

**STI/HIV PREVALENCE AND RISK BEHAVIORAL STUDY
AMONG SEX WORKERS AND TRUCKERS
ALONG THE TERAI HIGHWAYS ROUTES
COVERING 22 DISTRICTS OF NEPAL**



**Family Health International (FHI)
In Collaboration with
The National Center for AIDS and STD Control
Ministry of Health
New ERA and SACTS**

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**Sexually Transmitted and Blood-borne Infection
Prevalence Assessment in High-risk Populations:
Prevalence of HIV, other sexually transmitted infections
(STI), and related risk behaviors among female sex workers
and truckers in Terai highway districts of Nepal - an
evaluation survey**

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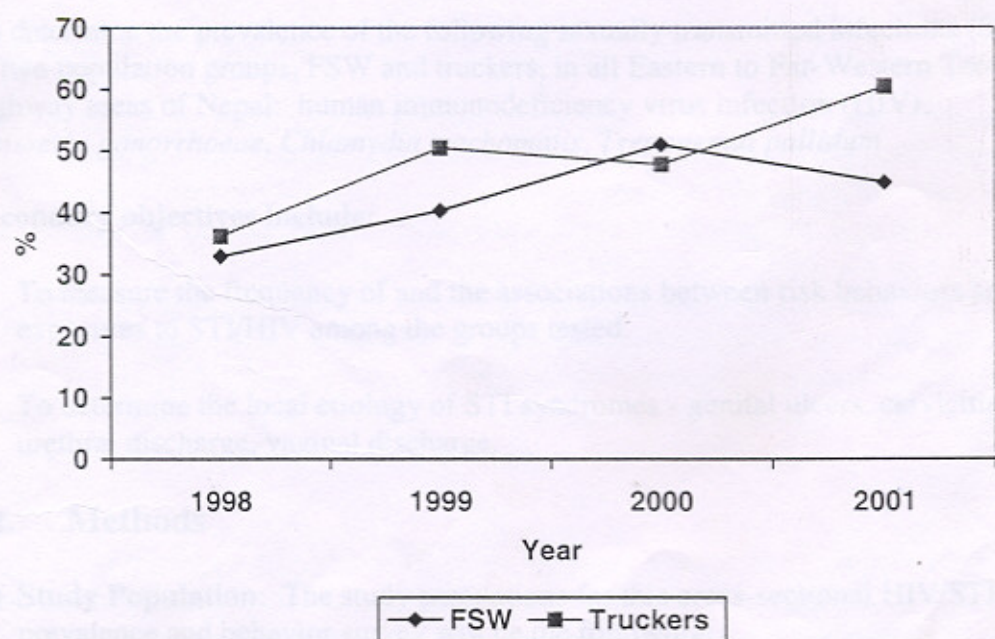
I. Background and Rationale

An HIV/STI and behavioral risk survey of female sex workers and truckers conducted in 1999 in the Central and Eastern Terai of Nepal near the Indian border provided baseline biological and behavioral risk prevalence for a set of interventions which followed. Trucking and trade traffic between the two countries is heavy on the land transportation routes in the Terai, creating a demand for sex workers, many of whom also migrate to and from India for sex work. Many of the sex workers found in Mumbai and other areas of India where HIV prevalence is high are Nepali women.

The survey found that HIV prevalence was relatively low in both groups (3.9% among FSW and 1.5% among truckers) but that other STIs, notably syphilis, were quite high (18.8% among FSW). Other highlights of the survey were that HIV and STI infection among FSW was highly related to previous sex work in Maharashtra, India, particularly Mumbai, and that condom use, while climbing from previous levels, was still unacceptably low.

Since that 1999 survey, interventions among both groups have been intensified. Furthermore, yearly behavioral surveillance surveys (BSS) have shown that condom use has steadily increased (Fig 1) and that commercial sex partnerships among men have declined. Given these positive behavioral trends, it is appropriate to determine what biologic impact these interventions have had on the respective population groups.

Fig 1: Consistent Condom Use among FSWs and Truckers



The specific need for this survey and the resulting data are twofold:

- **Assessing program effectiveness and adjusting interventions:** The major need for this survey is to evaluate the package of interventions which have been in operation in the targeted geographic area for several years and to determine their combined effect in maintaining low HIV prevalence and reducing the prevalence of other STIs. Furthermore, results will be used to adjust interventions so that they are more effective. In most of the settings where FHI/IMPACT is working, the passive STI surveillance systems range from weak to non-existent. Where they exist, they often do not capture the information in the target groups important for HIV control. Because of the large amount of additional information that can be obtained through laboratory-based studies, STI cross-sectional surveys are an important component of STI/HIV program effectiveness evaluation.

Since 1999 BCI and STI programs have expanded to the Western and Far-western Terai districts of Nepal also. The prevalence of HIV and STDs among FSWs and Truckers in this western cluster has not been measured to date. Therefore, for assessing existing program effectiveness and adjusting interventions in this sector this study has included the western cluster as well in the sample.

- **Advocacy:** The survey data will be used to convince policymakers of the effectiveness of targeted interventions in Nepal. Resources and interventions for STI/HIV control are often not directed towards the needs of specific groups because policy makers are unaware of the magnitude of the problem.

II. Objectives

Primary objective:

To determine the prevalence of the following sexually transmitted infections (STI) in two population groups, FSW and truckers, in all Eastern to Far-Western Terai highway areas of Nepal: human immunodeficiency virus infection (HIV), *Neisseria gonorrhoeae*, *Chlamydia trachomatis*, *Treponema pallidum*

Secondary objectives include:

- To measure the frequency of and the associations between risk behaviors and exposures to STI/HIV among the groups tested.
- To determine the local etiology of STI syndromes - genital ulcers, cervicitis, urethral discharge, vaginal discharge.

III. Methods

A) Study Population: The study populations for this cross-sectional HIV/STI prevalence and behavior survey will be the following:

- Female sex workers (FSW) – Eligibility criteria will be women reporting having been paid in cash or kind for sex. Based on the last survey 10% of

respondents were under the age of 18 years. While we will not explicitly recruit young FSWs we will not exclude them either since STI rates in this group can be substantial. These sites - Itahari, Lahan, Narayanghat, Butawal, Nepalgunj, Dhanagadi and Lamahi/Dang- have been determined through mapping and through consultation with NGOs working in the area.

- **Truckers** - Eligibility criteria will be men who are truckers or helpers intercepted at the Hetaunda trucking stop along the East-West highway aged 16 and above as individuals aged 16 and above are allowed to work as Truck helpers in Nepal. BSS round V conducted in the Eastern cluster shows that about 9 % truckers were under the age of 18 years. Moreover, adolescents are not denied access to health care and reproductive health services in Nepal.

In this study two different samples are designed for FSWs in the Eastern and Western clusters. This was necessitated by the significant difference in the characteristics of FSWs in the Eastern and Western clusters (based on the data from BSS round 4 in Eastern cluster and BSS round 1 in Western cluster). The sample size for FSW will be 400 in eastern cluster and 200 in the western cluster. The sample size in western cluster is so designed that it will allow us the proper comparison of the results with the eastern cluster. Given 1999 measurements of HIV and other STIs, this will detect whether HIV has risen at least 5% and whether syphilis prevalence has been reduced by one-third its 1999 levels the sample size for truckers will be 400. As the characteristics of truckers are found to be similar a single sample is designed. Given the 1999 measurement of 1.5% HIV prevalence, this sample size will detect a change of prevalence to 5% or higher.

B) Recruitment of Study Participants:

Recruitment of Truckers

Because of a large and frequent turnover of truckers on the truck route, Hetaunda will be the site of recruitment in the Eastern cluster. Hetaunda is a large truck stop on the East-West Highway and is the site where truckers congregated to get assignments for various trucking jobs. They arrive at the site, put their name on a list, and wait for an assignment. As in the 1999 baseline study we will work in collaboration with the truckers association. As in the last study the truck park office in Hetaunda will be chosen for the study site. The truckers association has provided a room for the study team. Even though the truckers association is collaborating with the study, there will be no feedback to them regarding who was approached or who agreed to be in the study.

Truckers will be approached consecutively by study personnel in the order that their name appears on the list and asked to participate in the study. If they agree to participate they will be escorted to the study room where a witnessed oral consent will be administered.

After consent truckers will be administered a structured questionnaire and have pre-test counseling and information on STIs, the risk factors, clinical manifestations, appropriate treatment and prevention, including condom demonstration. They will then have a skin and genital examination. Of those study participants who have complaints of STI symptoms the physical examination will be done as in the 1999 survey. As an incentive for the participants simple health check up such as height & weight measurement, blood pressure check up will be done. They will be given the medicine on the basis of syndromic management. Further some test such as blood groupings, sugar and UTI. also will be done by lab technician and physical examination will be done by a health assistant. After the examination blood samples will be obtained.

Truckers will receive free STI syndromic treatment based on the findings of syndromic examination. STI syndromic treatment will follow the National STI case management Guidelines -2001 for Nepal (Appendix X)-. The blood samples will be tested for syphilis and HIV. Study participants will be issued an ID card with a unique number associated with the participant's blood samples. All participants will be given a fixed date and venue where they can come back to collect their test results if they wish. As the study participants themselves must come to collect their test results with their proper ID card, they will be well explained that ID card should not be lost or exchanged with others. Participants will be informed that if they loss their card research team will not be able to identify their test results as their name and other personnel details are not recorded in the survey to maintain the privacy of the test results. Considering the mobile nature of truckers, venue for distributing test results will be decided after the preliminary assessment of their mobility. Result distribution centers will be set in the highways so that they can stop by while going up and down on the highways. The truckers will receive a supply of vitamins if the health assistant recommends during physical examination and a pen or towel for their use.

Recruitment of Female Sex Workers

In order to reach the desired sample size and to facilitate participation, the study team will move the study sites along the major highway routes in the Terai. Through previous research, study collaborators (i.e., outreach NGOs) have established contacts with sex workers and (dalals) in numerous places in the proposed study area. Furthermore, the study will work closely with General Welfare Pratistan (GWP), Association of Medical Doctors' of Asia (AMDA), Women Acting Together for Change (WATCH), Trinetra Nepal and other NGOs which are funded under the current USAID STI/AIDS prevention projects to provide HIV/STI prevention services to FSWs in the Terai highway districts such as Save the Children US and CARE Nepal. However, the sample respondent will be chosen using sampling method and will not be based on NGOs guidance. A study site will be set up in one location for several days and sex workers from the area will be recruited for participation. Depending on the location and access to sex workers, study sites may include rented rooms, AMDA clinics, or other appropriate clinical sites. The study team will take help of GWP, AMDA, WATCH, Save US, Trinetra and CARE Nepal during recruitment of study participants (especially of sex workers). Recruitment of study participants will be made independent of NGOs to avoid bias, and conduct study activities. When

recruitment efforts have saturated the sex worker population in each area, the study team will move to the next area and set up a study site continuing until the desired sample size has been achieved. It is anticipated that approximately 3 - 4 weeks will be spent at each cluster along the truck route and about five weeks at the Hetaunda truck park area.

At the truck stop sites along the highway, sex worker participants will be asked to refer friends to the study site in an effort to reduce recruitment bias (snowballing recruitment). Fieldwork will start in the Eastern cluster and the study team will move to Western cluster for recruiting female sex workers. Considering the logistic complicacy on blood and vaginal swab sample collection, storage and sending it to the laboratory in Kathmandu and in Bangkok or Dhaka field work for conducting interview and collecting blood and vaginal swab sample is not designed simultaneously in the Western and Eastern clusters.

After witnessed oral consent obtained in the clinical site, sex workers will be administered a structured questionnaire and receive STI evaluation with free treatment based on the 2001 Nepal treatment guidelines of syndromic management (Appendix X- They will also receive free syphilis testing and treatment, free pre- and post-HIV counseling and testing and referral for appropriate clinical and supportive services if HIV positive. Additionally, a one-month supply of vitamins and small amount of money (up to Rs. 350) to cover their local transportation costs will be provided to FSWs. Sex workers have to travel longer distance as the lab will be fixed in one central location of each cluster. Sex workers who are not using modern forms of contraception at the time of recruitment and had menstruated more than 2 months before will receive treatment for STI syndromes based on the Nepal protocols for pregnant women (Appendix X).

Respondent's Consent. While outreach workers and study personnel in the field will initially recruit potential male and female study subjects, informed consent will be obtained in private at the study site by the study nurse/interviewer and witnessed by a second same-sex member of the study team. The purpose of the study and the activities of the study will be explained in simple but understandable terms. The potential participants will be informed that all information and discussions will remain confidential; their participation is voluntary; they may refuse to answer any questions; and that they may leave at any time. They will also be informed that their participation or non-participation will in no way affect treatment they would normally receive. The prospective subject will be expected to explain the activities of the study back to the study staff to confirm an understanding of the procedure. Because of the social marginalization of sex workers, the high level of stigma associated with STIs in this population and high level of illiteracy of the study populations (both truckers and sex workers), the consent will be a witnessed oral consent. If the prospective subject gives oral consent to participate in the study, and the study staff receiving this oral consent is convinced the subject understands what has been agreed upon, they will sign and witness a statement on the consent form that declares:

"I have read and explained this informed consent form to the study recruit in Nepali. They have explained the study activities back to me and I am convinced they understand the activities that will occur. They have not been

coerced to participate and have given their oral consent to participate in all aspects of this study".

Potential FSWs identified in the field will be provided transportation to and from the study site. For the truckers, a male health care provider, a lab assistant, and a male interviewer/counselor will staff the study site. For the sex workers, a female nurse will provide the simple health check up and the team will consist additionally of a female interviewer/counselor and a lab assistant.

Respondents will be administered a structured questionnaire by the same sex study interviewer in a private room. The questionnaire will consist of socio-demographic and sexual behavior questions, such as number and type of partners and condom use with those partners (Questionnaire Appendix)

HIV/STI pre- and post-test counseling and follow-up

The study participants will then be pre-test counseled for their HIV and syphilis test, and told how, when and where they can receive their HIV and STI results and post-test counseling. Specific arrangements will be made with clinics in each of the study sites for FSWs to provide follow-up. For truckers follow-up services will be provided through AMDA STI clinics. These providers will be sent the laboratory test results by study number and will provide the results, associated counseling and treatment free to any participant that comes to the clinic with the study card bearing the study numbers. These results will be identified by study number only and will be available within 1 month at the AMDA field sites in Eastern cluster and Save US supported clinics in western cluster where trained HIV/STI counselors will be available to give HIV and syphilis results and appropriate referrals for additional care and support services. Study participants will be referred to the local AMDA clinics. AMDA has a static clinic at Hetaunda and organize mobile clinics in other districts once in a month. So, research team will coordinate with AMDA and arrange the clinics as needed. AS AMDA clinics are supported by FHI referred patients will get free syphilis treatment and get medicines in subsidized rates.

Following the administration of questionnaire and the education and counseling session, blood specimens will be collected from male participants after they have been given a health check up for inspection of the genital area. For FSWs, following the administration of questionnaire and the education and counseling session blood specimens and vaginal swab will be collected .

Participants will be asked about current and past STI symptoms. Participants with a history of recent or present STI symptoms such as vaginal discharge, urethral discharge, lower abdominal pain and genital ulcers will be treated based on symptoms and clinical findings on examination on site according to Nepal Ministry of Health algorithms for syndromic management (Appendix X). At the conclusion of the study activities, participants will be given clear instructions on how, where and when to obtain their test results, a card marked with their study number, a supply of condoms, a one-month supply of vitamins, a small gift of a pen or towel and transport back to the recruitment site.

In order to maintain confidentiality of study participants, no study documents will record the name of the study participant. A participant will be assigned a study number, all information – questionnaires and clinical specimens will be labeled with this study number. The participant will be given this study number on a card in order to obtain HIV and syphilis laboratory results and obtain appropriate counseling and treatment.

C) Study Procedures

Study team: Study will consist of a project director, research officer and two research assistants and below described field teams. Project director will be responsible for overall study. Research officer will assist project director in all stages of study including report writing, check the data brought from field, help in coding during data process, help in preparation of tables. Two research assistants will be responsible for the all field activities which include preliminary visits to field sites to arrange all the logistic arrangements and room rentals for lab set up, and hiring local motivators assist project director and research officer in training the field staff, supervise the field throughout the field period, arrange for test result provision.

Field teams: Four research teams will be formed, each consisting of one male Research Assistant (RA), one male supervisor, three male/female interviewers, one Health Assistant/Staff Nurse, one male/female Lab Assistant, one runner and two local motivators. Working with this core research team will be field recruiters, here referred to as “motivators”, and local NGO personnel already working with the target populations.

Motivators: Motivators will be local NGO members or the local peers from the research sites. They will be responsible for explaining the study to sex workers and truckers, including the procedures involved (e.g., obtaining blood and vaginal swab). These motivators will be available in the community 3 to 4 weeks prior to the study teams' arrival to allow time for questions and concerns to be raised. Different methods will be used to reach and recruit potential participants. Still another method could involve recruiting on a one-on-one basis using the *dadal* (middlemen). Since sex workers work incognito in Nepal, a trusted contact point/person such as the *dadal* is needed to reach the sex workers.

Male and Female Interviewers: Male and female interviewers will be responsible for further clarification of the study objectives and procedures and administration of the oral consent form. They will also interview participants using a structured questionnaire. Moreover interviewers will provide pre-test counseling. All the study team members will be given pre-test counseling training before they depart to the field. Interviewers will also witness the consent forms.

Health Assistant/Staff Nurse: A health assistant (male) will examine the male truckers for STI, refer for the blood tests, and give the medication if necessary. A staff nurse (female) will follow a similar procedure for the sex workers. However, swab sample will be collected from the sex workers. Furthermore, the staff nurse

will teach the sex workers how to take a vaginal swab. Health assistants/staff nurses will also witness the consent form.

Lab Assistants: Lab assistants will be responsible for the blood drawing and the storing properly the collected vaginal swab. They will properly label the samples of blood, and vaginal swabs before storing for transport.

Field Supervisors: Field supervisors will be responsible for overall management of the mobile team and laboratory. Their responsibilities will include ensuring that study procedures are properly followed, e.g. proper administrations of the consent, appropriate handling of the specimens (labeled, stored and shipped to Kathmandu), adequate addressing of participants concerns and problems.

Local NGO Members: These locally hired individuals will help facilitate contact between the participants and research team. Local NGO members will be more familiar with the respondents therefore respondents should feel more comfortable with the local NGO members than the research team.

Once the teams have been identified, training of motivators, interviewers, lab technicians, health assistants and staff nurses in the study protocol, procedures and HIV pre-test counseling will occur. A team of qualified counselors and researchers from New ERA and guest experts will conduct training with the assistance of some of the co-investigators. A total period of one - two weeks will be spent on training the staff. Mainly study procedures, objective of the study, questionnaire designing and administration with role play and practice in the actual field settings, filling up the consent form pre-test counseling, blood sample and vaginal swab collection, and laboratory testing procedures will be covered in the training. Experts from respective field will be invited to train the study team. The quality of HIV counseling sites where study participants will be referred will be assured by FHI. These sites will be reviewed in advance and upgraded if necessary for their capability to provide such services. The motivators will be sent to the field at least 3 - 4 weeks ahead of the research team.

Clinical Procedures:

The clinical procedures involved in STI prevalence studies are standard medical procedures for clinical examination and clinical specimen collection. All personnel involved in clinical procedures will be medical personnel. Additional training may be provided if study personnel have limited experience with procedures such a speculum examination. A standard medical examination form will be developed with close consultation with the medical staff contracted in the study team. This would help to standardize the examination and treatment in all recruitment sites. While developing such form National STI case management Guidelines -2001 for Nepal will be consulted.

Laboratory Methods

The diagnosis of syphilis will be made by Rapid Plasma Reagin (RPR) analysis with quantification and confirmed by Treponema Pallidum Hemagglutination Assay (TPHA). TPHA will also be performed on RPR non-reactive specimens to indicate past infection with syphilis. HIV will be detected by repeat positives of 2 separate enzyme linked immunoassays (ELISAs). For the detection of *Gonorrhea* and *Chlamydia trachomatis* in women it will be performed by PCR. The specimen for purpose will be collected by vaginal swab. This test will be conducted outside of Nepal.

Quality Control Scheme

Quality control will be implemented through out the specimen collection, handling and testing. All tests will be done using internal controls. These controls will be recorded with all the laboratory data. A 10 percent sample of the total serum collected will be submitted for quality control assurance at an independent laboratory. QA will be done for HIV and syphilis. The samples will be selected randomly and a quality control test will be performed at two- week interval by a different technician in the laboratory. The quality control samples will be given a separate code number provided only by the researcher. This will assure that the person who will perform quality control will have no access to test results.

Field Collection, Storage, Transport and Laboratory Analysis of Biological Samples

Blood: 7cc of blood will be collected by venipuncture. The blood will be collected in a 7cc serum separation tube labeled with the subject's study number and the date of collection. This tube will be centrifuged to separate the sera from the clot. After centrifugation the blood samples (left in the serum separation tubes) will be stored and transported. Once the sample reaches the SACT lab in Kathmandu it will be analyzed for the detection of HIV and syphilis. These results will be sent to the AMDA field sites 4 weeks after the test to enable the study participants to receive their results if requested.

Vaginal Swab: A trained nurse will be responsible for to collect vaginal sample from vagina by inserting a dacron swab inside vagina. After collection, the swab will be placed in its container and handed to the lab technician. The lab technician will appropriately store for the transportaion.

The laboratory personnel at the selected laboratory in Kathmandu will be responsible for the following tasks:

1. Supervision of the study team laboratory technician
2. Training of the study team technician.
3. Maintaining the cold chain of the samples from collection to analysis
4. Analysis of blood sera for HIV and syphilis
5. Providing laboratory results to New ERA for data merging and analysis

6. Transportation of the collected samples from field site to laboratory in Kathmandu and out of Kathmandu will be the responsibility of New ERA.

Data Processing and Analysis

All the completed questionnaires, which have been checked by the field supervisors for completeness, will be brought to the New ERA Kathmandu office, where they will be coded and entered into computer. Errors in data entry will be minimized by double entering the data. The Foxpro database program will be used for data entry and data will be analyzed using the SPSS package. Results from the lab tests will also be sent to the New ERA office and matched to the questionnaires using the unique ID numbers developed for this purpose.

Duration of project

Total: 8 months

Dates From: July 01, 2003

Utilization of results

The results of this study will contribute to health development by contributing to the evaluation and planning of STI interventions in Nepal. Such interventions are designed to reduce the incidence of new infections, thus contributing to lower morbidity and mortality among men, women, and children. The results will be disseminated to the Ministry of Health, the participating clinics and other health providers in the country through seminars and publications and study participants through the NGOs

Personnel

Overall coordination of the study will be carried out by New ERA. However, New ERA will do sub contract with a qualified organization for the laboratory portion, i.e. the setting up a lab in the field, the clinical part including collection and storing of the samples and their testing, will be supervised by the selected organization.

Field Monitoring

There will be periodic monitoring to ensure that the study is being conducted and informed consent is being obtained according to the protocol approved by PHSC. The study coordinator will be responsible on a day-to-day basis to ensure that the study is being implemented according to protocol. In addition, the principal investigators will be on-site at the state of data collection and periodically throughout recruitment.

The Principle Investigators in conjunction other designated personnel will do the following:

1. Verify that informed consent was correctly administered for all participants by reviewing the signed copies of the PHSC and local review board-approved consent forms.
2. Review study procedures to ensure that any amendments have been approved by the PHSC and local review board and are appropriately conveyed to the study teams.
3. Determine whether adverse events have been appropriately reported to the PHSC and local review board, and that any participants experiencing adverse events have been appropriately treated and referred for further care, if necessary.
4. Verify that any events resulting in a breach of confidentiality have been reported and documented.
5. Review procedures for storing study data, ensure that information related to the study is kept confidential, and that only the necessary staff have access to that information

New ERA will regularly coordinate with monitoring individuals and implements the suggestions/advice provided by the monitors.

IV. Potential Risks and Benefits

Potential Risks

There are no physical risks to this cross sectional STI study that are more than any risk of a routine STI examination and venipuncture. There are minimal physical risks of bleeding and bruising related to venipuncture. However, the study will use only trained medical personnel to draw blood and will ensure an adequate supply of new, sterile disposable needles. However, trained medical providers will perform the examinations.

Participants will be treated with standard recommended medication for any STIs or STI syndromes identified. For individuals who are positive for syphilis and agree to treatment, there is a small risk of allergy for penicillin, the drug of choice for treatment. Alternative therapies for syphilis will be provided to penicillin allergic participants. A trained medical practitioner will administer treatment in a medical setting with the appropriate treatment for an adverse reaction in the setting. Alternative therapies will be offered to all those with a history suggestive of allergy.

There is a psychological risk due to the sensitive nature of the questions in the structured questionnaire. The questionnaire will be administered by same-sex study personnel in a private setting, will not contain identifiers and the participants will be told that they can refuse to answer any questions. There are also some psychological risks from learning that one has a STI. Study staff will be trained in counseling about STIs, pre and post-test counseling around HIV infection and HSV. Efforts will be made to refer participants for additional

services such as treatment for health problems related to HIV and/or ongoing counseling.

There may be social risks of being identified as FSW and also being diagnosed with a STI. In general the psychological and social risk of being diagnosed with HIV infection are more severe than with a diagnosis of other STIs. Study protocols that involve HIV testing will pay particular attention to confidentiality procedures and will ensure high quality training of study staff and HIV counselors. Participants will be assigned a study number at the time of enrollment. No names or other personal identifiers will be recorded anywhere. This study number will be linked with province and target group but will not be linked to any personal identifiers. No identifiers will link STI results with study participants. Study participants will have a card with a number that they must show to get their study results. The master log book linking study numbers with districts and target group will be kept with the study coordinator during clinic operations and locked in a drawer in a study office. There may also be social risks to some participants in this study "employers" for refusal to be in the study or for having a STI. In those settings where "employers" are involved in any way in allowing recruitment of the subjects we will have special precautions to ensure no coercion by the employer or reprisals for refusing to participate. There also may be some economic and legal risks to participants through the activities necessary to create sampling frames (maps of the locations where FSWs are concentrated) and find and recruit individuals. These risks will be minimized by performing data collection activities that are consistent with government policy and by involving the target group members themselves and NGOs working with these groups in the design of the study.

Potential Benefits

The principal benefit for the participants is that they will receive a comprehensive STI evaluation with free, appropriate treatment provided. They will also receive one-on-one education and counseling regarding risk reduction and preventing STIs and HIV and be given condoms as well as instruction on condom use. Participants will also be referred for additional treatments/services as appropriate. The country of host government will benefit because the information gained in this study will contribute HIV and STI control efforts.

VII. Ethical Issues

The protocol, consent forms and draft questionnaires will be submitted for approval to the Nepal Health Research Council, the entity in Nepal which provides ethical review and approval, and the Protection of Human Subjects Committee of Family Health International. Approval will be obtained from both review bodies prior to subject recruitment.

The study investigators are cognizant of the fact some of the potential participants in the target groups will be youth, under the age of 18. While the study will not specifically recruit young people we will not exclude them either.. We have

designed this study to maximally protect the participants balanced with the individual benefit and community benefits from this study. Specifically,

- Participation will be voluntary with subjects free to withdraw at any time. Withdrawal will not affect services they would normally receive.
- Informed consent is witnessed. The informed consent was pre-tested in the youth populations.
- No names will be recorded. All documentation is anonymous, linked only by a study number.
- Study staff will be trained in discussing sensitive issues and protecting participants' confidentiality and human rights.
- Specific procedures have been developed to ensure that there is maximal anonymity and that there are no "employer" reprisals for non-participation.

No parental consent will be obtained from minors who are part of these groups at high risk for STIs and HIV. The investigators feel are critical to include minors in this survey since minors often constitute a large proportion of the vulnerable populations studied. These studies will not specifically recruit minors but will include them in the cross-sectional STI/HIV prevalence assessments since they are at high risk and are targets for the STI/HIV/AIDS prevention efforts. The waiver for parental consent was felt appropriate for the following reasons:

- A waiver will not adversely affect the rights or welfare of the subject – consent is witnessed, data is anonymous and medical procedures are standard.
- The research could not practicably be carried out without a waiver – sex workers, MSM and IDU are unlikely to want to indicate their behavior to parents, if parents are available.
- Study participants will be given the opportunity to obtain lab results and counseling. The results of the survey will be disseminated to the target groups to increase awareness and encourage prevention and treatment seeking behavior.
- At present there are minimal conflict situations in Nepal. People are free to move in their places and have no major restrictions on seeking health services. Maoist and government are having peace talks. In Nepal adolescents, particularly 16-18 years old also have access to health services without their parents consent. They even have access to reproductive health services.

VIII. Dissemination Plans

A written report of the results of the study will be provided to the Ministry of Health, the National AIDS Control Program, the USAID mission and other NGOs and agencies in the country working on STI and HIV issues. An oral debriefing will also be done with key interested parties including relevant ministries, other donors and key NGOs, and specific disseminations will be done for the target

groups. Results from this study will be presented at national, regional and international meetings and published in international peer-reviewed journals.

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ALONG THE TERAI HIGHWAYS ROUTES
COVERING 22 DISTRICTS OF NEPAL**

Detail Budget

(For the period July 01, 2003 to February 29, 2004)

S.N.	Budget Category	Per Month	Month	Total	
				NRs.	US \$
1.0	Salaries				
1.1	Project Director (1)	27,000	8	216,000	2,833
1.2	Research Officer (1)	15,000	8	120,000	1,574
1.3	Research Assistants (2)	12,000	13	156,000	2,046
1.4	Research Assistants (4)	14,000	16	224,000	2,938
1.5	Account/Admin. Assistant	8,200	8	32,800	430
1.6	Supervisors (16)	7,000	48	336,000	4,407
1.7	Motivators (8)	6,000	12	72,000	944
1.8	Health Assistant (1)	20,000	2.5	50,000	656
1.9	Staff Nurses (3)	20,000	7.5	150,000	1,967
1.10	Runners (4)	4,500	10	45,000	590
1.11	Computer Programmer (1)	18,500	4	74,000	970
1.12	Coders & Data Entry Persons (4)	6,000	12	72,000	944
1.13	Word Processing (1)	11,500	3	34,500	452
	Sub-Total Salaries			1,582,300	20,751
2.0	Fringe Benefits				
2.1	Project Director (1)	14,500	8	116,000	1,521
2.2	Research Officer (1)	8,000	8	64,000	839
2.3	Research Assistants (2)	6,500	13	84,500	1,108
2.4	Computer Programmer (1)	10,000	4	40,000	525
2.5	Word Processing (1)	6,000	3	18,000	236
	Sub-Total Fringe Benefits			322,500	4,229
3.0	Consultants				
3.1	Resource Person (5)	30,000	5	150,000	1,967
	Sub-Total Consultants			150,000	1,967
4.0	Equipment/Procurement	Rate	Units/Sites		
4.1	Laptop (Dell)	190,000	1	190,000	2,492
	Sub-Total Equipment/Procurement			190,000	2,492
5.0	Travel/Transportation	Rate	Trips/Days		
5.1	Air Travel	5,500	50	275,000	3,607
5.2	Surface Travel	9,000	8	72,000	944
5.3	Local Transport	15,000	8	120,000	1,574
5.4	Vehicle Rental	5,000	120	600,000	7,869
5.5	Per Diem:	Rate	Days		
5.5.1	Executives	600	30	18,000	236
5.5.2	Seniors	400	600	240,000	3,148
5.5.3	Juniors	225	1900	427,500	5,607
	Sub-Total Travel/Transportation			1,752,500	22,985

S.N.	Budget Category	Per Month	Month	Total	
				NRs.	US \$
6.0	Office Expenses	Per Month	Month		
6.1	Office Operational Cost	31,000	8	248,000	3,252
	Sub-Total Office Expenses			248,000	3,252
7.0	Other Direct Cost	Rate	Persons/Days		
7.1	Questionnaire Printing	30		36,000	472
7.2	Field Equipment Rental	25		63,250	830
7.3	Transportation Expenses to CSWs	350	600	210,000	2,754
7.4	Transportation Expenses to Truckers	150	400	60,000	787
7.5	Lab Facilities Expenses	6,250		50,000	656
7.6	Report Production	25		10,000	131
7.7	STI Management Services and Others:				
7.7.1	STI Management(syndromic management)	1,000	300	300,000	3,934
7.7.2	Treatment during post test counseling of STI	18,750		150,000	1,967
7.7.3	Post test Counseling STI,HIV	50,000		400,000	5,246
7.7.4	Room Rental for Clinic Setup	325	180	468,000	6,138
7.7.5	Clinical Supplies:			15,000	197
	BP Instruments (5)				
	Thermometers (6)				
7.7.6	Defreezer	25,000	1	25,000	328
7.7.7	Cold Chain Box	12,500	8	100,000	1,311
	Sub-Total Other Direct Cost			1,887,250	24,751
8.0	Sub-recipient				
8.1	SACTS			1,945,600	25,516
	Sub-Total Sub-recipient			1,945,600	25,516
9.0	Total Project Cost (1 to 8)			8,078,150	105,943
10.0	NHRC Fee (1% of Total Project Cost)			80,782	1,059
11.0	Total (9+10)			8,158,932	107,002
12.0	New ERA, G & A (24.96%)			2,036,469	26,708
	Grand Total			10,195,401	133,710

CURRICULUM VITAE

Name: SIDHARTHA MAN TULADHAR
Office: New ERA
P.O.Box 722
Kalo Pul, Sifal
Kathmandu, Nepal
Phone: 4413603, 4430060 and 4423176, Fax: 977-1-4419562

Home Address : Lazimpat, Kathmandu, Nepal
Mailing Address : GPO Box 2057, Kathmandu, Nepal
Residence Phone: 4425227

EDUCATIONAL QUALIFICATIONS

Tribhuvan University 1977 M.Sc. (Physics)
Kathmandu, Nepal

University of Florida 1981 One Semester Course in Alternative Energy Technology. Course
Gainesville, Florida, USA included the application of Solar Energy, Wind Energy, Biomass,
etc.

Employment Record:

1977 – Present Employer: NEW ERA
Present Position Deputy Director

WORK EXPERIENCE

Experiences in New ERA include the working in the following projects in different capacities.

September 2001 to Present **Project Director:** "South Asia Regional HIV Database Center- Nepal Database Center". Responsibilities: Setting up Nepal Database Centre for HIV Database, Coordinating the collection of HIV related documents of Nepal and database management, attending regional meetings to finalise the indicators for data entry in the database. (UNAIDS –Inter-country Programme, South Asia/Delhi)

September 2002 to Present **Project Director:** "Behavioral Sentinel Surveillance Survey in the Highway Route of Nepal Round 5" Fifth Cycle of BSS. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

August 2001 to Present **Project Director:** "Behavioral and Sero Prevalence in Survey Among IDUs in Pokhara and Eastern Nepal". This study estimate for the first time the size of male and female IDUs in Pokhara and Eastern Nepal and measure the HIV prevalence among IDUs. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of

the research findings. (FHI/Nepal)

October 2001 to
September 2002

Project Director: "Behavioral and Sero Prevalence in Survey Among IDUs in Kathmandu". This study will try to estimate for the first time the size of male and female IDUs in Kathmandu and measure the HIV prevalence among IDUs. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

September 2001 to June
2001

Project Associate: "STD/HIV prevalence and risk factors among Nepali migrants and non-migrants". This study will try to measure the prevalence of several sexually transmitted diseases (HIV-1, gonorrhea, syphilis, chlamydial infection) STD related syndromes, and related behaviors such as number of sex partners, condom use, mobility, and migration to India. Responsibilities: Overall responsibility of the study including: Research design, data analysis and assist in preparation of report and dissemination of the research findings. (FHI/Nepal)

September 2001 to March
2002

Project Director: "Behavioral Sentinel Surveillance Survey in the Highway Route of Nepal Round 4" Third Cycle of BSS. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

May 2000 to Dec. 2002

Project Director: "Estimation of Sex Workers and Behavioral Sentinel Surveillance Survey of Sex Workers in Kathmandu Area." This study will try to estimate for the first time the size of Sex Workers in Kathmandu and mapping of Sex workers' soliciting area in Kathmandu. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

August 2000 to June 2000

Project Director: "Behavioral Sentinel Surveillance Survey in the Highway Route of Nepal Round 3" Third Cycle of BSS. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

August 1999 to July 2000

Project Director: "Behavioral Sentinel Surveillance Survey in the Highway Route of Nepal Round 2" Second Cycle of BSS. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

January 1999 to March
1999

Project Associate: "A Study on Health Care Providers (HCPs) STD Case Management" Responsibilities: Research Design, Training of Field researchers, part data analysis, part report writing. (FHI/Nepal)

November 1998 to
December 2000

Project Director: "STD and HIV Prevalence Survey Among Female Sex Workers and Truckers on Highway Routes in the India Border Area of Nepal". Responsibilities: Research design, adopt methodology to recruit sex workers and the truckers, training of interviewers,

management of serum collection by establishment of mobile lab in the rural area of Nepal, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

January 1998 to October 1998

Project Director: "Behavioral Sentinel Surveillance Survey in the Highway Route of Nepal Round 1". This survey is first of the five cycles of the annual behavioural survey high risk groups – sex workers and their clients along the major high way route of Nepal. Responsibilities: Overall responsibility of the study including: Research design, adopt methodology to recruit sex workers and the client, training of interviewers, data analysis and preparation of report and dissemination of the research findings. (FHI/Nepal)

February 1997 to August 1998

Study Coordinator: "Forest Products Market/Enterprise" Responsible for co-ordination of study among the project partners. (Biodiversity Support Project/ Ban Udyam, New ERA)

October 1996 to June 1997

Project Associate: "Chemists' STD Drug dispensing Behaviour and HIV Communication: An Evaluation of Training using Simulated STD Patients". Responsibility: Overall research design, methodology, training of interviewers, data analysis, finalization of report (FHI/Nepal)

October 1996 to June 1998

Project Coordinator: A Situation Analysis of Sex Work and Trafficking in Nepal with Reference to Children. (Sponsored by UNICEF/Nepal. Responsibilities: Design of the Study, coordinating the field teams to 40 districts of Nepal, Design of Questionnaires, Training of the field researchers (special skills are imparted to the researchers on the technique of interviewing the commercial sexworkers), analysis of data and report writing.

September 1996 - December 1996

Project Associate: "Community Forest Management with Relation to Population - A Case Study " FAO/Rome Responsibilities: Design of Survey and analysis of data and writing a part of report.

June 1996 -August 1996

Project Director: "Rapid Qualitative Assessment of AIDSCAP Effects on Behavior Change Among Commercial Sex Workers and their Clients".(Sponsored by AIDSCAP/Nepal). Responsibilities: Over responsibility of the Study including : design research methodology, training of interviewers, data analysis, report writing, etc.

January 1996 to March, 1996

Project Director: "A Baseline Study of Simulated STD Patients and Chemists in the Land Transportation Routes from Naubise to Janakpur and Birgunj"(Sponsored by AIDSCAP/Nepal). Responsibilities: Over responsibility of the Study including : design research methodology, training of interviewers, data analysis, report writing, etc.

July 1995 to September 1995

Project Associate: "Achievement Study :Basic and Primary Education Project". Sponsored by BPEP. The objective of the study is to assess achievement of Primary School Children, and identify the learning influencing factors. Methodology used to collect data - Survey of 126 schools in 8 districts and conduct FGD.

January, 1995 to June, 1995

Project Director: "Users Survey of Biogas Plants in Nepal" (sponsored by SNV/N) Responsibilities: Design of research methodology, data analysis, training of interviewers and report writing. This study is an evaluation of the Biogas plants installed in different part of Nepal.

January 1985 to December, 1987	<u>Project Director:</u> "Turbine Driven Agro-processing Project (sponsored by AT International, USA). This is an action-research project conducted in Ramchakhola Watershed in Lamjung District (Western Nepal). The aim of this project is to establish a water turbine mill and make it a commercial enterprise through the participation of local people. The ultimate of the project is to make the local people self-reliant. Responsibilities include research design, coordination of related government offices, agencies, turbine mill manufacturing workshops, consultants and local people to make a plan of action, motivation of local people to articulate in the project implementation; monitoring the project; training of the project staff, etc.
September 1986 to December 1987	<u>Village Technologist:</u> "Socio-economic Survey for Soil and Water Conservation in Bagmati Watershed Area Project" (sponsored by EEC/IDC). Responsibilities: as a project associate of this project are to make an inventory and assessment of the village technologies available in the project area (42 panchayats of five districts); to recommend in the improvement of existing technologies and to suggest socially-acceptable village technologies; to outline a system of monitoring and evaluating the success and progress of the action program propose
January 1984 to December 1984	<u>Project Director:</u> "Evaluative Study of Biogas Plants in Nepal" (sponsored by UNICEF/Nepal). Responsibilities ties: Design of research methodology, data analysis, training of enumerators, and report writing. This study is one of the comprehensive study of the situation of Biogas plants in Nepal--Biogas technology and economy. The study also makes recommendations for the better planning of the Biogas programmes in Nepal.
June 1983 to January 1984	<u>Project Director:</u> "Baseline Survey of Basic Needs in Local Development" (sponsored by UNICEF/Nepal). Responsibilities: Design of research methodology, training of the enumerators, data analysis, and report writing. This survey was conducted in four districts to establish a baseline and a basis for implementation of BSLD program.
December 1982 to May, 1983	<u>Project Director:</u> "Study on Status of the Rural Blacksmithy in Eastern Nepal" (sponsored by UNIDO/Vienna). Responsibilities: Design of research methodology, overall supervision of the project, framing of questionnaires, training of enumerators, supervision of field staff, data analysis and report writing. This study was conducted to assess the situation of hill blacksmiths--their technology, marketing of the projects, and the economy, and to recommend for the improvements in production technology and upgrading of the smiths.
August 1982 to December 1982	<u>Survey Coordinator:</u> "Sanitation in Khokana: A Baseline Health Survey and Sanitation Campaign in Khokana" (sponsored by UNICEF/N). Responsibilities: Designing of the research, supervision in framing of questionnaire, training of enumerators, data analysis and writing report; organizing campaign on sanitation and health in Khokana.
June 1982 to August, 1982	<u>Consultant:</u> "Evaluation of the Private Toilet and Tap Program in the Bhaktapur Development Project (BDP) (sponsored by GTZ). As a consultant to the project, responsibilities were to assist and train the BDP Evaluation Unit Staff to conduct evaluation study and including report writing.
1982	<u>Research Supervisor:</u> "Baseline Survey for Community Forestry Development Project--a project of HMG/FAO/World Bank" (sponsored by CFDP). Responsibilities: Supervision of field staff and data collection.

This survey was conducted to establish a baseline enabling CFDP to monitor and evaluate its programmes.

1981 **Research Officer:** "Study on Inter-regional Migration in Nepal" (sponsored by National Commission on Population, Kathmandu). Responsibilities included the coordination of the consultants, data collection, assist in report preparation

1980 **Assistant Research Officer:** "Study on Evaluation of Education Skill Training and Manpower Development Training Program" (sponsored by USAID/Nepal). Responsibilities: interviewing with the trainees returned from USA who are now mostly in higher position of the HMG offices, data analysis and assist in report writing.

1980 **Senior Research Assistant:** "Impact of FAO Assisted World Food Program/in Resettlement Program in Nepal" (sponsored by FAO/Rome). Responsibilities: data collection.

March 1979 to August 1980 **Research Supervisor:** "Population Education in Organized Sector" (sponsored by Labour Department, HMG). Responsibilities: Framing of questionnaires, training of enumerators, data analysis and report writing.

1978 to 1979 **Research Assistant:** "Study on Radio for School Broadcasting in Nepal" (sponsored by UNICEF/N). Responsibilities: framing of questionnaires, supervision of data tabulation, field data collection, data analysis and assist in report writing. This study was carried out to determine the effectiveness of radio broadcasting for primary grades.

1978 **Research Assistant:** "Study of Water Supply and Sanitation as Components of Primary Health Care in Nepal" (sponsored by UNICEF/WHO). Responsibilities: data collection.

1977 to 1978 **Research Assistant:** "Study of Impact of Free Textbook distribution Program in Primary School Enrollment" (sponsored by UNICEF/N). Responsibilities: framing of questionnaires, data collection, data analysis and assist in report writing; and writing of report of case studies schools.

OTHER WORK EXPERIENCES

Research Team Member and Photographer: In an evaluative study "Socio- economic and Environmental Changes in Some Villages of Palpa District". Conducted by New ERA for Tinau Watershed Project (January 1985 to March 1985). Responsibilities included the photographic documentation of environmental changes brought by the implementation of Tinau Watershed Project.

Technical Editor: In "Traditional Technology of Nepal: A Survey of Eight Technologies". This was carried out for the Research Center for Applied Science and Technology (RECAST), Kirtipur, Kathmandu.

National Development Service (NDS) Volunteer: As a partial fulfillment of M.Sc. Degree, spent 10 months 1975) in village of Dhikur Pokhari Panchayat in Kaski district.

SEMINAR AND WORKSHOPS ATTENDED

1981 USAID/Nepal Evaluation Workshop (March 18 and 19).

1983 Family Planning Operations Research Workshop (February 27-March 4), Organized by Population Council/Bangkok and National Commission on Population, Kathmandu.

- 1985 Seminar on Biogas - Problems and Policy (October 1). Organized by Water and Energy Commission Secretariat, Kathmandu.
- 1985 National Seminar on Application of Science and Technology for Rural Development in Nepal (November 4-6). Organized by Research Center for Applied Science and Technology, Kathmandu.
- 1986 Workshop on Usefulness and Maintenance of Turbine Mill (June 4 and 5). Organized by Development and Consulting Services, Butwal.
- 1996 Task Force Meeting on Community Forest Management with Relation to Population, Bangkok, Thailand. (November 1 - 7, 1996)
- 1997 HIV risk behavioral surveillance: country examples, lessons learned, and recommendations for the future, Bangkok, Thailand (August 11 – 14, 1997)
- 2002 Workshop on Monitoring Behaviors as a Component of Second Generation Surveillance in Asia, Family Health International, Bangkok, Thailand, May 2002

THESIS

Sferic Level Measurement in Kathmandu--A thesis submitted in partial fulfillment of the requirements for the Degree of Science in Physics to Physics Instruction Committee, Institute of Science, Tribhuvan University, Kathmandu, 1977.

ASSOCIATION WITH NEW ERA

Joined New ERA, a non-profit research organization, in October 1977 and currently a permanent staff with the designation of Research Officer. Presently Member of Board of Directors and Member of Executive Committee.

TRAVEL

Within Nepal - In course of project work, travelled more than 50 districts.

Outside Nepal – USA, Australia, Singapore, Thailand, Bangladesh and India

OTHER EXPERIENCES

1. Worked with Greenpeace in Amherst, MA, USA as a fundraiser in 1989 -1990
2. Computer Knowledge:
 - Internet (HTTP, FTP, Gopher, Email,etc.).data and information retrieval, library search by the use of internet,
 - Most of Windows and DOS based softwares including Statiscal Package SPSS, Database, Spreadsheet, Wordprocessing.
3. Worked in different capacities while seven-years stay in USA.

HOBBIES

Philately(specialise in Tibet and Nepal), Numismatics, Photography and Videography

FAMILY HEALTH INTERNATIONAL (FHI), NEPAL

Oral Informed Consent

Name of Research Study: STI/HIV Prevalence and Risk Behavioral Study in 22 Terai Districts of Nepal

Principal Investigators: Siddhartha Man Tuladhar, New ERA, Kalopool, Kathmandu
Laxmi Bilas Acharya, Family Health International/Nepal
Stephen Mills, Family Health International

Co -Principal Investigators: Jim Ross, Family Health International/Nepal
Vijaya Lal Gurubacharya, STI/AIDS Counseling and Training Services, New Road, Kathmandu

Introduction

This Consent Form provides you the information on the above mentioned research. In order to ensure that you are informed about the study and your participation in the study, you will be asked to read it or it will be read for you. You will be asked to show your agreement on whether you are willing to participate in the study or not by saying it loudly in presence of other two witnesses. The whole research work has been designed as per the norms set by Family Health International (FHI) and Nepal Health Research Council (NHRC). The ethics review committee(s) of Family Health International and the Nepal Health Research Council have approved this research. We will provide you a copy of this, if you want. This consent form might contain some words that are unfamiliar to you. Please do not hesitate to ask us if you do not understand or you have any query.

Rational for the Research

You are being asked to participate in the research which aims to find out the rate of STI/HIV among the people who live and travel in the Terai districts, and what are the risk behaviors among the people that have these infections. The Ministry of Health and local groups will use the findings of this research in planning and formulating strategies to prevent such infections.

General Information on Research Methodology

If you agree to participate in this research we would like to convince you that your name will not be taken in any parts of the research. We will ask you some questions and then ask you to provide a urine and blood sample. This will require you to urinate into a cup and also have 5-6 m.l. blood drawn by 10 m.l. disposable syringe. For women we will also ask you to provide a sample of your vaginal fluid by having you place a cotton swab into your vagina. If it is determined that you have any symptoms that are consistent with an STI, we will provide treatment free of charge. The diagnosis and treatment of this type of disease will be done on the basis of National STI Case Management Guidelines.

Your Role in the Research

Your participation in the research will take about one hour. About 600 females and 400 males who live or travel in the Terai districts will participate in the research.

You will be asked some questions regarding your age and education if you agree to participate in the research. We will also ask you some questions about your travel, the history of your sexual behavior and symptoms of sexually transmitted diseases and provide you counseling on HIV that causes AIDS and other sexually transmitted diseases as well. We will explain you what the laboratory (Lab.) test is and what treatment and care is available to you. We will then take your, urine, blood and vaginal fluid samples.

Your name will neither be recorded on urine, blood and vaginal fluid sample nor in the questionnaire. All the questionnaire and samples will be labeled with a code number. Different types of STIs, gonorrhea, chlamydia trachomatis, syphilis and HIV will be examined from the collected samples. As these tests can not be held in Terai area, the samples will be sent to Kathmandu and out of Nepal for examination. We can provide you gonorrhea, chlamydia trachomatis, syphilis and HIV test results (reports) after a month. The research team will inform you about the right place for you to collect your report. You can collect these reports only by showing the card bearing the study number given to you by us. Otherwise we will not be able to provide you the report. This appears to be the best way to keep the test report confidential.

Possible Risk and Benefits

The risk of this study is the minor discomfort during blood drawing. Providing urine and a vaginal swab sample do not put you at any risk. Since your name has not been recorded anywhere, no one will be able to know that this laboratory test report belongs to you. Some of the questions we ask might put you in trouble or make you feel uncomfortable to answer them. You are free not to answer such questions and also to withdraw yourself from participating the research process at any time you like to do so. You might feel some mental stress after getting your report. If you come for the report, you will also get counseling on HIV.

To talk about the benefits of this research, you will be provided with free treatment, if currently you have any STI symptoms. You will be given lab test result of gonorrhea, chlamydia trachomatis, syphilis and HIV and made aware of how STI/HIV is transmitted and how it can be prevented and controlled. You will also be provided with information on safe sex. The information we obtain from this research will help us plan and formulate strategies to control and prevent further spread of AIDS and other sexually transmitted diseases.

If You do not Give Your Consent to Participate in the Research

You are free to decide whether to participate or not. Whatever be your decision, this will not affect in any way in the health services you have been seeking now.

Confidentiality

We will do our best to deal with the information regarding you and your participation in the research as a highly confidential matter. We are not interested to know your name so it will not be recorded anywhere. A code number will be assigned to each questionnaire and sample of your blood. You will be given a card with the code number. If you want to get the report of lab test of your urine, blood and vaginal swab, you can do so by showing the card with the code number to us. We will not be able to identify you and give the report to you without the card.

We will not record your name anywhere so your name will not be mentioned in the report of this research, if published. However, the officials of International Health Center, in rare cases, might show interest to have a look at the record of the participants of the research and court sometimes might ask to show the record of the research to others. Whatever be the case, these records will not have your name.

Compensation

You will be given vitamin for one month, small gift, condom and some reading materials about HIV/AIDS and STI as compensation for your participation in the research.

Withdraw from Participating the Research

You are free to withdraw yourself from participating the research process at any time you like or not to respond the questions you do not prefer to answer.

Contact

If you have any questions or queries regarding this **research** please contact the following persons/agencies:

Siddhartha Man Tuladhar
New ERA, Kalopool, Kathmandu, Nepal
Phone Number: 01-4413603

Jim Ross
Family Health International (FHI),
Gairidhara, Kathmandu,
Phone Number: 01-4427540

Vijaya Lal Gurubacharya
STI/AIDS Counseling and Training Services
Central Clinic, New Road, Kathmandu, Nepal
Phone Number: 01-4224549

If you have some problems or queries regarding **your rights** as a participant of this research please contact:

Jim Ross
Family Health International (FHI)
Gairidhara, Kathmandu, Nepal
Phone Number: 01-4427540

OR

David Borasky
Institutional Representative, Human Rights Protection Committee,
P.O.Box. 13950,
Research Triangle Park, North Carolina, USA
Phone Number: 00-1-919-405-1445,
E-mail: dborasky@fhi.org
OR Cable: FAME.HEALTH

If you encounter any problem just because of **your participation** in this research please contact:

Siddhartha Man Tuladhar
New ERA
Kalopool, Kathmandu, Nepal
Phone No. 4413603, 4430060

OR

Asha Basnyat
Family Health International (FHI)
Gairidhara, Kathmandu
Phone No. 4427540

If you need more help, we can provide you a referral where you may have to pay.

Volunteer Agreement

If you have fully understood what is being asked to you in the process of research, the person who is explaining these things to you will read the following words for you and sign on the form.

"I have read and explained the contents of this consent paper to the respondent. He explained the research activities back to me and from his understanding I am convinced that he is fully aware of the research activities. He has given his oral consent, on his own willingness, to participate in this study. No pressure was given to him to participate in the research work".

Date: _____

Signature of the person who obtained consent

I was present while reading out the benefits, risk and methods of the study for the respondent. All the questions were answered and the respondent has agreed to participate in the study.

Date: _____

Signature of the witness

CONFIDENTIAL

HIV/STI PREVALENCE STUDY

22 Districts of Terai Highway

FHI/SACTS/New ERA - 2003

Female Questionnaire

1.0 General Information

Name of Interviewer: _____

101. Respondent ID Number _____

102. Interview Location

102.1 District: _____

102.2 VDC/Municipality: _____

102.3 Ward #: _____

102.4 Village/Tole: _____

103. Date of Interview : 2060 / _____ / _____

104. Where were you born?

District: _____

VDC/Municipality: _____

Ward #: _____

Village/Tole: _____

2.0 Personal Information

201. How old are you?
_____ (Write the completed year)

202. What class have you passed?

_____ (Write '0' for illiterate, '19' for the literate without attending the school, and exact number for the passed grade)

203. What is your present Marital Status ?

1. Married
2. Divorced/Permanently Separated
3. Widow
4. Never Married
5. Others (specify) _____

204. How long have you been exchanging sexual intercourse for money or other things?

For _____ Years _____ Months

98. Don't know

99. No answer

204.1 Have you exchanged sex for money or other things in the past year?

1. Yes
2. No (Go to Q. 501)

205. For how long have you been working as a sex worker from this location?
(If less than one month code '0' if more than one month answered code exact completed month)

_____ months ago 98. Don't know/can't say

206. In the last two years have you worked in this profession in other locations?

1. Yes
2. No (Go to Q 206.2)



206.1 Where did you work? (List all the places)

Name of the
VDC/Municipality

District

206.2 Have you ever worked as a sex worker in India?

1. Yes
2. No (Go to Q 301)



206.2.1 Where did you work in India? (List all the locations worked in India).

Locations

206.2.2 How long did you exchange sex for money in India? (Count the total number of days/months/years worked as sex worker in India)

_____ Years _____ Months _____ Days

206.3 Were you coerced to go there or you went there on your own?

1. Coerced 2. On my own

206.3.1 How old were you when you first went to do sex work in India?

_____ Years (completed years)

206.3.2 How old were you when you came back last time from India?

_____ Years (completed years)

3.0 Information on Sexual Intercourse

301. How old were you when you had first sexual intercourse?

_____ Years old (completed years) 98. Don't know/can't recall

302. When did you have the last sexual intercourse with a client?

_____ Days before

303. How many people did you have sexual intercourse with on that day?

_____ (Number)

304. How much money (including cash equivalent of gift) was given to you by your last client?

1. ____ Rs. (Cash)+(Gift equivalent to Rupees) ____ Rs. = Total Rs. ____

2. Others (Specify) _____

305. What is the occupation of the clients who frequently visit you? (Multiple answers possible. Do not read the possible answers given below)

- | | |
|----------------------|---------------------------|
| 1. Transport worker | 5. Student |
| 2. Migrant worker | 6. Rickshawala |
| 3. Industrial worker | 9. Others (specify) _____ |
| 4. Police/Soldier | 98. Don't know |

306. Have you ever used a condom?

1. Yes

2. No (Go to Q. 309)



307. Did your last client use a condom?

1. Yes

2. No

308. In the past year, how often did you use condoms with clients?

1. All of the time (Go to Q. 309)

2. Most of the time (Go to Q. 309)

3. Some of the time (Go to Q. 309)

4. Rarely (Go to Q. 309)

5. Never (Go to Q. 308.1)

308.1 Why?

309. Do you have any client who returns regularly to you?

1. Yes

2. No (Go to Q 310)



309.1 Do you use condom with them?

1. Yes

2. No (Go to Q 310)



309.1.1 If yes, how often?

1. Always

2. Sometimes

310. Do you have a husband or male friend currently living with you?

1. Husband

2. Male Friend

3. No (Go to Q. 311)

310.1 Do you have sexual intercourse with him?

1. Yes

2. No (Go to Q. 311)



310.1.1 If yes, how often he uses a condom with you?

1. Always

2. Sometimes

3. Never

311. During the past one year, have you had sexual intercourse with other than client, male friend/husband?

1. Yes

2. No (Go to Q. 401)

311.1 If yes, how often he used condom with you?

1. Always

2. Sometimes

3. Never

4.0 STI (Sexually Transmitted Infection)

401. Do you currently have any of the following symptoms?

Symptoms	Yes	No
1. Pain in the lower abdomen	1	2
2. Pain during urination	1	2
3. Frequent urination	1	2
4. Pain during sex	1	2
5. Ulcer or sore in the genital area	1	2
6. Itching in or around the vagina	1	2
7. Vaginal odor or smell	1	2
8. Vaginal bleeding (unusual)	1	2
9. Discharge from the vagina	1	2
10. Genital Warts	1	2
11. Others (Specify) _____	1	2

402. If you do not have any of the above symptoms now, have you had any of them in the Past year/in the Past one month?

Symptoms	In the past year		In the past month	
	Yes	No	Yes	No
1. Pain in the lower abdomen	1	2	1	2
2. Pain during urination	1	2	1	2
3. Frequent urination	1	2	1	2
4. Pain during sex	1	2	1	2
5. Ulcer or sore in the genital area	1	2	1	2
6. Itching in or around the vagina	1	2	1	2
7. Vaginal odor or smell	1	2	1	2
8. Vaginal bleeding (unusual)	1	2	1	2
9. Discharge from the vagina	1	2	1	2
10. Genital Warts	1	2	1	2
11. Others (Specify) _____	1	2	1	2

(If answer is No to all in the past year and in the past month in Q. No. 402, go to Q. No. 501)

402.1. Have you been treated for any of these symptoms?

Symptoms	Yes	No
1. Pain in the lower abdomen	1	2
2. Pain during urination	1	2
3. Frequent urination	1	2
4. Pain during sex	1	2
5. Ulcer or sore in the genital area	1	2
6. Itching in or around the vagina	1	2
7. Vaginal odor or smell	1	2
8. Vaginal bleeding (unusual)	1	2
9. Discharge from the vagina	1	2
10. Genital Warts	1	2
11. Others (Specify) _____	1	2

(If answer is 'No' to all in Q. No. 402.1, go to Q. No. 501)

403. Where did you go for the treatment? (Multiple answers. Do not read the possible answers given below).

- | | |
|-----------------------------------|------------------|
| 1. Private clinic | 2. FPAN Clinic |
| 3. Health Post | 4. Health Center |
| 5. Hospital | 6. Pharmacy |
| 7. Self Treatment (Specify) _____ | 8. No Treatment |
| 9. Others (Specify) _____ | |

5.0 Use of Injecting Drugs

501. Some people have tried injecting drugs using a syringe. Have you ever injected drugs? (Drugs injected for medical purpose or treatment of an illness do not count)

1. Yes
 2. No
 98. Don't Know
 99. No Response
- ☐ → (STOP INTERVIEW)

502. Did you inject drug in the past year ?

1. Yes
 2 No (STOP INTERVIEW)

503. Think about the last time you injected drugs. Did you use a needle or syringe that had previously been used by someone else?

1. Yes
 2. No
 98. Don't Know
 99. No Response

504. Think about the time you injected drugs during the past one month. How often was it with a needle or syringe that had previously been used by someone else?

- 3. Every Time
- 4. Almost Every Time
- 5. Sometimes
- 6. Never
- 98. Don't Know
- 99. No Response

Thanks to the respondent and send him to the clinician

HIV/STI PREVALENCE STUDY**22 Districts of Terai Highway****FHI/SACTS/New ERA - 2003****Male Questionnaire****1.0 General information:**

Name of Interviewer: _____

101. Respondent ID Number: _____

102. Interview Location

102.1 District: _____

102.2 VDC/Municipality: _____

102.3 Ward #: _____

102.4 Village/Tole: _____

103. Date of Interview: 2060 / ____ / ____

104. Where were you born?

District: _____

VDC/Municipality: _____

Ward #: _____

Village/Tole: _____

105. Where do you live now (Name of Current Place of Residence)?

District: _____

Name of the VDC/Municipality: _____

106. Before you moved there, where did you live?

District: _____

Name of the VDC/Municipality: _____

107. With whom are you staying currently?

1. With the family (wife and children)
2. With friends
3. Alone
4. With parents
5. Others (specify) _____

108. How old are you?

_____ (write the completed year)

109. What class have you passed?

_____ (write '0' for illiterate, '19' for the literate without attending the school, and exact number for the passed grade)

110. What is your present marital status?

1. Married
2. Divorced/Permanently Separated (**Go to Q 113**)
3. Widower (**Go to Q 113**)
4. Never Married (**Go to Q 113**)

111. Are you presently living with your wife?

1. Yes
2. No

112. What is the approximate number of days in a month that you stay away from your family?

_____ days

999. I always stay with my family

113. Have you ever driven truck to India?

1. Yes
2. No (**Go to Q 201**)

113.1 If Yes, which town/city have you driven to?

Name of town/City

Distance from the border
(Hour by Truck/Km.)

113.2 When was the last time you had driven truck to India?

1. _____ Days ago
2. _____ Months ago
3. Other (specify) _____

2.0 Information on Sexual Intercourse

201. Have you ever had sexual intercourse with a woman before?

1. Yes 2. No (Go to Q. 501) 3. No Response

202. Have you ever had sex with a sex worker?

1. Yes 2. No (Go to Q 301) 3. No Response

202.1 Have you had sex with a sex worker in the past year?

1. Yes No (Go to Q 207)

202.2 During the past year, how many different FSWs did you have sexual intercourse with?

_____ (Number)

203. How many times did you visit sex workers in the past three months?

_____ times
_____ (Others specify)

204. Did you use a condom when you had last sexual intercourse with a sex worker?

1. Yes 2. No

204.1 In the past year, how often did you use condom with sex worker?

1. Always (Go to Q 205)
2. Most of the time (Go to Q 205)
3. Sometimes (Go to Q 205)
4. Rarely (Go to Q 205)
5. Never (Go to Q 204.1.1)

204.1.1 Why did you never use condom?

205. Where did you find that last sex worker for sexual intercourse?

1. Lodge/Hotel
2. Eating-place (Restaurant)
3. *Bhatti* (Liquor shop)
4. On the street
5. In Forest
9. Others (specify) _____

206. How many rupees and/or other items did you pay the sex worker that time?
(Ask the money spend for sexual intercourse only)

1. _____ Rs. (Cash)+ (Gift equivalent to Rupees) _____ Rs. = Total Rs. _____

2. Other (specify) _____

207. Have you ever had sex with sex workers in India?

1. Yes
- No (Go to Q 301)

207.1 Did you have sexual intercourse with sex workers in India in the past year?

1. Yes
2. No (Go to Q. 301)



207.1.1 Where?

Name of the place: _____

207.1.2 When did you had the last sexual Intercourse with sex workers in India?

_____ Weeks ago

207.2 Did you use a condom when you had last sexual intercourse with a sex worker in India ?

1. Yes
2. No

207.2.1 In the past year, how often did you use condom with sex worker in India ?

1. Always
2. Most of the time
3. Sometimes
4. Rarely
5. Never

3.0 Sexual Behavior with Others than Sex Workers

(Note: Ask to the married trucker only)

301. When is the last time you had sex with your wife?

_____ Days ago

302. When is the last time you had sex with your girl friend?

_____ Days ago 96. No girl friend

303. Did you use a condom in every sexual intercourse with those women?

Sexual Partners	Used Condom	
	Yes	No
1. Wife	1	2
2. Girl friend	1	2

4.0 STI (Sexually Transmitted Infection)

401. Do you currently have any of the following symptoms?

Symptoms	Yes	No
Urethral Discharge	1	2
Pain During Urination	1	2
Burn When Urinating	1	2
Ulcer or Sore in the Genital Area	1	2
Others (Specify) _____	1	2

402. Have you been treated for any of these symptoms?

1. Yes 2. No (Go to Q. 405)

403. Where did you go for the treatment? (Multiple Answers, Do not read the possible answers given below)

- | | |
|-------------------|-----------------------------------|
| 1. Private clinic | 6. Pharmacy |
| 2. FPAN Clinic | 7. Self Treatment (Specify) _____ |
| 3. Health Post | 8. No Treatment |
| 4. Health Center | 9. Others (Specify) _____ |
| 5. Hospital | |

404. For which symptoms did you get treatment? Specify the treatment.

Symptoms	Treatment
Urethral Discharge	
Pain during urination	
Burn when Urinating	
Ulcer/sore in the genital area	
Others (Specify)	

405. If you do not have any of the above symptoms now, have you had any of them in the past year/in the past month?

Symptoms	In the Past Year		In the Past Month	
	Yes	No	Yes	No
Urethral Discharge	1	2	1	2
Pain During Urination	1	2	1	2
Burn When Urinating	1	2	1	2
Ulcer or Sore in the Genital Area	1	2	1	2
Others (Specify)	1	2	1	2

(If answer is 'NO' to all in the past year and past month in Q. No. 405 Go to Q.501)

406. Did you get treatment for the symptoms cited?

Symptoms	Yes	No	Yes	No
Urethral Discharge	1	2	1	2
Pain During Urination	1	2	1	2
Burn When Urinating	1	2	1	2
Ulcer or Sore in the Genital Area	1	2	1	2
Others (Specify)	1	2	1	2

(If not treated in all in Q. 406 Go to Q. 501)

407. Where did you go for the treatment? (Multiple answers. Do not read the possible answers given below).

- | | |
|-------------------|-----------------------------------|
| 1. Private clinic | 6. Pharmacy |
| 2. FPAN Clinic | 7. Self Treatment (Specify) _____ |
| 3. Health Post | 8. No Treatment |
| 4. Health Center | 9. Others (Specify) _____ |
| 5. Hospital | |

5.0 Use of Injecting Drugs

501. Some people have tried injecting drugs using a syringe. Have you ever injected drugs? **(Drugs injected for medical purpose or treatment of an illness do not count)**

1. Yes

2. No

98. Don't Know

99. No Response

→ (STOP INTERVIEW)

502. Did you inject drug in the past year?

1. Yes

2 No (STOP INTERVIEW)

503. Think about the last time you injected drugs. Did you use a needle or syringe that had previously been used by someone else?

1 Yes

2 No

98. Don't Know

99. No Response

504. Think about the time you injected drugs during the past one month. How often was it with a needle or syringe that had previously been used by someone else?

3. Every Time

4. Almost Every Time

5. Sometimes

6. Never

98. Don't Know

99. No Response

(Thanks to the respondent and send for clinical test)

HIV/STI PREVALENCE STUDY**22 Districts of Terai Highway****FHI/SACTS/New ERA - 2003****Clinical/Lab Checklist for (Truckers)**

Respondent ID Number : _____

Date: _____

Name of Clinician : _____

Name of Lab Technician : _____

(A) Clinical Information

(B) Specimen collection

		Yes	No
Age of respondent: _____	Urine Collected	1	2
Weight : _____	Blood Collected	1	2
B.P. : _____	HIV Counseled	1	2
Pulse : _____	HIV & syphilis post-test		
Temperature : _____	results protocol given	1	2
Blood Group : _____	Condom Given	1	2
Albumin : _____	Vitamins Given	1	2
Sugar : _____	Gift Given	1	2

1.0 Syndromic Treatment Information

101. Did you have discharge from you penis or burning sensation when you urinate in the past one month?

1. Yes

2. No

[If yes, give treatment for gonorrhea and chlamydia]

102. Did you have sore or ulcer on or around your genitals in the past one month ?
[If yes, give erythromycin at present and give time for follow visit]

1. Yes, urethral discharge [Give treatment for Gonorrhea and Chlamydia]
2. Yes, genital ulcer [Give Erythromycin and give time for follow-up]
3. No
4. Don't know

CONFIDENTIAL**HIV/STI PREVALENCE STUDY****22 Districts of Terai Highway****FHI/SACTS/New ERA - 2003****Clinical/Lab Checklist for (Female)**

Respondent ID Number : _____

Date: _____

Name of Clinician : _____

Name of Lab Technician : _____

(A) Clinical Information**(B) Specimen collection**

		Yes	No
Age of respondent: _____	Vaginal Swab collected	1	2
Weight : _____	Urine Collected	1	2
B.P. : _____	Blood Collected	1	2
Pulse : _____	HIV Counseled	1	2
	HIV & Syphilis post-test results		
Temperature : _____	protocol given	1	2
Albumin : _____	Condom Given	1	2
Sugar : _____	Vitamins Given	1	2
	Gift Given	1	2

1.0 Syndromic Treatment Information

101. Has any man you had sex within the past 3 months had a urethral discharge or genital ulcer ?

1. Yes, urethral discharge [Give treatment for Gonorrhea and Chlamydia]
2. Yes, genital ulcer [Give Erythromycin and give time for follow-up]
3. No
4. Don't know

फेमीली हेल्थ इन्टरनेशनल, नेपाल मौखिक सहमति पत्र

अध्ययन अनुसन्धानको नाम : नेपालको तराईका २२ जिल्लामा यौन रोग/एच.आई.भि.को स्थिती र जोखिम व्यवहार सम्बन्धी अध्ययन

प्रमुख अनुसन्धान कर्ताहरू : सिद्धार्थमान तुलाधर, न्यू एरा, कालोपुल, काठमाण्डौ
लक्ष्मी विलास आचार्य, फेमीली हेल्थ इन्टरनेशनल/नेपाल
स्टेफेन मिल्स, फेमीली हेल्थ इन्टरनेशनल

सह-प्रमुख अनुसन्धान कर्ताहरू : जिमरस, फेमीली हेल्थ इन्टरनेशनल/नेपाल
विजय लाल गुरुवाचार्य, यौन रोग/एड्स परामर्श तथा
तालिम सेवा, न्यूरोड, काठमाण्डौ ।

परिचय

यस सहमति पत्रमा माथि भनिएको अनुसन्धानको विषय बारे जानकारी दिइएको छ । तपाईं यस अनुसन्धानमा सहभागी हुनको लागि तपाईंलाई यस अनुसन्धान बारे जानकारी छु भनी विश्वास गर्न, यस सहमति पत्र तपाईंलाई पढन लगाइन्छ वा तपाईंको लागि पढी दिन्छौ । तपाईंलाई दुई जना मानिसहरूको सामुन्ने यस अनुसन्धानमा सहभागी हुने वा नहुने भन्ने कुरा प्रष्ट रूपमा बोल्न लगाइन्छ । यो अनुसन्धान फेमीली हेल्थ इन्टरनेशनल र नेपाल स्वास्थ्य अनुसन्धान परिषदको नैतिक पुनरावलोकन समितिले स्वीकृत गरेको छ । यदि तपाईं चाहानु हुन्छ भने हामी तपाईंलाई यसको एक प्रति दिन्छौ । यस फारममा तपाईंले नजानेको केही कुराहरू हुन सक्छन् । कृपया केही कुराहरू बुझ्नु भएन भने प्रष्ट हुन सोध्नुहोला ।

अनुसन्धान गर्नुका कारण

तराई जिल्लामा बस्ने र आवत जावत गर्ने व्यक्तिहरूमा यौन रोग/एच.आई.भि. को स्थिति के छ र ति रोगबाट प्रभावित व्यक्तिहरूका जोखिम व्यवहारहरू के के छन्? भन्ने बारे पत्तालाउन यस अध्ययन अनुसन्धान क्रममा तपाईंलाई सहभागी हुन अनुरोध गर्दछौ । यस अनुसन्धानबाट आएको नतीजा भविष्यमा श्री ५ को सरकार तथा अन्य स्थानीय समूहहरूबाट यस्ता संक्रमणहरूबाट बच्नको लागि आवश्यक योजना बनाउनमा प्रयोग गरिने छ ।

अनुसन्धान प्रक्रियाहरूबारे सामान्य जानकारी

यदि तपाईं यस अनुसन्धानमा सहभागी हुन चाहनु हुन्छ भने हामी तपाईंको नाम कही पनि टिप्पैनौ । हामी तपाईंलाई केही प्रश्नहरू सोध्नेछौ र तपाईंसँग तपाईंको पिसाब र रगतको नमूना माग्ने छौ । त्यसको लागि तपाईंले हामीले दिएको कपमा पिसाब फेर्नु पर्नेछ र १० मि.लि. को डिस्पोजेबल सिरिन्जद्वारा ५-६ मि.लि रगत तान्न दिनु पर्नेछ । महिलाहरूले आफुले नै सिक्कामा बेरिएको कपास योनीमा छिराएर योनी रसको नमूना पनि

दिनु पर्नेछ । यदि यौन रोगका कुनै लक्षणहरू तपाईंमा देखिएमा हामी त्यसको निशुल्क उपचार गरिदिने छौं । यस किसिमको रोग पत्ता लगाउंदा र उपचार गर्दा नेपालको राष्ट्रिय यौन रोग व्यवस्थापन निर्देशिकाका आधारमा गरिने छ ।

अनुसन्धानमा तपाईंको भूमिका

यस अनुसन्धानमा तपाईंको करिब एक घण्टा समय लाग्ने छ । यसमा तराई जिल्लामा बस्ने वा आवत जावत गर्ने करिब ६०० जना महिला र ४०० जना पुरुषहरूले भाग लिनेछन् ।

यदि तपाईं यस अनुसन्धानमा सहभागी हुन चाहानु हुन्छ भने, हामी तपाईंको शिक्षा तथा उमेर सम्बन्धी केही प्रश्नहरू सोध्नेछौं । हामी तपाईंलाई तपाईंको यात्रा, पहिला र अहिलेको यौन व्यवहार र यौन रोगसँग सम्बन्धित लक्षणहरू बारे पनि सोध्नेछौं साथै तपाईंलाई एच.आई.भि. भाईरस जसको कारणले एड्स हुन्छ र यौनजन्य रोगहरू बारे सर सल्लाह पनि प्रदान गरिनेछ । प्रयोगशाला परीक्षण भनेको के हो ? र के कस्तो उपचार वा हेरचाह तपाईंले पाउन सक्नुहुन्छ भन्ने बारे हामी तपाईंलाई भन्नेछौं । त्यसपछि हामी तपाईंको पिसाब, रगत र योनी रसको नमूना लिने छौं ।

हामी पिसाब रगत र योनी रसको नमूना वा प्रश्न पत्र कुनैमा पनि तपाईंको नाम टिप्दैनौं । यिनीहरूमा खाली अध्ययनको नम्बर टाँसिन्छ । यि नमूनाहरूबाट विभिन्न प्रकारका यौन रोगहरू साथै गोनोरिया (gonorrhea), क्लामेडिया ट्राइकोमाटिस (chlamydia trachomatis), सिफिलिस (syphilis) र एच.आई.भी. (HIV) परीक्षण गरिने छ । तराई क्षेत्रमा यि जाँचहरू गर्न नसकिने हुनाले नमूनाहरू जाँचको लागि काठमाडौं र नेपाल बाहिर पठाईने छ ।

हामी तपाईंलाई गोनोरिया (gonorrhea), क्लामेडिया ट्राइकोमाटिस (chlamydia trachomatis), सिफिलिस (syphilis) र एच.आई.भी. (HIV) परीक्षणको नतिजा एक महिना पछि दिन सक्ने छौं । यसको नतिजा कहाँबाट प्राप्त गर्ने भन्ने बारेमा उपदेशकले बताउने छन् । यि रिपोर्टहरू हामीले अध्ययन नम्बर राखेर तपाईंलाई दिएको कार्ड देखाएर मात्र लिन सक्नु हुनेछ । सो अध्ययन नम्बर भएको कार्ड देखाउनु भएन भने हामी परीक्षणको नतिजा दिन सक्दैनौं । जाँचको रिपोर्ट गोप्य राख्ने यहि नै सर्वोत्तम उपाय देखिन्छ ।

सम्भाव्य खतरा र फाइदाहरू

यस अध्ययनको जोखिम भनेकै रगत निकाल्दा केही अप्ठ्यारो महशुस हुनु मात्र हो । पिसाब र योनी रसको नमूना दिएर तपाईंलाई कुनै पनि हानी हुदैन । त्यस्तै हामीले तपाईंको नाम नटिपेको हुंदा तपाईंलाई र प्रयोगशालामा गरेको परीक्षणको नतिजा तपाईंको हो भनेर कसैले पनि थाहा पाउन सक्दैन । हामीले सोधेको केही प्रश्नहरूले तपाईंलाई अप्ठ्यारो वा असजिलो लाग्न सक्दछ । कुनै पनि समय तपाईं कुनै पनि प्रश्नको उत्तर नदिन र आफूलाई यस अध्ययनबाट अलग राख्न सक्नुहुन्छ । तपाईंलाई एच.आई.भि.को परीक्षण नतिजाबाट मानसिक तनाव हुन सक्छ । यदि तपाईं यी परीक्षणमा सामेल हुने

निर्णय गर्नुहुन्छ भने, तपाईंलाई एच.आई.भि. रोग सम्बन्धी सर सल्लाह दिईन्छ । यस अनुसन्धानको फाइदाहरूमा, यदि तपाईंलाई अहिले यौन रोग लागेको छ भने तपाईंले त्यसको निशुल्क उपचार पाउनु हुनेछ । तपाईंलाई गोनोरिया (gonorrhea), क्लामेडिया, ट्राइकोमाटिस (chlamydia trachomatis), सिफिलिस (syphilis) र एच.आई.भी. (HIV) को परिक्षण नतिजा प्रदान गरिन्छ । तपाईंले कसरी यौन रोग/एच.आई.भि. सँग र कसरी यसको रोकथाम गर्ने भन्ने बारे थाहा पाउनु हुनेछ साथै तपाईंले सुरक्षित यौन व्यवहारको बारेमा पनि थाहा पाउनु हुनेछ । तपाईंहरूबाट प्राप्त यस किसिमको जानकारीले हामीलाई यौनजन्य रोग र एड्स फैलिनबाट कसरी कम गर्ने भन्ने कुराको योजना बनाउन सहयोग पु-याउनेछ ।

अध्ययनमा सहभागी हुन नचाहेमा

तपाईंलाई अध्ययनमा सामेल हुन वा नहुन पुरा स्वतन्त्रता छ र यसले तपाईंले पाइरहुन भएको नियमित स्वास्थ्य सेवामा कुनै असर पर्ने छैन ।

गोप्यता

हामी सकेसम्म तपाईं र तपाईंको यस अनुसन्धानमा भएको सहभागीताबारे गोप्य राख्ने छौं। हामी तपाईंको नाम जान्न चाहदैनौं र यसैले कहीं पनि रिकर्ड राखिने छैन । सबै प्रश्नावलीहरू र नमूनाहरूमा अध्ययनको नम्बरहरू राखिनेछ । तपाईंलाई एउटा कार्ड दिइनेछ जसमा तपाईंको नम्बर लेखिएको हुन्छ । यदि तपाईंले चाहनु भयो भने यो कार्ड देखाएर पिसाब, रगत र योनी रसको परीक्षणको नतिजा पाउनु हुन्छ । हामी तपाईंलाई चिन्दैनौं र यो कार्ड बिना परीक्षण नतिजा दिन सक्दैनौं ।

यदि यो अध्ययनको नतिजाहरू प्रकाशित भएमा तपाईंको नाम हुने छैन, किनकी हामी सित तपाईंको नाम हुदैन । तर पनि कहिले काही अन्तराष्ट्रिय स्वास्थ्य केन्द्रका कर्मचारीहरूले अध्ययनमा सामेल हुनेहरूको रिकर्ड हेर्ने इच्छा गर्न सक्दछन् । यिनीहरूमा तपाईंको नाम हुदैन । अदालतले अनुसन्धानको रिकर्ड अरूलाई देखाउन आदेश दिनसक्छ, तर त्यसको सम्भावना कम छ । यी रिकर्डहरूमा तपाईंको नाम हुने छैन ।

क्षतिपूर्ति

यस अनुसन्धानमा तपाईं सहभागी भए वापत हामी तपाईंलाई एक महिनाको लागि भिटामिन, सानो उपहार, कण्डम र एच.आई.भि./एड्स र यौन रोग सम्बन्धी केही अध्ययन समाग्री पनि दिनेछौं ।

अध्ययन छोड्न सकिने

तपाईं कुनै पनि बेला यस अध्ययन छोड्न सक्नु हुन्छ र कुनै प्रश्नको उत्तर नदिन पनि सक्नु हुन्छ ।

प्रश्नको लागि सम्पर्क

तपाईंलाई एउटा छुट्टै पानामा सम्पर्क सम्बन्धि जानकारी दिनेछौं ।

स्वेच्छिक अनुमति पत्र

यदि तपाईंले अनुसन्धानको सिलसिलामा के के सोधिन्छ भन्ने कुराहरू पूर्णरूपमा बुझ्नु भएको भए तपाईंलाई पढेर बुझाउने व्यक्तिले तलका कुराहरू पढ्नु हुन्छ र यो सहमती पत्रमा हस्ताक्षर गर्नु हुनेछ ।

मैले यस अनुसन्धानको लागि छानिएको व्यक्तिलाई सहमती पत्रमा उल्लेख गरिएका कुराहरू सबै प्रष्ट पढेर बुझाएको छु । यस सहमती पत्रमा उल्लेख गरिएका क्रियाकलापहरू बुझेर उहाँले मलाई व्याख्या गर्नुभयो र मलाई विश्वास छ कि अनुसन्धानको क्रियाकलापहरू बारे उहाँ पूर्ण परिचित हुनु हुन्छ । उहाँले कुनै करकापमा नपरी अनुसन्धानको सबै पक्षमा सहभागी हुने मौखिक सहमति दिनु भएको छ ।

मिति

अनुमति लिने व्यक्तिको हस्ताक्षर

यस अनुसन्धानको क्रममा यसबाट हुने फाइदा, जोखिम र तरिकाहरू छानिएको व्यक्तिलाई पढेर सुनाउँदा मेरो उपस्थिति थियो । सबै प्रश्नहरूको जवाफ दिइयो र उहाँले पनि यसमा मडजुरी दिनु भयो ।

मिति

प्रत्यक्षदर्शीको हस्ताक्षर

सम्पर्क जानकारी
(सहभागीलाई दिनको लागि)

यदि तपाईंलाई कुनै प्रश्नहरू वा समस्याहरू भएमा कृपया सम्पर्क राख्नुहोस् ।

सिद्धार्थमान तुलाधर

न्यू एरा, कालोपुल, काठमाडौं, नेपाल

फोन नं.: ०१-४४९३६०३

जिम रस

फेमीली हेल्थ इन्टरनेशनल (एफ.एच.आई.)

गैरीधारा, काठमाडौं, नेपाल

फोन नं.: ०१-४४२७५४०

विजयलाल गुरुवाचार्य, यौन रोग/एड्स परामर्श तालिम सेवा

सेन्ट्रल क्लिनिक, न्यू रोड, काठमाडौं, नेपाल, फोन नं. ०१-४२२४५४९

यदि अनुसन्धानको क्रममा तपाईंलाई आफ्नो अधिकार बारे केही प्रश्नहरू भए सम्पर्क राख्नुहोस् :

जिम रस, फेमीली हेल्थ इन्टरनेशनल
(एफ.एच.आई.), गैरीधारा, काठमाडौं, नेपाल
फोन नं.: ४४२७५४०

वा

डेभिड बोरास्की अन्तराष्ट्रिय प्रतिनिधि,
मानव अधिकार रक्षा समिति, पो.व.नं.:
१३९५०, अनुसन्धान त्रिकोण पार्क, उत्तर
क्यारोलिना, संयुक्त राज्य अमेरिका, फोन
नं.: ००-१-९१९-४०५-१४४५, e-mail:
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Human Rights Protection committee
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North Caroline, USA
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Email : dborasky@fhi.org
Or Cable : FAME. HEALTH

यदि तपाईंलाई कुनै समस्या परेमा

यदि तपाईंलाई लाग्छ कि तपाईंको समस्या अनुसन्धानमा भागलिएर भएको हुन सक्छ भने, कृपया फोन गर्नुहोस् । सिद्धार्थ मान तुलाधर, न्यू एरा, कालोपुल, काठमाडौं, नेपाल, फोन नं.: ४४९३६०३ अथवा आशा वस्नेत, फेमीली हेल्थ इन्टरनेशनल (एफ.एच.आई.) गैरी धारा, काठमाडौं, फोन नं.: ४४२७५४०

यदि तपाईंलाई बढी सहयोगको आवश्यकता भएमा, हामी तपाईंलाई सिफारीस गरिदिन सक्छौं, जहां तपाईंले शुल्क तिर्न पर्ने हुन सक्छ ।

गोप्य

HIV/STI PREVALENCE STUDY
22 Districts of Terai Highway
FHI/SACTS/New ERA-2003

(महिला उत्तरदातालाई सोध्ने प्रश्नावली)

१.० सामान्य जानकारी

प्रश्नकर्ताको नाम : _____

१०१. उत्तरदाताको परिचय संख्या : _____

१०२. अन्तरवार्ता लिएको ठाउँ

१०२.१ जिल्ला : _____

१०२.२ गा.वि.स./नगरपालिका : _____

१०२.३ वार्ड नं. : _____

१०२.४ गाउँ/टोलको नाम : _____

१०३. अन्तरवार्ता लिएको मिति :

२०६०		
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१०४. तपाईंको जन्मस्थान कहाँ हो ?

जिल्ला : _____

गा.वि.स./नगरपालिका : _____

वार्ड नं. : _____

गाउँ/टोलको नाम : _____

२.० व्यक्तिगत जानकारी

२०१. तपाईं कति वर्षको हुनु भयो ?

_____ (पूरा भएको वर्ष लेख्नुहोस्)

२०२. तपाईं कति कक्षा पास गर्नु भएको छ ?

_____ (लेखपढ गर्न नजान्नेलाई "०", र स्कूल नगई साक्षर भएकोलाई "१९" र अन्य कक्षा पास गर्नेलाई पास गरेको कक्षा लेख्नुहोस्)

२०३. तपाईंको हालको वैवाहिक स्थिति के हो ?

१. विवाहित

४. अविवाहित

२. सम्बन्ध विच्छेद गरेको/अलग बसेको

५. अन्य (खुलाउने) _____

३. विधवा

२०४. तपाईं कहिलेदेखि पैसा वा अन्य कुराको लागि यो देह व्यापारमा लागि रहनु भएको छ ?

_____ वर्षदेखि _____ महिनादेखि १८. थाहा छैन १९. जवाफ नदिएको

२०४.१ विगत १ वर्ष भित्रमा पैसा वा अन्य कुराको लागि तपाईंले कसैसंग यौन सम्पर्क/सहवास गर्नु भएको छ ?

१. गरेको छु

२. गरेको छैन (प्र.नं. ५०१ मा जानुहोस्)

२०५. यो ठाउँमा बसेर तपाईंले यस्तो काम कहिलेदेखि गर्दै आउनु भएको छ ?

(एक महिना भन्दा कम समयदेखि भन्ने जवाफ आएमा ० लेख्नुहोस् र एक महिनाभन्दा बढी उत्तर आएमा पूरा भएको महिनामा लेख्नुहोस्)

_____ महिना देखि

१८. थाहा छैन/भन्न सकिदैन

२०६. गत २ वर्षभित्रमा तपाईंले अरु ठाउँहरूमा पनि यस्तो किसिमको काम गर्नु भएको थियो ?

१. गरेको थिए

२. गरेको थिइन (प्र.नं. २०६.२ मा जानुहोस्)

२०६.१ तपाईंले यस्तो काम कहाँ कहाँ गर्नु भयो ?

(उत्तरदाताले जवाफ दिएको सबै ठाउँको नाम लेख्नुहोस्)

गा.वि.स./नगरपालिका

जिल्ला

२०६.२ के तपाईंले यस्तो काम कहिल्यै भारतमा पनि गर्नु भएको थियो ?

१. थिए

२. थिइन (प्र.नं. ३०१ मा जानुहोस्)

२०६.२.१ भारतमा कहाँ कहाँ गर्नु भयो ? (ठाउँहरुको नाम उल्लेख गर्नुहोस्)

ठाउँको नाम

२०६.२.२ तपाईंले भारतमा पैसाको लागि यौन व्यवसाय कति समयसम्म गर्नु भयो ?

_____ वर्ष _____ महिना _____ दिन

२०६.३ तपाईं भारतमा आफ्नो खुसीले जानु भएको थियो कि कसैको, करकापमा परेर जानु भएको थियो ?

१. करकापमा परेर

२. आफ्नो खुसीले गएको

२०६.३.१ पहिलो पटक भारतमा जाँदा तपाईं कति वर्षको हुनुहुन्थ्यो ?

_____ वर्ष (पूरा गरेको वर्ष लेख्नुहोस्)

२०६.३.२ भारतबाट अन्तिम पटक नेपाल फर्कदा तपाईं कति वर्षको हुनुहुन्थ्यो ?

_____ वर्ष (पूरा गरेको वर्ष लेख्नुहोस्)

३.० यौन व्यवहार सम्बन्धी जानकारी

३०१ पहिलो पटक यौन सम्पर्क/सहवास हुँदा तपाईं कति वर्षको हुनुहुन्थ्यो ?

_____ वर्ष (पूरा गरेको वर्ष लेख्नुहोस्) १८. थाहा छैन/सम्झन सक्तैन

३०२. तपाईंको ग्राहकसंग पछिल्लो पटक यौन सम्पर्क/सहवास कहिले भएको थियो ?

_____ दिन पहिले

३०३. त्यस दिन तपाईंको कति जनासंग यौन सम्पर्क/सहवास भएको थियो ?

_____ जना

३०४. अन्तिम ग्राहकले कति रुपैयाँ वा अन्य सामानहरु तपाईंलाई दिनु भयो ?

(नगद रुपैयाँ दिएको भए नगदमा मात्र र सामानहरु पनि दिएको भए दुवै रकम जोडेर जम्मा रु. मा लेख्नुहोस्)

१. रुपैयाँ (नगद) + (उपहार बराबरको रकम) _____ रु. = जम्मा रु. _____

२. अन्य (खुलाउने) _____

३०४.१ गत एक हप्तामा तपाईंको जम्मा कति जनासंग यौन सम्पर्क/सहवास भयो ?

_____ जना

३०५. तपाईं कहाँ धेरैजसो कुन कुन किसिमका ग्राहकहरु आउने गर्नुहुन्छ ?
(एकभन्दा बढी उत्तरहरु आउन सक्छन् । तलका सम्भावित उत्तरहरु नभन्नुहोस् ।)

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| १. यातायात कामदार | ५. विद्यार्थी |
| २. ज्यालादारी कामदारी | ६. रिक्सा चालक |
| ३. औद्योगिक कामदार | ७. अन्य (खुलाउने) _____ |
| ४. प्रहरी/सिपाही | ९. थाहा छैन |

३०६. तपाईं कहिल्यै कण्डमको प्रयोग गर्नु भएको छ ?

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| १. छ | २. छैन (प्र.नं. ३०९ मा जानुहोस्) |
|------|----------------------------------|

३०७. तपाईंको अन्तिम ग्राहकले कण्डम प्रयोग गरेको थियो ?

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| १. थियो | २. थिएन |
|---------|---------|

३०८. गएको वर्षमा ग्राहकसंग यौन सम्पर्क/सहवास गर्दा तपाईंले कण्डम कतिको प्रयोग गर्नुभयो ?

१. सधैं प्रयोग गरेको (प्र.नं. ३०९ मा जानुहोस्)
२. धेरैजसो प्रयोग गरेको (प्र.नं. ३०९ मा जानुहोस्)
३. कहिले काही प्रयोग गरेको (प्र.नं. ३०९ मा जानुहोस्)
४. कमै मात्रामा प्रयोग गरेको (प्र.नं. ३०९ मा जानुहोस्)
५. कहिल्यै प्रयोग नगरेको (प्र.नं. ३०८.१ मा जानुहोस्)

३०८.१ किन प्रयोग नगरेको ?

३०९. तपाईं कहाँ नियमित रूपमा आउने ग्राहकहरु पनि छन् ?

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|--------|------------------------------------|
| १. छन् | २. छैनन् (प्र.नं. ३१० मा जानुहोस्) |
|--------|------------------------------------|

३०९.१ तपाईंले उनीहरूसंग कण्डम प्रयोग गर्नु हुन्छ ?

- | | |
|----------|-------------------------------------|
| १. गर्छु | २. गर्दिन (प्र.नं. ३१० मा जानुहोस्) |
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३०९.११ यदि गर्नु हुन्छ भने, कतिको गर्नु हुन्छ ?

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|---------|---------------|
| १. सधैं | २. कहिले काही |
|---------|---------------|

३१०. हाल तपाईं श्रीमान अथवा केटा साथी, कोसंग बसिरहनु भएको छ ?

१. श्रीमान
२. केटासाथी

३. कसैसंग पनि होइन
(प्र.नं. ३११ मा जानुहोस्)

३१०.१ तपाईं उसंग यौन सम्पर्क/सहवास गर्नु हुन्छ ?

१. गर्छु

२. गर्दिन (प्र.नं. ३११ मा जानुहोस्)

३१०.१.१ यदि गर्नु हुन्छ भने, उसले तपाईंसंग कण्डम कत्तिको प्रयोग गर्छ ?

१. सधैं
२. कहिले काही
३. कहिले पनि प्रयोग गर्दैन

३११. गत एक वर्षभित्रमा तपाईंको ग्राहक, केटा साथी/श्रीमान बाहेक अन्य कसैसंग यौन सम्पर्क/सहवास भएको छ ?

१. छ

२. छैन (प्र.नं. ४०१ मा जानुहोस्)

३११.१ यदि छ भने, उसले तपाईंसंग कण्डम कत्तिको प्रयोग गर्छ ?

१. सधैं
२. कहिले काही
३. कहिले पनि प्रयोग गर्दैन

४.० यौन सम्पर्क/सहवासबाट हुने रोगहरु

४०१. के तपाईंलाई हाल निम्न रोगका लक्षणहरु देखा परेका छन् ?

रोगका लक्षणहरु	देखा परेको	देखा नपरेको
१. तल्लो पेट दुख्ने	१	२
२. पिसाब गर्दा दुख्ने	१	२
३. बारम्बार पिसाब आइरहने	१	२
४. यौन सम्पर्क गर्दा दुख्ने	१	२
५. गुप्ताङ्ग वरीपरी घाउ/खटोरा आउने	१	२
६. योनीको वरीपरी चिलाउने	१	२
७. योनीबाट दुर्गन्ध आउने	१	२
८. योनीबाट असाधारण तवरले रगत आउने	१	२
९. योनीबाट श्राव बग्ने	१	२
१०. गुप्ताङ्गमा गिर्खा आउने	१	२
११. अन्य (खुलाउने) _____	१	२

४०२. गत महिना वा सालमा के तपाईंलाई तल उल्लेखित रोगका लक्षणहरु देखा परेका थियो ,

रोगका लक्षणहरु	गत वर्ष		गत महिना	
	थियो	थिएन	थियो	थिएन
१. तल्लो पेट दुख्ने	१	२	१	२
२. पिसाब गर्दा दुख्ने	१	२	१	२
३. बारम्बार पिसाब आइरहने	१	२	१	२
४. यौन सम्पर्क गर्दा दुख्ने	१	२	१	२
५. गुप्ताङ्ग वरीपरी घाउ/खटीरा आउने	१	२	१	२
६. योनीको वरीपरी चिलाउने	१	२	१	२
७. योनीबाट दुर्गन्ध आउने	१	२	१	२
८. योनीबाट असाधारण तवरले रगत आउने	१	२	१	२
९. योनीबाट श्राव बग्ने	१	२	१	२
१०. गुप्ताङ्गमा गिर्खा आउने	१			२
११. अन्य (खुलाउने) _____	१			२

(यदि प्र.नं. ४०२ मा गत वर्ष र गत महिना सबैमा थिएन भन्ने उत्तर आएमा प्र.नं. ५०१ मा जानुहोस्)

४०२.१ के तपाईंले यी रोगका लक्षणहरुको उपचार गर्नु भयो ?

रोगका लक्षणहरु	उपचार गरेको	उपचार नगरेको
१. तल्लो पेट दुख्ने	१	२
२. पिसाब गर्दा दुख्ने	१	२
३. बारम्बार पिसाब आइरहने	१	२
४. यौन सम्पर्क गर्दा दुख्ने	१	२
५. गुप्ताङ्ग वरीपरी घाउ/खटीरा आउने	१	२
६. योनीको वरीपरी चिलाउने	१	२
७. योनीबाट दुर्गन्ध आउने	१	२
८. योनीबाट असाधारण तवरले रगत आउने	१	२
९. योनीबाट श्राव बग्ने	१	२
१०. गुप्ताङ्गमा गिर्खा आउने	१	२
११. अन्य (खुलाउने) _____	१	२

(यदि प्र.नं. ४०२.१ को सबैमा उपचार नगरेको भन्ने उत्तर आएमा प्र.नं. ५०१ मा जानुहोस्)

४०३. यी लक्षणहरु देखिएपछि तपाईंले कहाँ कहाँ गएर उपचार गराउनु भयो ?
(एकभन्दा बढी उत्तरहरु आउन सक्छन् । तलका सम्भावित उत्तरहरु नभन्नुहोस् ।)

१. प्राइभेट क्लिनिक
२. नेपाल परिवार नियोजन संघको क्लिनिक
३. स्वास्थ्य चौकी/उप-स्वास्थ्य चौकी
४. स्वास्थ्य केन्द्र
५. अस्पताल
६. औषधी पसल
७. आफै उपचार गरेको अन्य (खुलाउने) _____
८. उपचार नै गरिन
९. अन्य (खुलाउने) _____

५.० सूईद्वारा लागू पदार्थको प्रयोग

५०१. केही मानिसहरुले सूईबाट पनि लागू पदार्थ लिने गर्दछन् ? के तपाईंले पनि कहिल्यै सूईबाट त्यस्तो पदार्थ लिनु भएको छ ? (औषधोपचार तथा विरामी भएका बेला लिएको सूई बाहेक)

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| १. छु | } → (अन्तरवार्ता टुङ्ग्याउनुहोस्) |
| २. छैन | |
| ९८. थाहा छैन | |
| ९९. जवाफ नदिएको | |

५०२. गत एक वर्षमा तपाईंले सूईद्वारा लागू पदार्थ लिनु भएको थियो ?

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| १. थियो | २. थिएन (अन्तरवार्ता टुङ्ग्याउनुहोस्) |
|---------|---------------------------------------|

५०३. तपाईंले अन्तिम पटक लगाएको सूईको बारेमा सम्झनुहोस् । के तपाईंले त्यसवेला अरुले प्रयोग गरिसकेको सूई प्रयोग गर्नु भएको थियो ?

१. थियो
२. थिएन
९८. थाहा छैन
९९. जवाफ नदिएको

५०४. तपाईंले गत एक महिनामा कति पटक सूईद्वारा लागू पदार्थ लिनु भयो सम्झनुहोस् । तपाईंले अरुले पहिलेनै प्रयोग गरेको सूई कतिको प्रयोग गर्नु भएको थियो ?

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|-----------------------------|--------------------------|
| १. सधैं प्रयोग गरेको | ४. कहिल्यै प्रयोग नगरेको |
| २. धेरैजसो प्रयोग गरेको | ९८. थाहा छैन |
| ३. कहिले काँही प्रयोग गरेको | ९९. जवाफ नदिएको |

उत्तरदातालाई धन्यवाद दिई स्वास्थ्य परिक्षणको लागि पठाई दिनुहोस् ।

गोप्य

HIV/STI PREVALENCE STUDY
22 Districts of Terai Highway
FHI/SACTS/New ERA-2003

(पुरुष उत्तरदातालाई सोध्ने प्रश्नावली)

१.० सामान्य जानकारी

प्रश्नकर्ताको नाम : _____

१०१. उत्तरदाताको परिचय संख्या : _____

१०२. अन्तरवार्ता लिएको ठाउँ

१०२.१ जिल्ला : _____

१०२.२ गा.वि.स./नगरपालिका : _____

१०२.३ वार्ड नं. : _____

१०२.४ गाउँ/टोलको नाम : _____

१०३. अन्तरवार्ता लिएको मिति : २०६०

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१०४. तपाईंको जन्मस्थान कहाँ हो ?

जिल्ला : _____

गा.वि.स./नगरपालिका : _____

वार्ड नं. : _____

गाउँ/टोलको नाम : _____

१०५. हाल तपाईं कहाँ वस्नु हुन्छ ?

जिल्ला : _____

गा.वि.स./नगरपालिका : _____

१०६. तपाईं यहाँ आउनुभन्दा अगाडि कहाँ वस्नु हुन्थ्यो ?

जिल्ला : _____

गा.वि.स./नगरपालिका : _____

१०७. हाल तपाईं कोसंग बस्नु हुन्छ ?

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|-----------------------------------|-------------------------|
| १. परिवारसंग (श्रीमती र बच्चासंग) | ४. आमा-बुवासंग |
| २. साथीहरूसंग | ५. अन्य (खुलाउने) _____ |
| ३. एकलै | |

१०८. तपाईं कति वर्ष पुग्नभयो ?

_____ (पूरा भएको वर्ष लेख्नुहोस्)

१०९. तपाईंले कति कक्षा पास गर्नु भएको छ ?

_____ (लेखपढ गर्न नजान्नेलाई "०", र स्कूल नगई साक्षर भएकोलाई "१९" र अन्य कक्षा पास गर्नेलाई पास गरेको कक्षा लेख्नुहोस्)

११०. तपाईंको हालको वैवाहिक स्थिति के छ ?

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|---|-------------------------------|
| १. विवाहित | } → (प्र.नं. ११३ मा जानुहोस्) |
| २. सम्बन्ध विच्छेद गरेको/स्थायी रूपमा छुट्टिएको | |
| ३. विधुर | |
| ४. अविवाहित | |

१११. के तपाईं अहिले श्रीमतीसंगै बसिरहनु भएको छ ?

- | | |
|-------|--------|
| १. छु | २. छैन |
|-------|--------|

११२. तपाईं महिनामा अन्दाजी कति दिन आफ्नो परिवार देखि टाढा रहनु हुन्छ ?

_____ दिन ११९. सधैं परिवारसंगै बस्छु

११३. तपाईंले कहिल्यै भारतमा पनि ट्रक चलाउनु भएको छ/थियो ?

- | | |
|-----------|---------------------------------------|
| १. छु/थिए | २. छैन/थिएन (प्र.नं. २०१ मा जानुहोस्) |
|-----------|---------------------------------------|

११३.१ यदि छ भने कुन कुन बजार/शहरमा चलाउनु भएको छ ?

बजार/शहरको नाम	सिमानावाट दूरी (ट्रकबाट पुग्ने समय/कि.मी.)
_____	_____
_____	_____
_____	_____

११३.२ अन्तिम पटक भारतमा तपाईले कहिले टूक लिएर जानु भयो ?

१. _____ दिन अगाडि
२. _____ महिना अगाडि
३. अन्य (खुलाउने) _____

२.० यौन व्यवहार सम्बन्धी जानकारी

२०१. तपाईले कहिल्यै कुनै मलासंग यौन सम्पर्क/सहवास गर्नु भएको छ ?

१. छ
२. छैन (प्र.नं. ५०१ मा जानुहोस्)
३. उत्तर नदिएको

२०२. तपाईले कहिल्यै कुनै देह व्यापारमा संलग्न महिलासंग यौन सम्पर्क/सहवास गर्नु भएको छ ?

१. गरेको छु
२. गरेका छैन (प्र.नं. ३०१ मा जानुहोस्)
३. उत्तर नदिएको

२०२.१ तपाईले गएको एक वर्षमा देह व्यापारमा संलग्न कुनै महिलासंग यौन सम्पर्क/सहवास गर्नु भएको थियो ?

१. गरेको छु
२. गरेका छैन (प्र.नं. २०७ मा जानुहोस्)

२०२.२ गएको एक वर्षभित्रमा तपाईले देह व्यापारमा संलग्न कति जना महिलाहरूसंग यौन सम्पर्क/सहवास गर्नु भयो ?

_____ जना

२०३. गएको तीन महिनाभित्रमा तपाई देह व्यापारमा संलग्न महिलासंग कति पटक जानु भयो ?

१. _____ पटक
२. अन्य (खुलाउने) _____

२०४. देह व्यापारमा संलग्न महिलासंग तपाईको अन्तिम पटक यौन सम्पर्क/सहवास हुँदा तपाईले कण्डम प्रयोग गर्नु भएको थियो ?

१. थियो
२. थिएन

२०४.१ गत वर्ष देह व्यापारमा संलग्न महिलाहरुकहाँ जाँदा तपाईले कण्डमको प्रयोग कतिको गर्नु भएको थियो ?

१. सधैं (प्र.नं. २०५ मा जानुहोस्)
२. धेरैजसो (प्र.नं. २०५ मा जानुहोस्)
३. कहिले (प्र.नं. २०५ मा जानुहोस्)
४. कमै मात्रामो (प्र.नं. २०५ मा जानुहोस्)
५. कहिल्यै प्रयोग नगरेको (प्र.नं. २०४.१.१ मा जानुहोस्)

२०५. तपाईंले ती देह व्यापारमा संलग्न अन्तिम महिलालाई यौन सम्पर्क/सहवासको लागि कहाँ भेट्नु भयो ?

- | | |
|---------------------|-------------------------|
| १. लज/होटेल | ४. सडकमा |
| २. खाना खाने ठाउँमा | ५. जङ्गलमा |
| ३. भट्टिमै | ९. अन्य (खुलाउने) _____ |

२०६. तपाईंले त्यतीवेला देह व्यापारमा संलग्न महिलालाई कति रुपैयाँ वा अन्य चिजहरु दिनु भयो ? (यौन सम्पर्क/सहवासको लागि भएको खर्च मात्र जोड्नुहोस्)

१. _____ रुपैया (नगद) + (उपहार बराबरको रकम) = रुपैयाँ जम्मा रुपैयाँ _____
२. अन्य (खुलाउने) _____

२०७. तपाईंले कहिल्यै देह व्यापारमा संलग्न महिलासंग भारतमा यौन सम्पर्क/सहवास गर्नु भएको छ ?

१. छ
२. छैन (प्र.नं. ३०१ मा जानुहोस्)

२०७.१. गत एक वर्षभित्रमा देह व्यापारमा संलग्न महिलासंग भारतमा तपाईंको यौन सम्पर्क/सहवास भएको थियो ?

१. भएको थियो
२. भएको थिएन (प्र.नं. ३०१ मा जानुहोस्)

२०७.१.१ कुन ठाउँमा ?
ठाउँको नाम : _____

२०७.१.२ तपाईंले अन्तिम पटक देह व्यापारमा संलग्न महिलासंग भारतमा कहिले यौन सम्पर्क/सहवास गर्नु भएको थियो

_____ हप्ता अगाडि

२०७.२ देह व्यापारमा संलग्न महिलासंग तपाईंको भारतमा अन्तिम पटक यौन सम्पर्क/सहवास हुँदा तपाईंले कण्डम प्रयोग गर्नु भएको थियो ?

१. थियो
२. थिएन

२०७.२.१ गत वर्ष भारतमा देह व्यापारमा संलग्न महिलाहरुकहाँ जाँदा तपाईंले कण्डमको प्रयोग कतिको गर्नु भएको थियो ?

१. सधैं
२. धेरैजसो
३. कहिले
४. कमै मात्रामो
५. कहिल्यै प्रयोग नगरेको

३.० अन्य व्यक्तिसंगको यौन सम्पर्क

[नोट : प्र.नं. ३०१ विवाहित उत्तरदातालाई मात्र सोध्नुहोस् ।]

३०१. तपाईंले आफ्नो श्रीमतीसंग अन्तिम पटक यौन सम्पर्क/सहवास कहिले गर्नु भयो ?

_____ दिन पहिला

३०२. तपाईंले आफ्नो केटी साथीसंग अन्तिम पटक यौन सम्पर्क/सहवास कहिले गर्नु भयो ?

_____ दिन पहिला

३६. केटी साथी नभएको

३०३. यी महिलाहरूसंग यौन सम्पर्क/सहवास गर्दा हरेक पटक कण्डम प्रयोग गर्नु भएको थियो ?
प्रयोग गरेको

	थिए	थिइन
१. श्रीमती	१	२
२. केटी साथी	१	२

४.० यौन सम्पर्क/सहवासबाट हुने रोगहरु

४०१. तपाईंलाई हाल तल दिइएका मध्ये कुनै रोगका लक्षणहरु देखा परेका छन् ?

रोगका लक्षणहरु	छ	छैन
सेतो पानी बग्ने	१	२
पिसाब गर्दा दुख्ने	१	२
पिवाब गर्दा पोल्ने	१	२
गुप्ताङ्गमा घाउ अथवा खटिरा आउने	१	२
अन्य (खुलाउने) _____	१	२

४०२. हाल तपाईंले उक्त रोगहरुको लागि औषधी उपचार गर्नु भएको छ/गराउनु भएको थियो ?

१. थिए

२. थिइन (प्र.नं. ४०५ मा जानुहोस्)

४०३. तपाईं उपचारको लागि कहाँ जानु भयो ?

१. प्राइभेट क्लिनिक
२. नेपाल परिवार नियोजन संघको क्लिनिक
३. स्वास्थ्य चौकी/उप-स्वास्थ्य चौकी
४. स्वास्थ्य केन्द्र
५. अस्पताल
६. औषधी पसल
७. आफै उपचार गरेको अन्य (खुलाउने) _____
८. उपचार नै गरिन
९. अन्य (खुलाउने) _____

४०४. कुन कुन रोगहरुको लागि तपाईंले के के उपचारहरु गराउनु भयो ?

रोगका लक्षणहरु	उपचार
सेतो पानी बग्ने	
पिसाब गर्दा दुख्ने	
पिवाब गर्दा पोल्ने	
गुप्ताङ्गमा घाउ अथवा खटिरा आउने	
अन्य (खुलाउने) _____	

४०५. हाल यदि तपाईंलाई माथी उल्लेखित लक्षणहरु देखा नपरेको भए गत साल अथवा गएको एक महिना भित्रमा तल उल्लेखित लक्षणहरु देखा परेको थियो ?

रोगका लक्षणहरु	गत वर्ष		गत महिना	
	थियो	थिएन	थियो	थिएन
सेतो पानी बग्ने	१	२	१	२
पिसाब गर्दा दुख्ने	१	२	१	२
पिवाब गर्दा पोल्ने	१	२	१	२
गुप्ताङ्गमा घाउ अथवा खटिरा आउने	१	२	१	२
अन्य (खुलाउने) _____	१	२	१	२

(यदि प्र.नं. ४०५ मा गत वर्ष र गत महिना सबैमा थिएन भन्ने उत्तर आएमा प्र.नं. ५०१ मा जानुहोस्)

४०६. तपाईंले यी रोगका लक्षणहरुको उपचार गराउनु भयो ?

रोगका लक्षणहरु	उपचार गरेको	उपचार नगरेको
सेतो पानी बग्ने	१	२
पिसाब गर्दा दुख्ने	१	२
पिवाब गर्दा पोल्ने	१	२
गुप्ताङ्गमा घाउ अथवा खटिरा आउने	१	२
अन्य (खुलाउने) _____	१	२
	१	२

(प्र.नं. ४०६ मा सबै लक्षणहरुमा उपचार नगरेको भन्ने उत्तर आएमा प्र.नं. ५०१ मा जानुहोस् ।)

४०७. तपाईं उपचारको लागि कहाँ जानु भयो ?

(एकभन्दा बढी उत्तरहरु आउन सक्छन् । तलका सम्भावित उत्तरहरु नभन्नुहोस् ।)

- | | |
|--------------------------------------|-------------------------------------|
| १. प्राइभेट क्लिनिक | ६. औषधी पसल |
| २. नेपाल परिवार नियोजन संघको क्लिनिक | ७. आफैं उपचार गरेको (खुलाउने) _____ |
| ३. स्वास्थ्य चौकी/उप-स्वास्थ्य चौकी | ८. उपचार नगरेको |
| ४. स्वास्थ्य केन्द्र | ९. अन्य (खुलाउने) _____ |
| ५. अस्पताल | |

५.० सूईद्वारा लागू पदार्थको प्रयोग

५०१. केही मानिसहरुले सूईबाट पनि लागू पदार्थ लिने गर्दछन् ? के तपाईंले पनि कहिल्यै सूईबाट त्यस्तो पदार्थ लिनु भएको छ ? (औषधोपचार तथा विरामी भएका बेला लिएको सूई बाहेक)

- | | |
|-----------------|--------------------------------|
| १. छु | } → (अन्तरवार्ता दुइयाउनुहोस्) |
| २. छैन | |
| ९८. थाहा छैन | |
| ९९. जवाफ नदिएको | |

५०२. गत एक वर्षमा तपाईंले सूईद्वारा लागू पदार्थ लिनु भएको थियो ?

- | | |
|---------|------------------------------------|
| १. थियो | २. थिएन (अन्तरवार्ता दुइयाउनुहोस्) |
|---------|------------------------------------|

५०३. तपाईंले अन्तिम पटक लगाएको सूईको बारेमा सम्झनुहोस् । के तपाईंले त्यसबेला अरुले प्रयोग गरिसकेको सूई प्रयोग गर्नु भएको थियो ?

- | |
|-----------------|
| १. थियो |
| २. थिएन |
| ९८. थाहा छैन |
| ९९. जवाफ नदिएको |

५०४. तपाईंले गत एक महिनामा कति पटक सूईद्वारा लागू पदार्थ लिनु भयो सम्झनुहोस् । तपाईंले अरुले पहिलेनै प्रयोग गरेको सूई कतिको प्रयोग गर्नु भएको थियो ?

- | | |
|-----------------------------|--------------------------|
| १. सधैं प्रयोग गरेको | ४. कहिल्यै प्रयोग नगरेको |
| २. धेरैजसो प्रयोग गरेको | ९८. थाहा छैन |
| ३. कहिले काहीँ प्रयोग गरेको | ९९. जवाफ नदिएको |

उत्तरदातालाई धन्यवाद दिई स्वास्थ्य परिक्षणको लागि पठाई दिनुहोस् ।

HIV/STI PREVALENCE STUDY

22 Districts of Terai Highway

FHI/SACTS/New ERA – 2003

क्लिनिकल ल्याब चेक लिष्ट (पुरुष)

उत्तरदाताको परिचय संख्या : _____

क्लिनिसियनको नाम : _____

मिति : _____

ल्याब टेक्निसियनको नाम : _____

(A) Clinical Test

Weight : Kg.

B.P. : mm of Hg.

Pulse :

Temperature :

Blood Group :

Albumin :

Sugar :

(B) Specimen collection

	Yes	No
Urine Collected	1	2
Blood Collected	1	2
HIV Counseled	1	2
HIV and syphilis		
Post-test results protocol given	1	2
Condom Given	1	2
Vitamins Given	1	2
Small Gift Given	1	2

1.0 Syndromic Treatment Information

101. तपाईंलाई गएको एक महिना भित्रमा लिङ्गबाट सेतो पानी/पीप बग्ने अथवा पिसाव गर्दा पोल्ने भएको थियो/छ ?

1. थियो/छ

2. थिएन/छैन

(यदि थियो वा छ भने gonorrhea र chlamydia को उपचार दिनुहोस्)

102. तपाईंलाई गएको एक महिना भित्रमा गुप्ताङ्ग वरीपरी घाउ/खटिरा आएको थियो/छ ?

1. थियो/छ

2. थिएन/छैन

(यदि थियो वा छ भने follow-up को लागि समय दिनुहोस् ।)

HIV/STI PREVALENCE STUDY

22 Districts of Terai Highway

FHI/SACTS/New ERA – 2003

क्लिनिकल ल्याब चेक लिष्ट (महिला)

उत्तरदाताको परिचय संख्या : _____

क्लिनिसियनको नाम : _____

मिति : _____

ल्याब टेक्निसियनको नाम : _____

(A) Clinical Test

Weight : Kg.

B.P. : mm of Hg.

Pulse :

Temperature :

Albumin :

Sugar :

(B) Specimen collection

	Yes	No
Vaginal Swab Collection	1	2
Urine Collected	1	2
Blood Collected	1	2
HIV Counseled	1	2
HIV & syphilis		
post-test results protocol given	1	2
Condom Given	1	2
Vitamins Given	1	2
Small Gift Given	1	2

1.0 Syndromic Treatment Information

101. गएको तीन महिना भित्रमा तपाईंले गुप्ताङ्गमा घाउ भएको वा सेतो पानी बग्ने कुनै पुरुषसंग यौन सम्पर्क/सहवास गर्नु भएको थियो ?

1. सेतो पानी बग्ने पुरुषसंग यौन सम्पर्क/सहवास भएको (Gonorrhea and Chlamydis को उपचार दिनुहोस्)
2. गुप्ताङ्गमा घाउ भएको पुरुषसंग यौन सम्पर्क/सहवास भएको (Follow-up को लागि समय दनुहोस्)
3. दुवै लक्षण थिएन
4. थाहा नभएको

102. तपाईंलाई गएको एक वर्षभित्र अथवा एक महिनाभित्र तल उल्लेखित लक्षणहरु देखा परेका थिए ?

रोगका लक्षणहरु	गत वर्ष		गत महिना	
	थियो	थिएन	थियो	थिएन
1. तल्लो पेट दुख्ने	1	2	1	2
2. पिसाब गर्दा दुख्ने	1	2	1	2
3. बारम्बार पिसाब आइरहने	1	2	1	2
4. यौन सम्पर्क गर्दा दुख्ने	1	2	1	2
5. गुप्ताङ्ग बरीपरी घाउ/खटिरा आउने	1	2	1	2
6. योनीको बरीपरी चिलाउने	1	2	1	2
7. योनीबाट दुर्गन्ध आउने	1	2	1	2
8. योनीबाट असाधारण तवरले रगत आउने	1	2	1	2
9. योनीबाट श्राव बग्ने	1	2	1	2
10. गुप्ताङ्गमा गिर्खा आउने	1	2	1	2
11. अन्य (खुलाउने) _____	1	2	1	2

(यदि माथी उल्लेखित लक्षणहरुमध्ये कुनैमा थियो/छ आएमा Gonorrhea, Chlamydia / Trichomoniasis को उपचार दिनुहोस्)

103. तपाईंलाई गत एक महिना भित्रमा गुप्ताङ्गमा घाउ अथवा खटिरा आएको थियो/छ ?

1. थियो/छ

2. थिएन/छैन

(यदि थियो वा छ भने follow-up को लागि समय दिनुहोस्)