TRAFFICKING AND HIV

MAHARASHTRA

(Need Assessment Study- based on Secondary Data)

Draft Report 2005

ASSESSING VULNERABILITIES FOR TRAFFICKING AND HIV/AIDS

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Princip	le Demographic Indicators 2001			
Sr.no.	Indicator	Gender	Maharastra	India
1.	Population (2001) Million		96.75	1027
		Male	50.33	531
		Female	46.42	496
2.	Decadal Growth Population %		22.57	21.34
3.	Children 0-6 year (million)		13.19	158
		Male	6.88	82
		Female	6.31	76
4.	Sex ratio -2001		922	933
5.	Child Sex ratio-2001		917	927
6.	Crude Birth rate 1998-99		21.1	26.1
7.	Crude death rate 1998099		7.5	8.7
		Male	8.2	9
		Female	6.7	8.3
8.	IMR (per 1000 live birth) 1999		48	70
		Male	48	70
		Female	49	71
9.	Life Expectancy - 2001	Male	65	62
		Female	68	65
10.	Literacy Level	Total	76.9	64.8
11.	GDM (Gender Development	(Hirway &	0.5596	0.4441
	Measures) Based on 30 variables	Mahadevia)		
		1996		

Source: Maharastra HDR 2002.

Introduction:

Maharashtra is one of the most developed states in India, with a total population of more than 96 million, which is 9.4 per cent of India's population. This makes Maharashtra the second most populated state after Uttar Pradesh among 28 major States. Of these, 11.09% are Scheduled Caste and 9.27% are Scheduled Tribe population. The female population in state stands at 46.42 million.

Maharashtra has consistently done well for itself in terms of economic growth. Economically, the importance of this state has been undisputable with the economic capital of India –Mumbai – being its capital. Its State Domestic Product is the second highest among all States despite the poor quality of its arable land, scanty rainfall in the interiors and a skewed spatial distribution of its resource endowments. In industrialisation too it ranks high and is constantly in race for further industrial investment with Gujarat. In terms of per capita income, it is only marginally lower than Punjab. The per capita GDP of Maharashtra was 60% higher than the national average and per capita income was 40% higher than the all India average in year 2001.

Poverty:

A major part of Maharashtra is poor in terms of income. There is a substantial incidence of poverty, statistical estimates for the State as a whole showing a decline in poverty over time but these are not corroborated by estimates of real consumption. Measured by quantities of cereal consumption and calorie intake, the population does not show any marked improvement. A large proportion of the rural and urban population is undernourished. The percentage of families below poverty line was 34.55 (Compare with national) while the Work participation rate was 39.28 percent (Comparison). Women constituted 35.97 of the work force (Comparison), but Child labour figures were also disturbing. According to a report by the Labour Ministry, 764,075 children were part of the workforce in 2001.

Sr. No	District	% of families below poverty line	Gender worker	Ratio of s 2001	Workers participation rate Census
		1997-98			1991
			Male	Female	Total
1	Mumbai (includes Mumbai suburban)	N.A	83.52	16.48	34.60
2	Thane	52.10	76.04	23.96	37.37
3	Raigad	28.67	63.07	36.93	39.46
4	Ratnagiri	36.70	51.98	48.02	37.29
5	Sindhudurg	37.26	55.04	44.96	38.27
6	Nashik	39.23	61.43	38.57	41.13
7	Dhule	50.44	60.18	39.82	39.63
8	Nandurbar	75.43	56.15	43.85	
9	Jalgaon	38.33	61.09	38.91	40.15
10	Ahmednagar	25.04	57.68	42.32	42.47
11	Pune	19.53	67.20	32.80	37.08
12	Satara	16.23	56.80	43.20	36.57
13	Sangli	14.16	59.58	40.42	36.87
14	Solapur	26.91	59.65	40.35	38.64
15	Kolhapur	17.16	60.46	39.54	39.13
16	Aurangabad	26.01	62.02	37.98	40.04
17	Jalna	27.17	56.59	43.41	43.96
18	Parbhani	30.83	58.20	41.80	42.05
19	Hingoli		55.31	44.69	
20	Beed	25.84	55.99	44.01	41.63
21	Nanded	29.30	58.59	41.41	39.76
22	Osmanabad	21.57	58.52	41.48	41.48
23	Latur	28.16	61.09	38.91	39.14
24	Buldhana	41.64	57.39	42.61	44.76
25	Akola	44.51	66.12	33.88	41.69
26	Washim	48.35	57.34	42.66	
27	Amaravati	51.28	64.63	35.37	40.36
28	Yavatmal	43.62	58.69	41.31	44.45
29	Wardha	44.42	61.82	38.18	42.21
30	Nagpur	34.32	70.01	29.99	35.53
31	Bhandara	51.60	55.22	44.77	45.79
32	Gondia		54.03	45.97	
33	Chandrapur	46.92	59.39	40.61	42.05
34	Gadchiroli	55.18	53.16	46.84	45.56
	Maharastra	34.55	64.03	35.97	39.28

Source: Census data.

Incidence of rural poverty increased between 1973–74 and 1977–78 and declined thereafter. At the all-India level, it declined till 1987–88, increased during 1993–94 and declined thereafter. Urban poverty has declined since 1973–74 in both Maharashtra and countrywide, with the difference that there was a marginal increase in Maharashtra between 1983 and 1987–88. Incidence of urban poverty in Maharashtra was less than the national average till the mid-80s. It has crossed the national average since then. With a pronounced decline in rural poverty and the predominant size of the rural sector, poverty in Maharashtra as a whole has declined since the mid-70s. However, it cannot be denied that distribution of the economic gains has not happened evenly, with some rich cities at one end of the income line and many districts at the other end of the income line. (Maharashtra Human Development Report, 2002)

Employment:

Maharashtra is characterized by high urban primacy, large scale inmigration, persistence of poverty, uneven development and spread of social and economic gains. The unemployment rate in rural and urban Maharashtra for instance is high and about two-thirds of the workforce is dependent on agriculture as a source of livelihood resulting in low levels of per capita income in rural areas. This constraint drove Maharashtra towards a path that led to pursuing growth options largely on the nonagricultural front. The record has been one where secondary and tertiary sectors have been the instruments of the growth process but not so with regard to absorption of a growing workforce. To make a difference, Maharashtra has to alleviate unemployment and poverty in the rural sector.

According to the Maharashtra Economic Development Council figures, in 1991, cultivators and agricultural labour accounted for 60 per cent of total workers in Maharashtra. Agriculture in the State is the laggard. Only 14.5 per cent of Maharashtra's net sown area is irrigated and it continues to be at the mercy of uncertain monsoons, which is either inadequate in precipitation or uneven in spread over the season, putting agriculture under tremendous stress. This renders agriculture vulnerable to droughts and the state in normal years is able to produce only 90% of the required food. As a result, the rural population is subject to a high degree of instability in incomes and levels of living. As a means to counter this income instability, more women twice in number than that of men work as marginal workers, seeking to supplement family incomes. This also signifies low gains from agriculture as well as individual efforts to contain the impact of poverty.

The agricultural census of 1991–92 placed the number of small farmers holding between one and two hectares of land at 27,27,587. On the other hand, the number of marginal farmers holding less than one hectare of land according to the same census, was 32,74,761. The number of persons engaged as agricultural labour, however, was higher than the total of the small and the marginal farmers: 83,13,223. And those who registered

themselves for work because of perceived risk of unemployment during that time of distress numbered 45,18,974 of whom 21,46,560 were women. These numbers underscore the profile of the large mass of people dependent on agriculture, instability of incomes and the extent of distress during droughts.

Urbanisation:

Maharashtra also has the country's second largest urban population, with about 43 persons out of every 100 living in towns and cities. This huge urban population accounts for 14.4 per cent of India's entire urban population. Cities like Mumbai and its satellites like Thane, Kalyan and Navi Mumbai are not the only urban regions though they are the major urban centres. Growing urbanisation is seen across the State, there being, by 2001, as many as 378 towns and cities. In 1961 this number was 266. During the same period, the urban population swelled by four times.

There are sharp variations in the levels of urbanisation, in terms of both numbers of cities and towns as well as populations contained therein. In Konkan division comprising Mumbai, Mumbai Suburban, Thane. Raigad. Ratnagiri and Sindhudurg, 72 per cent of the population is urban but almost all of it is in Mumbai, Mumbai Suburban and Thane. In Pune and Nagpur divisions, one-third of the population is urban. In Nashik—Nashik and Pune divisions, which are contiguous covering all of Western Maharashtra—and Amaravati divisions one-fourth of the population is urban. Nagpur and Amaravati divisions take in their sweep all of Vidarbha. However, it is only one-fifth in Aurangabad division, which encompasses all of Marathwada The Konkan region is the most urbanised region in Maharashtra with two districts, Mumbai and Mumbai Suburban, being 100 per cent urban and Thane district having 73 per cent urban population. Thus in Maharashtra, in the broad regional sense, Konkan is the most urbanised, Marathwada the least and Western Maharashtra is more urbanised than Vidarbha.

In Maharashtra, where urbanisation as a trend is strong and the capacity to provide affordable housing stock limited, slums are a reality. Mumbai is host to Asia's as well as India's biggest slum: Dharavi. It is a habitat as well as a place of enterprise, with absolute lack of amenities and overcrowding. As per the findings of the Census, 2001, Maharashtra has 10.6 million people in the slums, the largest among all States. The Census 2001 reported for the first time, the population living in notified slums in towns with population of more than 50,000. And the figures are disturbing: 31.7 per cent of the 33.6 million people in 62 towns and cities reported living in slums. Dharavi, is not the only Mumbai slum. Greater Mumbai has the most number of people living in slums. Nearly half of Greater Mumbai resides in them i.e., 49 per cent of the metropolis' total of 11.9 million, in sharp contrast to Delhi–19 per cent of its total population; Kolkata–33 per cent; Chennai–26 percent and Bangalore–8 per cent.

Not only Mumbai but all the other major ones are hosts to slums. Nagpur and Pune have between a half and three-quarter million people in slums which means a third of Nagpur and a fifth of Pune are consigned to living in slums. The other major towns have less than a million living in such conditions, the remarkable aspect being that a relatively newer city like Navi Mumbai having about the same population (0.14 million) in such conditions as are to be found in Nashik or Aurangabad, which are older cities.

Large scale urbanization had not brought the expected changes and modernization in the lives of people and geographical areas. While on one hand the large scale and wide spread urbanisation had put the urban population under constraints in several respect leading to preference for sons, early marriages and even teenage motherhood etc. the second generation migration from rural areas on the other hand had caused ruralisation of urban areas.

Migration:

Maharastra has a large migrant population. Urbanisation had attracted migrants, especially to Mumbai and other major cities. Nearly half the population in Mumbai, Thane, region around urban Nagpur and Pune division is of migrants. Migration both in and out the state is very high in comparison to other major states in country and. The 2001 census reports the number of in-migrants and out-migrants for Maharashtra, with the highest number of migrants coming from Uttar Pradesh, followed by its neighbouring states like Karnataka, Gujarat and Madhya Pradesh. It is also seen that most of the migrants from Maharashtra head towards Gujarat, followed by Madhya Pradesh and Karnataka.

An earlier study of labour mobility in Mumbai's manufacturing sector done in 1990 revealed that 57 per cent of migrants were from other districts of Maharashtra itself. Migrants from Uttar Pradesh formed one-third. Those from Karnataka formed 15 per cent of the sample not born in Maharashtra. Gujarat and Kerala contributed 12 per cent each. Ratnagiri and Sindhudurg accounted for 47 per cent of male and 68 per cent of female migrants in Mumbai born in other districts of Maharashtra. Sangli contributed 13 per cent, while the contribution of Raigad, Kolhapur and Satara was nine per cent each.

Interstate Migration (Out/In) Maharashtra

	Migration in Maharastra								
S.No.	States	Out Migration	In migration						
1.	Andhra Pradesh	1,61,000	3,56,900						
2.	Assam	1,300	8,600						
3.	Bihar	1,500	3,38,900						
4.	Gujarat	6,74,600	6,04,700						
5.	Haryana	20,500	39,900						
6.	Karnataka	2,69,500	8,83,600						
7.	Kerala	69,100	1,69,800						
8.	Madhya Pradesh	3,72,200	5,36,400						

9.	Orissa	47,600	1,00,800
10.	Punjab	17,400	40,000
11.	Rajasthan	85,000	2,96,500
12.	Tamil Nadu	90,000	3,75,100
13.	Uttar Pradesh	2,38,500	16,17,400
14.	West Bengal	24,000	1,64,000
	Total	21,56,100	59,16,500

NSS Report No. 470: migration in India 1999-2000

Among the Intra-State Migrants three divisions—Konkan, Pune and Nashik account for nine out of every 10 migrants from other districts of Maharashtra. Migrants from Marathwada division contribute barely five to six per cent to the stock of intra-State migrants while Vidarbha account for much less, one to two per cent of total migrants. Five districts, Ratnagiri, Sindhudurg, Satara, Pune and Raigad together account for a little over two-thirds of male and over three-fifths of female migrants who came to Mumbai from other districts of Maharashtra. Nearly one-third of urban migrants come to Mumbai from other districts of Maharashtra. Among the migrants to Mumbai from other districts of Maharashtra nearly half of the men and women are from the adjoining districts of Thane and Konkan, which includes the three districts Raigad, Ratnagiri and Sindhudurg. Almost one-third comes from Pune division and one-tenth from Nasik division.

Sex Ratio:

The sex ratio of Maharashtra as per the census 2001 figure is 922 females per 1000 males, lower than the national average of 933. The child sex ratio in the 0-6 age group is even more dismal with 917 girls per 1000 boys against the national 927. Maharashtra's lower than the national average sex ratio could be the result of low sex ratio in the 0-6 population cohort due to the strong son preference achieved by selective abortions, neglect of the girl child after birth with consequent higher infant and child mortality.

The drastic decline in the sex ratio in age group 0–6 in the past ten years is a serious matter. In 2001, it was 917, compared to 946 in 1991. Though the ratio is not as low or adverse as in States like Punjab (793), Himachal Pradesh (897), Haryana (820), and Gujarat (878), when taken in the context of the acute decrease within a short span of just ten years, is significant, indicating a pronounced negative trend. In Maharashtra, Sangli (850), Kolhapur (859), Jalgaon (867), Aurangabad (884) and Satara (884) are the districts with lowest sex ratio in 0–6 age group in the State. Three of them belong to the prosperous sugar belt in Western Maharashtra and Jalgaon which cultivates banana as a cash crop.

TABLI	TABLE 2 – Population – Sex ratio, Child Sex Ratio 2001, SC and ST Population									
		Sex ratio	Child Sex ratio 2001			SC Population	ST Population			
Sr.No.	District	2001	Total	Rural	Urban	in % 1991	in % 1991			
1	Mumbai(includes Mumbai sub-urban district)	811	913		913	6.52	1.05			

2	Thane	857	933	971	915	5.18	18.12
3	Raigad	975	943	952	914	2.79	12.82
4	Ratnagiri	1135	954	959	911	1.77	0.96
5	Sindhudurg	1077	946	948	925	5.10	0.47
6	Nashik	924	936	948	916	8.48	24.18
7	Dhule	945	907	914	888	5.30	40.87
8	Nandurbar	975	966	976	895		
9	Jalgaon	932	867	865	871	9.25	9.84
10	Ahmednagar	941	890	892	878	12.41	7.12
11	Pune	917	906	912	900	11.41	3.91
12	Satara	995	884	888	857	9.50	0.75
13	Sangli	957	850	850	851	12.56	0.49
14	Solapur	937	897	890	914	15.41	1.50
15	Kolhapur	949	859	870	832	12.75	0.49
16	Aurangabad	919	884	886	882	13.79	3.77
17	Jalna	952	914	913	917	12.93	2.07
18	Parbhani	957	926	931	915	11.02	5.26
19	Hingoli	953	935	938	919		
20	Beed	927	898	897	898	13.41	1.13
21	Nanded	943	944	948	929	18.15	11.84
22	Osmanabad	930	927	933	895	16.34	1.76
23	Latur	934	923	926	912	19.06	2.24
24	Buldhana	946	915	921	890	11.40	5.06
25	Akola	938	936	941	927	11.95	7.03
26	Washim	939	921	917	945		
27	Amaravati	940	943	953	935	17.48	14.38
28	Yavatmal	942	942	948	910	10.92	21.46
29	Wardha	936	934	946	898	14.05	15.59
30	Nagpur	933	949	964	939	18.84	13.92
31	Bhandara	982	958	961	939	16.87	14.70
32	Gondia	1005	964	966	946		
33	Chandrapur	961	944	965	897	16.90	19.70
34	Gadchiroli	976	974	976	941	12.20	38.70
	Maharashtra	922	917	923	908	11.09	9.27

Migration too affects the sex ratio in the districts. Net out-migration status of district, with more men than women leaving for better pastures in and around urban centres for economic reasons is an important factor in determining the sex ratio in Ratnagiri (1135), Sindhudurg (1077), Gondiya (1055). Even Satara (995) and Bhandara (982) have sex ratios much above the State average. But, in contrast, Mumbai (774), Mumbai (Suburban) (826), Thane (857), Pune (917) and Aurangabad (919) are the districts with sex ratio much below the State average (922). These districts are obviously magnets for migrants.

There is a strong son preference in Maharashtra. The finding by (International Institute for Population Sciences and MEASURE DHS + ORC-MACRO (2000), National Family Health Survey-2 (NFHS-2), India, 1998–99.)

reflect that only 27 per cent women want more sons than daughters and 84 per cent want at least one son. Only 35 per cent of women with two children use contraception if they do not want a son. If a family has a son and a daughter, contraception is resorted to by at least 63 per cent of women. If the two children are boys, then the percentage jumps to 79 per cent. This preference has also led to delayed acceptance of contraception which further promoted a pronounced distortion in the sex ratio.

Gender selection by clinical prenatal methods is one of the many reasons for the poor overall sex ratio that was 936 in 1961 and declined to 922 in 2001. Studies show that there is a difference in the sex ratio at birth for births to women who have gone for antenatal care (ANC) including sonography (893) and births to women who have not gone for any ANC (983).

Education:

The overall literacy rate as per the census 2001 was 76.9%, which, stands better than the national average of 64.8%. Compared to male literacy, the range of variations in female literacy in Maharashtra is very wide i.e., from 45.5 per cent in Nandurbar to 83 per cent in the Mumbai district. In Konkan, all except two (Raigad and Ratnagiri being in the medium range of 60-70 per cent) are in the high female literacy category of 70 per cent and above. At the other extreme, in Marathwada region, all are in the low female literacy category of below 60 per cent except two, except Aurangabad and Latur positioned in the middle category of 60 to 70 per cent. Not a single district is in the high literacy category here. In both Western Maharashtra and Vidarbha, a district each, Nandurbar with 45.5 per cent and Gadchiroli with 50.6 per cent respectively are in the low category. In Western Maharashtra all the others except Pune (72 per cent) are in the middle category. On the other hand, in Vidarbha, five districts, Akola, Amaravati, Wardha and Nagpur are in the high category and the remaining six are in the medium category.

	Maharastra; Districts Literacy table									
S. NO.	District	М %	F %	Rank	Mean years of schooling	AIL 2001				
1.	Mumbai	89.95	82.71	2	5.85	High				
2.	Mumbai sub- urban	92.65	80.39	1	5.85	High				
3.	Thane	86.06	75.00	6	5.46	High				
4.	Raigad	86.40	68.06	13	5.31	High				
5.	Ratnagiri	86.28	65.98	19	4.92					
6.	Sindhudurg	90.12	71.67	8	6.35	High				
7.	Nashik	85.19	64.16	20	4.15					
8.	Dhule	81.90	61.76	26	3.83	Low				
9.	Nandurbar	66.32	45.55	35	3.83	Low				
10.	Jalgaon	86.53	64.95	17	5.13					
11.	Ahmednagar	86.21	64.88	18	4.55					
12.	Pune	88.55	72.33	7	5.74	High				

13.	Satara	88.45	68.71	12	5.42	High
14.	Sangli	86.25	66.88	15	5.60	
15.	Solapur	82.28	60.07	27	4.22	Low
16.	Kolhapur	87.67	66.38	14	5.76	High
17.	Aurangabad	85.07	61.28	23	4.20	
18.	Jalna	79.17	49.25	33	2.87	Low
19.	Parbhani	80.58	52.98	31	3.01	Low
20.	Hingoli	81.11	51.96	32	3.01	Low
21.	Beed	80.69	55.38	30	4.11	Low
22.	Nanded	81.14	55.12	29	3.50	Low
23.	Osmanabad	82.03	57.55	28	4.24	Low
24.	Latur	83.63	60.28	25	5.30	Low
25.	Buldhana	87.17	64.55	16	4.30	
26.	Akola	89.22	73.82	5	5.35	High
27.	Washim	86.01	61.32	22	5.35	
28.	Amaravati	89.28	76.21	4	5.58	High
29.	Yavatmal	84.57	63.01	21	4.26	
30.	Wardha	87.70	72.80	9	6.25	High
31.	Nagpur	90.25	77.65	3	6.28	High
32.	Bhandara	89.11	68.11	10	6.10	High
33.	Gondia	89.54	67.89	11	6.10	High
34.	Chandrapur	83.19	62.56	24	5.55	Low
35.	Gadchiroli	69.72	50.64	34	4.87	Low
	Maharastra	86.27	67.51		4.97	

Health:

The health record of Maharashtra is comparatively better than many other states of India. According to Human Development Report 2004, Life Expectancy was 65 for males and 68 for females, and the crude birth rate and death rate are better than the national average of ---- and --- respectively. While the IMR was 48 in 1999, 79.7 % children had received Full Immunization. In Maharashtra, professional health workers attend to only 59 per cent of deliveries and the number of 'safe deliveries' was 61.2 %.

In Maharastra, a fourth of the total fertility is from mothers between 15 and 19 years of age. In addition, among the teenaged mothers who gave birth during 1996–1999, it was either a second or a third child at such young age. The urban regions witness 21 per cent of such occurrences and the rural areas, 28 per cent. Nearly a third of the rural women and a fifth of all women in Maharashtra in that age group are currently married. The National Family Health Survey in 1999 revealed that 23 per cent of currently married girls in rural Maharashtra who are between 15 and 19 years and 32 per cent of women in the age-group of 20–24 were married before they were 15 years old. This only underscores the lax implementation of laws relating to early marriages.

Table 2: Infant Mortality Rate and Achievement Indices for Infant Mortality						
	Infant Mortality Rate per 1000 babies					
Sr.No.	District	Total	Female	Male	AIIMR 1991	

1	Mumbai(includes	37	35	39	High
	Mumbai sub-urban				
	district)				
2	Thane	46	41	44	High
3	Raigad	63	56	74	
4	Ratnagiri	75	62	81	Low
5	Sindhudurg	70	61	74	
6	Nashik	79	55	88	Low
7	Dhule	73	78	56	
8	Nandurbar	-	-	-	
9	Jalgaon	71	70	72	
10	Ahmednagar	47	42	52	High
11	Pune	52	44	59	High
12	Satara	51	49	52	High
13	Sangli	41	31	50	High
14	Solapur	68	60	74	
15	Kolhapur	55	47	61	
16	Aurangabad	56	58	51	
17	Jalna	76	76	77	Low
18	Parbhani	50	48	52	High
19	Hingoli	-	_	-	High
20	Beed	52	52	52	High
21	Nanded	68	66	76	
22	Osmanabad	72	83	61	
23	Latur	57	50	64	
24	Buldhana	82	68	84	Low
25	Akola	101	96	103	Low
26	Washim	-	_	-	Low
27	Amaravati	94	88	101	Low
28	Yavatmal	124	126	112	Low
29	Wardha	88	86	91	Low
30	Nagpur	75	78	72	Low
31	Bhandara	81	76	85	Low
32	Gondia	-	-	-	Low
33	Chandrapur	96	101	89	Low
34	Gadchiroli	106	117	95	Low
State	Maharashtra	74	76	72	

Maharashtra Human Development Report 2002

Reproductive Health Markers are better indicators of the health status of women and children, than Gender Development Indicators as they take into consideration a complexity of factors that directly or indirectly determine reproductive health status. The proportion of high risk of early pregnancy is measured by the percentage of women marrying before 18 years, Percentage of women reporting symptoms of reproductive tract infection, Percentage of women/man using contraceptives, Percentage of births unattended by trained professional, Percentage of Infant deaths—these show that the health status of Maharashtra is above average in most districts. However 'backward' termed districts like Gadchiroli, Chandrapur, Yavatmal, Akola, Amaravati and Buldhana show more higher figures than the average state figure for Maharashtra which is 74.

Reproductive Health Data Table									
Sr.No.	District	Women aware of AIDS	Women having at least 1 symptom of	Men aware of AIDS	Men having at least 1 symptom				

			RTI/STI		of RTI/STI
1	Mumbai(includes	94.1	22.0	99.6	4.3
	Mumbai sub-				
	urban				
	district)				
2	Thane	74.9	25.2	81.0	9.6
3	Raigad	57.2	17.7	73.3	9.0
4	Ratnagiri	62.9	23.0	85.7	3.6
5	Sindhudurg	60.1	19.8	81.3	5.8
6	Nashik	54.2	25.6	73.7	7.6
7	Dhule	33.7	24.5	60.7	9.2
8	Nandurbar	-	-	-	-
9	Jalgaon	38.0	27.7	61.2	8.4
10	Ahmednagar	83.6	21.2	97.4	6.4
11	Pune	82.3	21.8	93.0	9.0
12	Satara	81.5	18.9	92.3	4.9
13	Sangli	85.5	19.0	94.0	4.8
14	Solapur	66.2	20.3	83.4	5.9
15	Kolhapur	75.8	16.8	87.7	10.4
16	Aurangabad	43.3	29.5	69.9	8.7
17	Jalna	30.9	36.6	61.0	9.3
18	Parbhani	32.0	24.9	63.2	12.0
19	Hingoli		-	-	-
20	Beed	44.3	23.7	53.9	7.4
21	Nanded	34.0	37.7	66.5	13.4
22	Osmanabad	59.6	26.1	75.8	7.4
23	Latur	58.0	24.0	79.7	7.0
24	Buldhana	35.2	28.1	66.6	11.7
25	Akola	57.2	43.5	78.5	11.7
26	Washim	-	-	-	-
27	Amaravati	43.1	32.1	64.6	14.7
28	Yavatmal	40.5	28.4	62.6	14.6
29	Wardha	49.0	31.9	71.7	14.8
30	Nagpur	66.9	28.0	75.6	8.9
31	Bhandara	26.3	28.1	51.4	16.9
32	Gondia	_	-	-	-
33	Chandrapur	48.7	34.9	64.5	13.7
34	Gadchiroli	32.0	34.2	48.2	13.8
State	Maharashtra	62.3	25.4	44.7	8.9

Maharashtra Human Development Report 2002

Reproductive health Data Table shows Reproductive Health Awareness across districts. It is clearly seen that districts with higher urban population and already proven infections of HIV/AIDS have a higher awareness of RTI/STI as well as about AIDS. While Ahmednagar, Pune, Satara and Sangli have more than 90% men and more than 80% women aware of AIDS, Mumbai has almost 100% awareness level. However, use of contraceptives in the same districts is not as high as the awareness levels. (See Table 1, column 8)

Almost 35 percent women and 13 percent men reported at least 1 symptom of RTI/STI in Maharashtra, with the highest figures for Akola, Nanded, Bhandara, Amaravati and Jalna. It is to be noted that districts figuring high on prevalence of HIV Infections in STD patients (Mumbai, Sangli and Nagpur) do not report a high incidence of RTI/STI.

The data from the Maharashtra Human Development Report 2002 shows the clear division in terms of Urban and Rural status on Reproductive and Child Health Indicators.

It is seen that Urban districts like Mumbai, Thane, Pune, Nagpur, Satara and Sangli show comparatively better ranking in RCH Indicators. However, most districts do not show a consistent high ranking or low ranking on all indicators. While the percentage of girls married below 18 years in Solapur is 41.80 (making its rank Low) it ranks High in percentage users of Contraception, and Medium on most other rankings.

Table	2 1 Reproductiv	e and Chil	d Health I	ndicators				
Sr.	District	Girls	Received	Inst.	Rural	Total	Current	Children
No.		married	Complet	Deliveries	Women	Unmet	Users of	Receiving
		below	e ANC		visited by	need for	Contracep	no
		18 years			ANM	Contracep	tion.	Vaccinatio
						tion		n
1.	Mumbai	8.00	81.30	93.10	N.A	13.80	63.20	3.2
	(includes							
	Mumbai sub-							
0	urban)	10.70	55.40	71.10	5 0.0	22.40	T (20	0.0
2.	Thane	19.70	57.40	71.10	58.2	23.40	56.30	0.3
3.	Raigad	15.90	63.20	55.90	71.4	22.50	56.90	3.8
4.	Ratnagiri	13.00	71.00	51.70	48.2	12.40	58.30	0.4
5.	Sindhudurg	3.80	78.90	76.60	52.3	27.90	48.40	0.0
6.	Nashik	32.10	30.00	54.50	24.0	9.90	56.50	4.3
7.	Dhule	40.00	33.70	31.00	34.2	11.90	58.30	3.3
8.	Nandurbar	-	-	-		-	-	
9.	Jalgaon	46.00	40.90	44.10	18.9	21.10	62.40	1.5
10.	Ahmednagar	40.80	52.00	60.00	29.2	10.90	64.60	2.60
11.	Pune	30.40	56.00	75.00	27.3	9.20	65.70	0.50
12.	Satara	21.90	60.00	60.90	33.0	5.90	69.10	0.0
13.	Sangli	25.60	65.30	68.70	34.4	17.00	63.40	0.0
14.	Solapur	41.80	48.60	57.00	21.0	8.60	63.10	2.0
15.	Kolhapur	18.40	59.80	73.70	30.3	18.50	65.30	1.8
16.	Aurangabad	50.90	39.70	49.60	15.8	30.50	50.00	1.6
17.	Jalna	55.60	40.20	27.90	17.2	13.20	51.70	2.9
18.	Parbhani	46.60	38.00	32.30	20.4	26.30	55.70	3.5
19.	Hingoli	-	-	-	-	_	-	
20.	Beed	59.40	40.30	42.70	28.1	26.40	55.80	0.0
21.	Nanded	36.70	46.80	29.90	51.4	30.50	52.00	1.5
22.	Osmanabad	46.50	47.50	36.40	18.3	10.00	58.20	3.0
23.	Latur	58.10	43.90	40.70	17.2	10.30	60.00	2.0
24.	Buldhana	33.50	47.20	43.90	26.9	13.80	55.30	1.9
25.	Akola	38.20	59.10	49.30	56.1	24.80	57.50	2.50
26.	Washim	_	_	-	-	_	-	
27.	Amaravati	10.20	46.60	52.90	19.6	9.12	63.80	2.0
28.	Yavatmal	27.10	53.10	37.10	47.4	19.90	59.30	1.9
29.	Wardha	12.30	64.10	62.80	26.1	6.50	69.70	0.0
30.	Nagpur	11.30	52.00	67.20	46.2	14.20	63.80	1.1
31.	Bhandara	9.30	43.70	24.60	22.5	8.50	59.60	2.4
32.	Gondia	-	-	-	-	-	-	-
33.	Chandrapur	25.70	62.10	41.00	65.3	16.90	65.80	0.7

34.	Gadchiroli	26.80	67.70	16.40	79.8	23.50	58.20	0.00
35.	Maharashtra	28.80	54.50	58.50	28.8	16.00	60.40	1.9

Maharashtra Human Development Report 2002

(For the purpose of a comparative tally, it was decided to use a RCH rank, an average ranking based on 6 main indicators of RCH. These indicators were –Percentage of girls married below age 18 years, Percentage of women receiving complete ANC, Percentage of Institutional deliveries, Percentage of rural women visited by ANM, Percentage of Current Users of Contraception, Percentage of Children receiving no vaccination and Infant Mortality Rate. This Composite Ranking has been used in the Comparative Analysis Table.)

HIV/AIDS:

The table below shows that from 1986 to 2001, there were 6644 reported infections of AIDS and 696 deaths. According to NACO, the number of AIDS infections in Maharashtra in 2005 was 13,747. It is estimated that 7.47 lakh persons have been infected with HIV in Maharashtra, making it the second highest number in the country, after Tamil Nadu.

NAME of table AIDS cases and Deaths August 1986 to February 2001							
		AIDS cases			AIDS Deaths		
Sr.No	District	Male	Female	Total	Male	Female	Total
•							
1.	Mumbai & Mumbai sub- urban	2432	520	2952	164	36	200
2.	Thane	79	16	95	5	2	7
3.	Raigad	57	10	67	4	1	5
4.	Ratnagiri	14	5	19	0	0	0
5.	Sindhudurg	5	2	7	3	1	4
6.	Nashik	4	1	5	1	1	2
7.	Dhule	1	1	2	0	1	1
8.	Nandurbar						
9.	Jalgaon	12	9	21	1	1	2
10.	Ahmednagar	9	12	21	1	1	2
11.	Pune	216	159	375	14	39	53
12.	Satara	280	100	380	24	2	26
13.	Sangli	1461	616	277	198	69	267
14.	Solapur	8	5	13	1	1	2
15.	Kolhapur	231	83	314	81	32	113
16.	Aurangabad	30	10	40	0	0	0
17.	Jalna	7	1	8	0	0	0
18.	Parbhani	6	0	6	0	0	0
	Hingoli						
20.	Beed	9	0	9	0	0	0
21.	Nanded	1	0	1	0	0	0
22.	Osmanabad	0	0	0	0	0	0
23.	Latur	4	2	6	1	1	2
24.	Buldhana	3	0	3	1	0	1
25.	Akola	78	14	92	0	0	0
26.	Washim						

27.	Amaravati	2	0	2	0	0	0
28.	Yavatmal	1	1	2	0	1	1
29.	Wardha	0	0	0	0	0	0
30.	Nagpur	7	3	10	5	3	8
31.	Bhandara	0	0	0	0	0	0
32.	Gondia						
33.	Chandrapur	95	21	116	0	0	0
34.	Gadchiroli	1	0	1	0	0	0
	Maharashtra	5053	1591	6644	504	192	696

Source: UNDP Maharastra HDR 2002

Selective Data from the Annual Sentinel Surveillance Report 2003 (NACO) shows the prevalence of HIV/AIDS infections in Maharashtra, especially Mumbai.

ANC sites (E	xclusive of M	ımbai)	STD sites (Exclusive of Mumbai)			
Sites	Prevalence rate among those tested.	Hot spot	Sites	Prevalence rate among those tested.	Hot spot	
Satara	3.0	Satara				
Pune	2.5	Pune				
Sangli	4.0	Sangli	Sangli	15.6	Sangli	
Kolhapur	2.5					
Chandrapur	2.75					
Nagpur	2.75		Nagpur	22	Nagpur	
Thane	4.25					

Maharashtra is a HIV High prevalence state. The NACO Report was made based on surveillance activities in 73 sentinel sites. Selective data has been highlighted in this study.

It is seen that Satara and Pune are ANC Hotspots, Nagpur is a STD Hotspot and that Sangli is emerging as a hotspot in both ANC and STD sites. It is also seen that HIV is spreading into the general population at a steady pace. In most STD sites, those who were Factory workers and hotel staff, unskilled workers and drivers were more likely to test positive than others. Among ANC sites, urban women with similarly employed men as their husbands were more likely to test positive. Rural patients had higher positivity than urban patients and migrants had a greater positivity than non-migrants.

HIV Status among ANC Mothers 2003						
	Urban % +ve	Rural % ve	Total % +ve			
Migratory population	1.65	1.79	1.73			
Non Migratory	1.29	1.76	1.47			
Illiterate	1.81	1.82	1.81			
Total	1.33	1.76	1.52			

HIV prevalence in Maharashtra is more rural in character, according to the NACO Report, with a "very active bridge population rapidly transferring infection from high risk to low risk groups."

HIV Status among STD patients 2003						
	Male % +ve	Female % +ve	Total % +ve			
Migratory population	18.55	16.22	17.62			
Non Migratory	13.38	8.80	11.11			
Urban	13.63	9.26	11.55			
Rural	16.13	11.11	13.68			
Illiterate	21.58	12.05	15.04			
Total	14.36	9.81	12.18			

In Mumbai, a total of 12 sites participated in the survey. The median prevalence was 1.25 percent in ANC, 31.33 percent in STD, 22.89 percent in IVDU, 54.29 percent in CSW and 18.80 percent in MSM categories.

Mumbai HIV Prevalence- 2003						
Site Number +ve %						
STD	3	25.63				
ANC	6	1.33				
IVDU	1	22.89				
CSW	1	54.29				
MSM	1	18.80				

HIV Status among STD patients 2003- Mumbai						
	Male % +ve	Female % +ve	Total % +ve			
Migratory population	39.64	14.29	31.88			
Non Migratory	26.50	21.01	22.82			
Urban	33.64	18.70	25.70			
Rural	18.18	26.83	25.00			
Illiterate	42.37	20.66	27.78			
Total	32.89	19.86	25.63			

HIV Status among ANC Mothers 2003 Mumbai						
	Urban % +ve	Rural % ve	Total % +ve			
Migratory population	0.00	1.63	1.26			
Non Migratory	1.30	1.84	1.34			
Illiterate	1.87	1.53	1.81			
Total	1.27	1.73	1.33			

HIV Status among IVDU 2003 Mumbai						
	Male % +ve	Female % ve	Total % +ve			
Migratory population	32.30	0.00	31.52			
Non Migratory	11.11	33.33	11.90			
Illiterate	28.91	16.67	28.36			
Total	25.21	14.29	24.90			

HIV Status among MSM 2003 Mumbai						
	Urban % +ve	Rural % ve	Total % +ve			
Migratory population	29.17	0.00	28.87			
Non Migratory	12.50	0.00	12.42			
Illiterate	33.33	0.00	32.26			
Total	18.95	0.00	18.80			

HIV Status among CSW patients 2003- Mumbai

	Male % +ve	Female % +ve	Total % +ve
Migratory population	0.00	50.00	50.00
Non Migratory	0.00	54.44	54.44
Urban	0.00	53.25	53.25
Rural	0.00	83.33	83.33
Illiterate	0.00	55.49	55.49
Total	0.00	54.29	54.29

The socio-demographic profile of those testing positive at these sites shows that among ANC women, rural positivity was more than urban, and higher in non-migrants than migrants. Among the STD patients, Male migrants and female non-migrants were more likely to be positive. HIV percent positivity in the core risk groups of CSW, MSM and IVDU was extremely high, and steadily rising. The report also notes that HIV situation in Mumbai is complicated due to high percentage of in-migration.

Observed HIV Prevalence levels (%): 1998 - 2004								
Name of State/UT	Number of sites in 2004	1998 (180 sites)	1999 (180 sites)	2000 (232 sites)	2001 (320 sites)	2002 (384 sites)	2003 (455 sites)	2004 (670 sites)
Maharashtra	STD 9	16.00	20.00	18.40	9.20	7.60	10.00	10.40
Mumbai	ANC 35 STD 3	2.00	2.10	1.12 33.33	1.38 21.06	1.25 14.84	1.25 18.40	1.25 15.65
	ANC 6			2.00	2.25	0.75	1.25	1.12
	IDU 1			23.68	41.37	39.42	24.80	28.00
	MSM 1			23.94	23.60	16.80	18.80	9.60
	FSW 1			58.67	52.26	54.50	54.29	44.70

Source: NACO Sentinel Surveillance Report 2003

The figures, above in table clearly shows the status of Mumbai as a High-Risk Area. The HIV prevalence rate among the STD sites in Maharashtra shows a continuous increase from 2002 onwards and is at 10.40 %. The trend in changes for the same in Mumbai is irregular with increase in 2003 to 18.40% from 14.84% and again a decrease in 2004 to 15.65%.

The HIV prevalence rate at ANC sites, both for Maharastra and Mumbai at 1.25% and 1.12% respectively, are also very high and above the dangerous mark of 1% for general population.

Crime against Women:

'Crimes against women have been increasing over the years, although crimes like rape, molestation and cruelty by husbands decreased marginally during 2001 (NCRB2002). The table regarding 'crime against women' constituting data from 'Crime Record Bureau' shows the number of registered crimes against women in Maharastra till 2000. While the over all crime against women in year 2000 shows the decrease over the cases

registered in year 1999 there has been quantum increase in cases registered for indecent presentation of women.

Crime	rime against Women					
Sr.No	Head	1998	1999	2000		
1.	Rape	1155	1317	1308		
2.	Molestation	2941	2761	2799		
3.	Kidnapping & Abduction	981	1104	961		
4.	Eve teasing	905	1146	1222		
5.	Dowry murder by burning	73	62	56		
6.	Dowry murder by other means	54	53	71		
7.	Dowry attempted to murder by burning	31	22	25		
8.	Dowry attempted to murder by other means	28	18	31		
9.	Dowry attempt to commit suicide by burning	32	59	37		
10.	Dowry attempt to commit suicide by other means	20	64	82		
11.	Death U/S 304-B IPC by burning	125	97	79		
12.	Death U/S 304-B IPC by other means	181	137	191		
13.	Cruelty by husband or relatives of husband 498- A IPC	7006	6352	6091		
14.	Abetment of Suicide (victim Women)	1580	1552	1293		
15.	Importing of girls (up to 21 Years)	0	6	20		
16.	ITPA	398	313	149		
17.	Indecent presentation of Women	150	2	27		
	Total	15650	15065	14442		

Only 149 cases were registered under ITPA in Maharashtra in 2000. There was also a decrease in cases related to Kidnapping and Abduction which stood at 961. However, the report on "Trafficking in Women and Children in India" by Mr. P. M. Nair mentions that Maharastra recorded the highest number of reports of the procuring of minors girls in the year 2000. It also mentions that 24,034 female adults were reported missing in 2001 and 1,812 continue to remain missing. Mumbai, Solapur, Nanded, Pune, Osmanabad, Latur, Ahmednagar, Thane, Beed, Sangli, Parbhani, Satara, Nagpur, Nashik and Ratnagiri have been identified as Districts affected by Trafficking, being areas of supply of women victims of prostitution or centres having red light areas, or networks of Trafficking.

Reported Missing	1996	2001	Total for 6	Yearly average	2001 over
Persons			years	for 6 years	1996
Female adults	7,466	8,781	48,618	8,103	18% (+)
Maharastra					
Female adults India	20,494	24,034	1,34, 870	22,480	17%(+)
Female adults continue	1,403	1,812	9,422	1,570	29% (+)
to remain missing					
Maharastra					
Children Female	4,627	6,181	32, 935	5,452	34%(+)
adults continue to					
remain missing India					
Children Maharastra	14,470	14,101	83,283	13,881	3%(-)
Children India	41,410	46,347	2,66,847	44,476	12%(+)
Children continue to	2,340	2,435	14,151	2,359	4%(+)
remain missing					

Maharastra					
Children continue to	10,406	10,589	66,024	11,008	2%(+)
remain missing India					

Human Trafficking:

The problem of Trafficking in Maharastra is severe and an issue of great national concern. Mumbai is host not only to the Asia's biggest slum due to large scale migration in this financial capital of India but also to the Asia's biggest Red light area where in women and girls are trafficked from more than half of the Indian states as well as from various countries. Number of red light areas in Maharastra, as reported by Mukherjee in 2004 were about 30-40 and there were 24 red light areas in Mumbai alone.

Trafficking of females both major and minor into the red-light area is not the only form of sexual exploitation widely prevalent in the state of Maharastra. Females are trafficked for organized commercial sexual exploitation also in the grab of beauty parlours, massage parlours, friendship clubs, escort services for travellers and tourists, call girl rackets, dance bars, modelling, cinema industry etc. Recently Maharastra government put a ban on dance bar due to commercial sexual exploitation involved in the profession. Sex tourism is also very high in Maharastra and Mumbai along with Goa had made India a favoured destination for paedophilic tourists.

Trafficking of women for commercial sexual exploitation is not the only form of trafficking that occurs. Labour, begging, marriages are other reasons of trafficking of both males and female. The exploitation in these other forms of trafficking is equally abusive in nature in all its forms physical, sexual and drug. According to WISE general secretary Vipula Kadri prevalence of child trafficking is 'extremely high in Maharastra, especially Mumbai, where the annual figure of child abuse is as high as approximately 70,000.'

Mukherjee, in 2004 reports that family tradition is the reason behind 1% of women entering sex work in Maharastra and social customs accounts for 0.4% girls joining the trade. Trafficking of young girls in Maharastra also takes place for religious dedication to temples in the form of Devdasi, Jogin. These girls earn their living mostly by providing sexual services to members of temples and community. Government identified 6000 Devdasis in districts of Mumbai, Pune, Solapur, Kolhapur, Sangli, Satara, Osmanabad, Dindhudurg and Nanded. According to NHRC Report 2005, 'in Maharastra Muralis are girls dedicated to God Khandoba in their infancy or early childhood. The main temple of Khandoba is at Jejuri in Pune districts. Another shrine is Pali in Satara district. These dedicated girls are forbidden to become the wedded wife of any man and she usually leads an infamous life earning a livelihood through sex work. Families of these girls take their earnings. Kunbis, mahars, mangs and other lower caste dedicate and make their girls murali. High caste people also dedicate girls to Khandoba by buying them from these lower castes.'

The linkages between Trafficking and HIV/AIDS are well recognized and worldwide accepted due to the exploitative nature of the entire phenomenon of trafficking. The victim of trafficking mostly come from poor families and marginalized sections of the society. The helpless state of their existence induces for them the critical vulnerability necessary for trafficking. The phenomenon of trafficking by its very nature further aggravates the already existing vulnerability of the individual and lead to blatant abuse of victims sexually, physically and economically. Trafficked victims whether for sex work or for other exploitative reasons have no safety from any kind of physical, sexual and substance abuse.

Also in Maharastra there are huge numbers of migrants and slum dwellers, who live and survive in severe constrains and are vulnerable against violation of their Rights, abuse and exploitation.

Central Social welfare lists Maharastra as the high supply zone of women in prostitution. In Maharastra, out of 35 districts 26 districts in total have been identified by NHRC Report 2005, Mukerjee Report 2004 and Trafficking in India 2004 Shakti Vahini, were commercial sex work takes place and therefore can be said to be vulnerable to both trafficking for commercial sex work and HIV/AIDS.

Mahara	Maharastra trafficking affected Districts.					
S.No	Districts	S.No	Districts	S.No	Districts	
1.	Pune	9.	Latur	17.	Dhule	
2.	Parbhani	10.	Bid	18.	Amravati	
3.	Ahmednagar	11.	Akola	19.	Wardha	
4.	Ratnagiri	12.	Thane	20.	Osmanabad	
5.	Mumbai	13	Jalgaon	21.	Sangli	
6.	Kolhapur	14.	Nashik	22.	Bhandara	
7.	Nagpur.	15	Solapur	23.		
8.	Satara	16.	Aurangabad	24.		

Source: Mukherjee 2004 and NACO.

Mukherjee in 2004 identifies 20 districts of origin and operation for sex workers. The number of place of origin of these women are 197 and number of place of operation are 24.

Number of Districts of origin and operation of sex workers in Maharastra				
State	Number of districts of origin	Number of areas of origin	Number of places of operation	
Maharastra	20	197	24	
India	378	1794	1016	

Source: Mukherjee 2004.

In total 8 targeted interventions among the commercial sex workers are being run by NACO, through Maharastra Aids Control Society in 5 districts of Pune, Thane, Kolhapur, Parbhani, Latur.

Targeted Interventions in Maharastra with sex workers					
S.No.	Districts	Number	of	Targeted	Targeted Group

		Intervention	
1.	Pune	3	Commercial Sex Worker
2.	Thane	2	Commercial Sex Worker
3.	Kolhapur	1	Commercial Sex Worker
4.	Parbhani	1	Commercial Sex Worker
5.	Latur	1	Commercial Sex Worker

Source: NACO

The NHRC Report on trafficking identified 60 transit points of trafficking in districts of Mumbai, Solapur, Nanded, Pune, Osmanabad, Latur, Ahmednagar, Thane, Bid, Sangli, Parbani, Satara, Nagpur, Nasik, Ratnagiri. Trafficking in India 2004 a report by Shakti Vahini identified the districts of Belgaun, Bijapur and Kolhapur also in the list of affected districts.

Trafficking for CSE within Maharastra			
Trafficking to Mumbai from	Trafficking out from Mumbai to		
Bid	Akola		
Latur	Amravati		
Solapur	Parbani		
Pune	Nanded		
	Sangali		

Source: NHRC Report 2005

Women and minor girls for commercial sexual exploitation are brought to Maharastra from several states. Also women are trafficked out of Maharastra to red light areas in different states. The table below shows the places of interstate trafficking to and from Maharastra for commercial sexual exploitation. Trafficking into Maharastra is not restricted to Indian states only. Half of 100,000 girl prostitutes between 10-14in Bombay are from Nepal (Penelope Saunders, "Sexual trafficking and forced trafficking of children, 1998). Trafficking in India Report 2004 by Shakti Vahini, reported trafficking in Maharastra from Egypt, Brazil, Mexico, Azerbezan, Russia & its breakaway states and several European states.

Interstate trafficking for CSE in & from Maharastra					
Trafficking into	Trafficking out from	Trafficking out from			
Maharastra from	Maharastra to	Maharastra to			
(NHRC Report)	(NHRC Report)	(Mukherjee)			
Gujarat		Gujarat			
Rajasthan	Rajasthan	Rajasthan			
Punjab					
Delhi	Delhi	Delhi			
Madhya Pradesh					
Uttar Pradesh		Uttar Pradesh			
Nepal					
Bangladesh					
West Bengal	West Bengal	West Bengal.			
Orissa					
Andhra Pradesh	Andhra Pradesh	Andhra Pradesh			
Tamil Nadu					
Karnataka	Karnataka	Karnataka			
Kerala					
Chandigarh		Chandigarh			
Assam					

Meghalaya		
Tripura		
	Goa	Goa
		Daman & Diu

3.76% of total female population in Maharastra is into commercial sex as against the 2.48% in India. The vulnerability to abuse and exploitation and dangers therefore are much higher for Maharastra in comparison to whole India.

State	Total Female population	male female 15- number of		% of prostitutes
Maharastra	46417977	10676135	401300	3.76
India			2827534	2.48

Source: Mukherjee 2004.

The number of women in sex work in according to the latest estimates done in 2004 by Mukherjee in an study supported by Ministry of women and Child Development are around 4 lakhs against 28 lakhs of all India figures. It means that above 14% of the total women in sex work in India are in Maharastra. Human Rights Watch/Asia, rape and Profit 1995- Estimated the numbers of prostitutes in three district of Mumbai, Pune and Nagpur to be 70,000- 100,000, 40,000 and 13,000 respectively.

Number of women in sex work in Maharastra.									
State	State Govt. Sources NGOS Sex Worker								
			groups.						
Maharastra	1.5- 2 lakhs	5-7 lakhs	3.5 lakhs	4 lakhs					
India				28 lakhs					

Source: Mukherjee 2004.

Minors are not only at greater risk of being trafficked but also of greater degree of abuse and exploitation and by more people. Thus the vulnerability and dangers for minors are high in comparison to adults. According to Human Rights Watch/Asia, rape and Profit 1995- 30% of women in sex work in Mumbai are below age of 18 years. Mukherjee gives the figure of 25% for minors in sex work in Maharastra. Children, especially the girl child of sex workers and victims of exploitation also are highly vulnerable due to vulnerability of their mothers. In Maharastra the proportion of children per prostitute is 1.71 % and of these the proportion of girl child is 49.7% (Mukherjee-2004)

State	% of prostitute entry before 18 years of age
Maharastra	25.0
India	35.47

Source: Mukherjee 2004.

Age distribution profile in the table given below clearly shows that young are more vulnerable as above 90% are below the age of 27 years and almost half are below age of 22.

Age profile of women in sex work in Maharastra.											
State	<18years	18-22 yrs.	23-27 yrs.	28-32 yrs.	33-37yrs.	>38 yrs.					
Maharastra	Maharastra 25.00 43.00 24.40 6.20 1.40 0.00										
India	35.47	35.98	19.79	6.78	1.70	0.28					

Source: Mukherjee 2004.

Economical marginalization is the prime reason behind the trafficking of women and children. Poverty coupled with unemployment and illiteracy accounts for the major reasons behind women being in sex work and continuing into it. 68.25 % of the women who are in sex work in Maharastra are illiterate with little. Illiterate status of women not only makes her vulnerable to get trafficked but also reduces the chances of her coming out of it. It also increases the dangers of HIV/AIDS for her as well as for others.

As shown in the tables below 83.20% of women in sex work in Maharastra are into it due to economic distress and lack of other options. 57.26% of women trafficked in sex work reported their fathers income to be below Rs. 1000 per month, another 38.59% have income in between Rs. 1000- 3500 per month. Thus total 95.85% women who entered sex work belong to families where in the income of father was not more than Rs. 3500 per month. (Mukherjee- 2004)

Major causes of Sex work in %									
State	Economic distress	Family tradition	Social custom	Displacement					
Maharastra	83.20	1.00	0.40	0.60					
India	61.67	12.36	3.39	1.02					

Source: Mukherjee 2004.

Reasons for continuance								
State	Poverty	Unemployment	Illiteracy					
Maharastra	55.20	10.20	1.00					
India	44.14	7.89	5.62					

Source: Mukherjee 2004.

Reasons for continuance										
State	Social attitude	Stigma	Family acceptance	Lack of proper rehabilitation						
Maharastra	0.80	1.20	0.20	0.40						
India	2.18	2.95	8.37	1.74						

Source: Mukherjee 2004.

As shown in the table social attitude, social stigma and lack of proper rehabilitation also increases the vulnerability and accounts for the reason behind 2.4% women continuing to be exploited in profession. In Maharastra there are in total number of homes for women- 59 of these 3 are protective homes-, 37 are short stay homes and 19 are destitute homes.

Maharastra District HDI Indicators										
S. NO.	District	HDI 2000	Rank	HDI Status	Total%					

2. Mumbai s	sub- 1.00		High	
		1	High	87.14
urban			8	
3. Thane	0.82	3	High	81.00
4. Raigad	0.70	6	High	77.32
5. Ratnagiri		22	Low	75.35
6. Sindhudu		9	High	80.52
	0		Mediu	
7. Nashik	0.51	13		75.10
8. Dhule	0.36	30	Low	72.08
9. Nandurba		32		56.06
			Low	
10. Jalgaon	0.50	14	Mediu	76.06
11. Ahmedna	gar 0.57	11	m Mediu	75.82
11. Ahmedna	gar 0.57	11	m	75.82
12. Pune	0.76	4	High	80.78
13. Satara	0.70	10	High	78.52
14. Sangli	0.68	7	High	76.70
15. Solapur	0.48	17	Low	71.50
16. Kolhapur		8	High	77.23
17. Aurangab	oad 0.57	12	Mediu	73.63
			m	
18. Jalna	0.27	33	Low	64.52
19. Parbhani	0.43	24	Low	67.04
20. Hingoli	0.43	25	Low	66.86
21. Beed	0.47	18	Low	68.48
22. Nanded	0.37	29	Low	68.52
23. Osmanab		28	Low	70.24
24. Latur	0.47	19	Low	72.34
25. Buldhana		27	Low	76.14
26. Akola	0.44	23	Low	81.77
27. Washim	0.36	31	Low	74.03
28. Amaravat	i 0.50	15	Mediu m	82.96
29. Yavatmal	0.22	34	Low	74.06
30. Wardha	0.49	16	Mediu	80.50
			m	
31. Nagpur	0.71	5	High	84.15
32. Bhandara		20	Low	78.68
33. Gondia	0.46	21	Low	78.65
34. Chandrag		26	Low	73.07
35. Gadchiro	li 0.21	35	Low	60.29
Maharast	ra 0.58		ND 2002	76.9

Source: UNDP Maharastra HDR 2002.

HDI Human Development Index AIL- Achievement indices in literacy

A glance into the vulnerability status of districts.

Maharastra along with being a leading state in 'Human Trafficking', also leads among several major states in India in 'high HIV prevalence' and has remained the cause of increasing national concerns. According to NACO, there were 13,747 cases of AIDS reported till 31st July 2005. However, unofficial estimates peg the figure at 7.47 lakh (persons infected with HIV)

making it stand, second only after Tamil Nadu, in the country. The HIV prevalence and its progressive increase from year 1998 to 2004 are shown in the table below.

District	HDI			Child	Percentage		RTI/STI	aware	AIDS	HIV/AIDS	Trafficking
	Status		Sex	Sex	of Literacy		Prevalence	of AIDS		Prevalence	affected /
			Ratio	Ratio		RCH					vulnerable
		poverty	2001	2001		Rank					distrcts
Mumbai +	High		Low	low	High		High	High	High	High	
Mumbai sub-											
urban		N.A				High-M					Yes
Thane	High	High	low		High	High-M	High	Low	High	High	yes
Raigad	High	Medium			High	Medium-	High	Low	High	Medium	
Ratnagiri	Low	High	1135		High	High-M	Medium	Low	low	High	Yes
Sindhudurg	High	High	1077		High	High-M	Medium	Low	low	Low	Yes
Nashik	Medium	High	Low		High	Low-M	High	Low	low	High	Yes
Dhule	Low	High	945	low	High	Low-M	High	Low	low	High	
Nandurbar	Low	High	975		Low	N.A	-	-		High	
Jalgaon	Medium	High	low	low	High	Low-M	High	Low	low	High	Yes
Ahmednagar	Medium	Medium	941	low	High	Medium	High	Medium	low	High	Yes
Pune	High	Low	low	low	High	High-M	High	Medium	High	High	Yes
Satara	High	Low	995	low	High	High-M	High	Medium	High	High	Yes
Sangli	High	Low	957	low	High	High-M	High	Medium	High	High	Yes
Solapur	Low	Medium	937	low	High	Medium-	High	Low		High	yes
Kolhapur	High	Low	949	low	High	Medium-	High	Medium	High	High	yes
Aurangabad	Medium	Medium	low	low	High	Low	High	Low	Medium	High	Yes
Jalna	Low	Medium	952	low	Medium	Low	High	Low	low	Medium	
Parbhani	Low	High	957	low	Medium	Low	High	Low	low	High	Yes
Hingoli	Low	N.A	953	935	Medium	N.A	-			Low	
Beed	Low	Medium	low	low	Medium	Low-M	High	Low	low	High	Yes
Nanded	Low	High	943		Medium	Low-M	High	Low	low	High	Yes
Osmanabad	Low	Medium	low	low	High	Low-M	High	Low	low	Low	Yes
Latur	Low	Medium	934	low	High	Low-M	High	Low	low	High	Yes
Buldhana	Low	High	946	low	High	Low	High	Low	low	Low	
Akola	Low	High	938	936	High	Low-M	High	Low	High	Medium	Yes
Washim	Low	High	939	low	High	N.A	-	-			
Amaravati	Medium	High	940		High	Low-H	High	Low	low	Low	Yes

Yavatmal	Low	High	942	High	Medium-	High	Low	low	High	
Wardha	Medium	High	936	High	High-L	High	Low	low	Low	Yes
Nagpur	High	High	933	High	High-M	High	Low	low	High	Yes
Bhandara	Low	High	982	High	Low-M	High	Low	low	High	Yes
Gondia	Low	N.A	1005	High	N.A	-	-		Low	
Chandrapur	Low	High	961	High	High-L	High	Low	High	High	
Gadchiroli	Low	High	976	Medium	High-L	High	Low	low	Medium	

The table gives a comparative glance of value/rank of districts on different indicators reflecting the vulnerability of population to trafficking and HIV/AIDS. The indicators in table reflect the vulnerability for the specific areas they cover. The Human Development Index (HDI) value and rank based on literacy, mean years of schooling, IMR and Per Capita District Domestic Product at constant prices (1993–94) for the year 1998–99 has been taken from the Maharashtra Human Development Report, 2002.

There is a correlation found between low HDI and vulnerability to trafficking. People with low income are much under compulsion to migrate in unsafe manner and prone to the dangers of being trafficked. People with no education are in greater risk to fall in the webs of trafficking, unsafe migration, abuse and exploitation in comparison to educated population and are also in greater risk of health hazards and sufferings. The health risk is further aggravated in case of those who have no access to health structures and services.

In contrast it is to be noted that districts with a better HDI are those to which people migrate and are trafficked. These are the districts also which are showing steady rate of increasing HIV infections. Mumbai, ranked 2nd and sub-urban Mumbai ranked 1st in terms of HDI are also leading in the number of HIV infections and AIDS cases in the state. Thane, Pune, Nagpur, Satara, Sangli, Kolhapur – all of which are within the first ten districts in terms of HDI, are marked as AIDS hotspots by NACO and are also the destination areas of trafficking and centers of large scale inmigration. The percentage of families below poverty line to denotes the economic vulnerability of people who are then left with no alternative but to migrate to better cities and also have less access to the systems of health care.

The HDI ranking of districts (Human Development Report of Maharashtra) is helpful in understanding the status of those districts which particularly need more attention in terms of vulnerability.

While AIDS-affected districts show better HDI rankings, it is the districts with low ranking which are actually the source of migrants as well as 'trafficked persons' to such cities. The HIV surveillance sites, Mumbai and sub-urban Mumbai, Thane, Pune, Satara, Sangli and Nagpur which have been marked as "HIV Hotspots" by NACO are also which constitute the topmost HDI Ranking among districts, scoring high in terms on literacy, health, work participation and living standards. In such an understanding, they are the 'cities' of Maharashtra, well-nurtured hubs of economic activity. It is such an environment of work-opportunities which brings a large number of in-migrants to these cities, either due to poverty in their own home towns and villages or due to hopes generated by a false work-contract. This, as is widely known also gives rise to an increasing demand of 'trafficked girls'.

On the other hand, districts with low HDI do not necessarily lead to outmigration. For example, Gadchiroli, with an HDI ranking of 35, and a literacy ranking of 34 (in a state of 35 districts) does not constitute a large source of migrants. This is due to the large ST Population in the district (38.70%, TABLE 2), which is as yet not ready to move to cities. It is districts with an average or below average HDI Ranking which form the major chunk of out-migrants. Districts with average literacy ranking are coloured for being more susceptible to out-migration and thus more likely to be entry points for HIV crossing over from the High Risk population to Low risk groups.

The sex ratio is an important indicator of gender inequality and of the status of women in that society or how safe the women are or how they are likely to be treated. It is found that the destination centres of trafficking are the areas where sex ratio is low especially the urban cities of Maharashtra. One reason of the skewed sex ratio of these cities is the large number of male inmigrants from rural areas and the imbalance in number of women in these cities puts the female population especially the poor and marginalized one at greater risk of abuse and exploitation. The districts such as Ratnagiri and Sindhudurg showing sex ratio of more than 1000 are also vulnerable points for trafficking as source districts.

The child sex ratio is one of the first indicators of violence against women – against the female unborn child. Semi-urban districts like Jalgaon, Ahmednagar, Satara, Sangli, Kolhapur, Solapur, Aurangabad and Dhule – shows a dangerously low child sex ratio. All these districts have more than 70 percent literacy, a fact that raises concern and ask for changes in strategies in respect to the relation between development and women. It is also seen that increasing literacy does not necessarily co-relate with knowledgeable or safe behavior. Most districts with a good literacy rate are those which rank high on HIV/AIDS infections. These districts also have a High-Medium RCH ranking.

It is seen that Urban districts like Mumbai, Thane, Pune, Nagpur, Satara and Sangli show comparatively better ranking in RCH Indicators. However, most districts do not show a consistent high ranking or low ranking on all

indicators. A cumulative RCH ranking based on 7 main RCH indicators—Percentage of girls married below age 18 years, Percentage of women receiving complete ANC, Percentage of Institutional deliveries, Percentage of rural women visited by ANM, Percentage of Current Users of Contraception, Percentage of Children receiving no vaccination and Infant Mortality Rate had been used to show High (Good) or Low (Bad) performance. The overall ranking was averaged by its most dominant ranking. If a district ranked Medium on 4 indicators and High on 3 indicators, it is marked Medium-H, if a district ranked High on most indicators and Low on the rest, it is marked High-L. Thus, the difference between a High and High-L district is taken into account besides achieving an overall rank.

Women and Men responding positive to at least 1 infection of RTI/STI had been used separately to asses the level of RTI infections. This data is seen corresponding with the percentage of AIDS awareness, the level of awareness of STIs. The number of AIDS cases and AIDS deaths makes it clear that though Chandrapur, Kolhapur and Solapur have not been marked as AIDS hotspots by NACO, they are nevertheless AIDS affected districts. The HIV prevalence rate at most of NACO sentinel sites at ANC centres across Maharashtra has crossed the 1% mark, showing that the epidemic has crossed over into the general population. To cover the districts which also act as transit routes and destinations of trafficked children and women besides those districts which are mainly the source areas, they have been termed as "Trafficking affected Districts."

It is clearly seen that there is a high correlation between 'backward' districts and 'trafficking affected districts.

On the basis of these different variables, 25 districts fall into the category of 'risk-prone' and 'affected districts'. While Mumbai and sub-urban Mumbai, Thane, Jalgaon, Pune, Satara, Sangli, Kolhapur, Aurangabad, Latur, Akola, Yavatmal, Nagpur and Chandrapur (marked in red) are already affected districts which need concentrated and large scale interventions, the districts of Ratnagiri, Nashik, Dhule, Nandurbar, Ahmednagar, Solapur, Parbhani, Beed, Nanded, Osmanabad, Wardha and Bhandara (marked in blue) have been denoted as 'high risk areas' where timely and effective intervention may help in controlling the crime of trafficking and slowing the epidemic of AIDS.

Mumbai, Thane, Pune, Satara, Sangli, Aurangabad are known trafficking destinations in the state, while it has also been seen that many girls and women are trafficked from Latur, Akola, Kolhapur, Yavatmal, Chandrapur. The later group of districts also are root villages of many migrated workers. They are also characterised by a low RCH ranking, comparatively higher levels of literacy and their proximity to the major cities. All of them show epidemic levels of HIV/AIDS prevalence rates. Their dual importance in both fields – of Trafficking and HIV – is a clear indicator of the inter-linkages between Trafficking and HIV.

Most districts marked in blue for being 'high risk areas' are also noted to have a record of trafficking, and show an increasing percentage of general population being infected with HIV/AIDS. These districts will determine the intensity of the AIDS pandemic in the near future and thus need to be brought into focus of interventions.

The only few districts which have been fortunate to escape this listing are those which have not been found active in the trafficking network, and do not show dangerous levels of HIV prevalence. Of these, Sindhudurg and Gadchiroli have a High RCH ranking, while most data for Washim, Gondia and Hingoli is not available as they are new districts. Notably, Sindhudurg is the only district having a high HDI ranking in all, while most other High HDI ranking districts are seen to be either 'already affected' or 'high risk' areas.

District	HIV Prevalence	HIV Vulnerability	Trafficking status	Trafficking Vulnerability
Mumbai (includes Mumbai sub-		High		High
urban district)	High		Yes	
Thane	High	High	yes	High
Raigad	Medium	High		Low
Ratnagiri	High	High	Yes	High
Sindhudurg	Low	High	Yes	Medium
Nashik	High	High	Yes	High
Dhule	High	High		High
Nandurbar	High	-		High
Jalgaon	High	High	Yes	High
Ahmednagar	High	High	Yes	Medium
Pune	High	High	Yes	High
Satara	High	High	Yes	Medium
Sangli	High	High	Yes	High
Solapur	High	High	yes	Medium
Kolhapur	High	High	yes	Medium
Aurangabad	High	High	Yes	Medium
Jalna	Medium	High	_	High
Parbhani	High	High	Yes	High
Hingoli	Low	-		Medium
Beed	High	High	Yes	High
Nanded	High	High	Yes	High
Osmanabad	Low	High	Yes	High

Latur	High	High	Yes	High
Buldhana	Low	High		High
Akola	Medium	High	Yes	High
Washim		-		High
Amaravati	Low	High	Yes	High
Yavatmal	High	High		High
Wardha	Low	High	Yes	High
Nagpur	High	High	Yes	High
Bhandara	High	High	Yes	High
Gondia	Low	-		Medium
Chandrapur		High		
	High			
Gadchiroli	Medium	High		