update, UN AIDS and World Health Organisation December 1998, Pg 72-77