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Mapping transactional sex on the Northern Corridor highway in Kenya

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Abstract

Even in generalized HIV/AIDS epidemics, vulnerable populations such as sex workers and truckers require special attention in programming. Combining a number of elicitation methods, centred on Geographical Information Systems (GIS) mapping, the Kenyan section of the Northern Corridor highway was studied to characterize the 'hot spots' where transactional sex is concentrated and to provide estimates of numbers of truckers and sex workers and the volumes of transactional sex taking place on the highway. An average of 2400 trucks park overnight at the 39 hot spots identified. These spots have an estimated sex worker population of 5600 women. Analysis of 403 sex worker diaries shows an average of 13.6 different clients and 54.2 sex acts in a month. Condom use is 69% in liaisons with regular clients and 90% with casual clients. The use of GIS is demonstrated at regional and local scales. The 'bridge population' of clients of sex workers, containing a wide rage of occupations, supports the concept of programming for 'vulnerable places' as well as vulnerable groups.

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Introduction

Even in generalized HIV and AIDS epidemics, responses targeting populations particularly vulnerable to HIV and AIDS have been shown to be essential (Pisani et al., 2003). Female sex workers (FSWs) and truckers are two such groups.

Programmes throughout sub-Saharan Africa have been developed to respond to the need to prevent and mitigate the effects of HIV and AIDS

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among FSWs and their clients and also among transport workers. Yet, despite 20 years of the epidemic, in the East Africa region, only localized programmes exist to cater for the needs of highway-based sex workers and their clients. The sex workers and their consorts have been studied, (Voeten et al., 2002; Hawken et al., 2002; Ghani and Aral, 2005) but largely ignored by national programmes.

The spatial dimension to the HIV and AIDS epidemic has been prominent, especially in the study of diffusion patterns and the role of mobility and migration (e.g., Gould, 1993, 2004; Amat-Roze, 1993; Killewo et al., 1994). At a more micro-scale, the common observation of transactional sex having

specific geographical locations, or hot spots, led Weir and her colleagues to develop the priorities for local AIDS control efforts (PLACE) methodology in South Africa (Weir et al., 2002, 2003) while Kruse et al. (2003) mapped sex work sites in Diego Suarez, Madagascar. Both sets of researchers used conventional mapping techniques.

Information Technology (IT) skills, including Geographical Information Systems (GIS), are spreading quickly among the young professionals in Africa. Applications of GIS to HIV and AIDS in Africa have become much more widespread in recent years (Tanser and le Sueur, 2002). Initially the domain of academic research, there is increasing realization of the potential for basic GIS to be applied as a tool for health planning and management. Computerization of Government health and population information systems is progressing, albeit slowly, with census data available in some countries in a GIS format.

HIV and AIDS in Kenya

The earliest confirmed case of HIV in Kenya was documented in 1984 (Obel et al., 1984). HIV surveillance has been conducted since 1990, using samples of women attending ante-natal clinics. Using standard UNAIDS methodology, the epidemic curve appears to have peaked by the late 1990s and overall rates have declined in 2002 and 2003 to a level of around 6.7% (Central Bureau of Statistics Kenya, Ministry of Health Kenya, ORC Macro, 2004; Government of Kenya, National AIDS Control Council, 2005a, b) . The epidemic is a general one, with the large majority of infections being the result of unprotected heterosexual contact (UNAIDS, 2004).

The early work on the epidemiology of HIV and AIDS in Kenya recorded extremely high rates of HIV and other sexually-transmitted infections (STIs) among sex workers (34–75%) and truckers (26%, 27%), (Plummer et al., 1991; Bwayo et al., 1994; Mbugua et al., 1995), and more recent work has reaffirmed the continuing high prevalence rates among these groups (Morison et al., 2001; Baeten et al., 2005).

HIV and transport

In East Africa, long-distance truckers were very early on in the epidemic identified with HIV and STIs. The early surveillance rounds showed a strong correlation between HIV prevalence and locations along the Northern Corridor highway between Mombasa and the Ugandan border towns. As the epidemic grew, HIV diffused outwards from its original focus along the main road arteries, firstly into the main towns, then, later, to the more rural parts (NASCOP/Ministry of Health, Kenya, 2005). For numerous reasons, national policy did not specifically target transport workers beyond general advisories. The association between trucking and HIV and AIDS has been given a very high profile by writers and journalists: Dervla Murphy's (1993) "Trucking through the AIDS belt" highlight high-risk sexual behaviour among truckers in East Africa.

In early 2004, the Aids Control Unit (ACU) of the Ministry of Transport, Kenya, together with other stakeholders from the transport sector, commissioned a study on the response to HIV and AIDS in the transport sector which concluded that "The prevalence of HIV infection among employees in the transport sector and their irregular sexual partners has increased over the last 15 years, depending on their geographic location, up to 25% or more." (Government of Kenya, National AIDS Control Council and Ministry of Transport and Communication, 2004).

Mapping transactional sex on the highway

Under the guidance of the Kenya Government National AIDS Control Council (NACC) and the Ministry of Health's National AIDS and STD Control Programme (NASCOP), the Strengthening HIV/STD Control Project (the STD Project) carried out mapping of the main truck stops on the Northern Corridor route between Mombasa and Kampala. This route, linking the port city of Mombasa with the rest of Kenya, Uganda and the Great Lakes region, is the most important of the four East African transport corridors.

The overall purpose of the study was to measure the extent and volume of transactional sex related to transport on the trans-Africa highway between the main origin—destination points of Mombasa and Kampala. Embedded in this overall purpose, were several other objectives, including highlighting the roles of 'hot spots' in HIV transmission and the needs of vulnerable groups therein, the risk avoidance and health seeking practices of these groups, and demonstration of the use of GIS in visualization and analysis in the planning of responses.

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