

**Integrated Bio-Behavioral Survey
among Male Labor Migrants in 11
Districts in Western, Mid and Far
Western Regions of Nepal**

2006

**Integrated Bio-Behavioral Survey among Male
Labor Migrants in 11 Districts in Western, and
Mid-Far Western Regions of Nepal**

Submitted to:
**Family Health International/Nepal
Gairi Dhara
P.O. Box 8803
Kathmandu, NEPAL**

Submitted by:



**New ERA
P.O. Box 722
Rudramati Marga, Kalopul
Kathmandu, Nepal**

In Collaboration with



**STD/AIDS Counseling and Training Services
P.O. Box 7314
Pyukha, Kathmandu, Nepal**

August 2006

ACKNOWLEDGEMENTS

We would like to extend our sincere and heartfelt gratitude to Family Health International/Nepal (FHI/Nepal) for entrusting us the responsibility to conduct such an interesting and vital study.

The study team would like to express special thanks to Ms. Asha Basnyat, Country Director, FHI/Nepal, Ms. Kamala Moktan, Technical Officer, FHI/Nepal and Dr. Dimitri Prybylski, Senior Technical Officer – ESR, FHI/Bangkok. Their inputs proved invaluable throughout the course of this study.

Dr. Laxmi Bilas Acharya, Team Leader – Surveillance, Research, Monitoring and Evaluation, FHI/Nepal deserves special credit for his technical inputs and guidance throughout the whole process of the study.

We are also indebted to various organizations such as Nepal Family Planning Association (Kapilvastu), MDM (Syangja, Kaski), Nepal Red Cross Society (Syangja, Kaski, Janalibandali, Doti, Kanchanpur), INF/Paluwa (Kaski), Naulo Ghumti (Kaski), Friends of Hope (Kaski), Gangotri Gramin Bikash Manch (Achham), Oppressed Class and Women Awareness Center (OCWAC-Achham), National Health Foundation/Hasti AIDS (Achham, Doti), Sewak Nepal (Doti), District AIDS Coordination Committee (DACC/Achham), Care Nepal (Doti), Ruduk (Doti) for their valuable suggestions and cooperation during the field work of the study. We would like to gratefully acknowledge District Health Office, Local Administrative Bodies in the study districts for providing necessary administrative support during the study period.

The study team would like to express heartfelt thanks to all the study participants who provided their valuable time for the interview and shared their personal experiences to bring the study to this shape.

Last but not the least, the strenuous effort put up by each and every member of the field team, coding members and data analysts have all contributed to give final shape to this report. We sincerely acknowledge their contribution.

Study Team
New ERA

STUDY TEAM MEMBERS

Key Team Members

1.	Mr. Sidhartha Man Tuladhar	-	Project Director
2.	Mr. Niranjan Dhungel	-	Project Co-ordinator
3.	Ms. Pranita Thapa	-	Research Officer
4.	Mr. Narayan Prasad Sitaula	-	Senior Research Assistant
5.	Mr. Ramesh Dangi	-	Senior Research Assistant
6.	Mr. Sachin Shrestha	-	Research Assistant
7.	Mr. Shailesh Dhoj Joshi	-	Research Assistant
8.	Ms. Sarmila Prasai	-	Senior Computer Programmer

Field Study Team Members

1.	Mr. Janak Chand Balan Kshetri	-	Research Assistant
2.	Mr. Megh Bahadur Khatri	-	Research Assistant
3.	Mr. Mohan Singh Dhami	-	Research Assistant
4.	Mr. Tirtha Gautam	-	Research Assistant
5.	Mr. Dev Bahadur Dangi	-	Field Supervisor
6.	Mr. Dhurba Raj Thapa	-	Field Supervisor
7.	Mr. Ishwor Krishna Takhachhe	-	Field Supervisor
8.	Mr. Kamal Timsina	-	Field Supervisor
9.	Mr. Kripa Acharya	-	Field Supervisor
10.	Mr. Kushal Bhatta	-	Field Supervisor
11.	Mr. Lila Nepal	-	Field Supervisor
12.	Mr. Nawaraj Tiwari	-	Field Supervisor
13.	Mr. Omkar Prasad Lamsal	-	Field Supervisor
14.	Mr. Ramji Prasad Devkota	-	Field Supervisor
15.	Mr. Roshan Sitoula	-	Field Supervisor
16.	Mr. Sabin Karki	-	Field Supervisor
17.	Mr. Sanu Bhai Thapa	-	Field Supervisor
18.	Mr. Sumanta Neupane	-	Field Supervisor
19.	Mr. Suvin Gopal Pradhan	-	Field Supervisor
20.	Mr. Yubaraj Dahal	-	Field Supervisor
21.	Mr. Dipendra Kumar Yadav	-	Health Assistant
22.	Mr. Lalan Prasad Shah	-	Health Assistant
23.	Mr. Prabin Shrestha	-	Health Assistant
24.	Mr. Vishnu Khanal	-	Health Assistant
25.	Mr. Santosh Neupane	-	Health Assistant
26.	Dr. Sunil Kumar Shah	-	Medical Officer
27.	Mr. Hari Govinda Maharjan	-	Counselor
28.	Mr. Khimanda Rijal	-	Counselor
29.	Mr. Laxmi Datta Sapkota	-	Counselor
30.	Mr. Yuba Raj Sapkota	-	Counselor
31.	Mr. Naresh Maharjan	-	Counselor

Data Entry/Tabulation /Coding

1.	Mr. Babu Raja Dangol	-	Coding Supervisor
2.	Ms. Sharada Dangol	-	Editor
3.	Ms. Nitu Satyal	-	Coder
4.	Ms. Suva Laxmi Ranjit	-	Coder
5.	Mr. Pradeep Dahal	-	Coder
6.	Ms. Sama Shrestha	-	Data Entry Person
7.	Ms. Sanu Maiya Shrestha	-	Data Entry Person

Administration Support

1.	Mr. Sanu Raja Shakya	-	Senior Word Processor
2.	Mr. Rajendra Kumar Shrestha	-	Office Assistant

Laboratory Team (SACTS)

1.	Dr. Vijaya Lal Gurubacharya	-	Consultant Pathologist
2.	Mr. Janardan Kuinkel	-	Senior Lab Technician
3.	Mr. Binod Shrestha	-	Lab Technician
4.	Mr. Buddi Kumar Byanjankar	-	Lab Technician
5.	Mr. Purushottam Kuinkel	-	Lab Technician
6.	Mr. Ram Bahadur Shrestha	-	Lab Technician
7.	Mr. Narahari Poudel	-	Lab Technician
8.	Mr. Saroj Khanal	-	Lab Technician

TABLE OF CONTENTS

	<u>Page</u>
ACKNOWLEDGEMENTS	i
STUDY TEAM MEMBERS	ii
TABLE OF CONTENTS	iv
LIST OF TABLES	vi
ABBREVIATIONS	vii
MAP (IBBS Among Male Labor Migrant – 2006)	viii
EXECUTIVE SUMMARY	ix
Chapter 1.0: INTRODUCTION	1
1.1 Context	1
1.2 Objective of the Study	2
Chapter 2.0: METHODOLOGY	3
2.1 Study Population	3
2.2 Study Area	3
2.3 Sample Design and Sample Size.....	3
2.4 Preparation for Fieldwork	4
2.5 Implementation of the Study	5
2.6 Field Operation Procedures	6
2.7 Coordination and Monitoring	7
2.8 Ethical Issues	8
2.9 HIV/STI Pre and Post-test Counseling and Follow-Up	8
2.10 Constraints in the Field Work	8
2.11 Data Processing and Analysis	9
Chapter 3.0: KEY FINDINGS	10
3.1 Birthplace and Currently Living Places	10
3.2 Socio-Demographic Characteristics	10
3.3 Migration History of the Respondents	12
3.4 Sexual Behavior	15
3.5 Sexual Practices of Male Labor Migrants in Nepal	15
3.6 Sexual Practices of Male Labor Migrants in India	20
3.7 Availability of Condoms	24
3.8 Knowledge of HIV/AIDS	26
3.9 Access to HIV/AIDS awareness Messages	27
3.10 Knowledge and Treatment of Sexually Transmitted Infections (STIs)	27
3.11 Perception on HIV Test	30
3.12 Use of Alcohol and Drugs	30
3.13 Knowledge of HIV/AIDS	31
3.14 Stigma and Discrimination	33

	<u>Page</u>
Chapter 4.0: HIV Prevalence	34
4.1 Prevalence of HIV	34
4.2 Relationship between Socio-Demographic Characteristics and HIV Infection	34
Chapter 5.0: CONCLUSIONS AND RECOMMENDATIONS	36
5.1 Conclusions.....	36
5.2 Recommendations.....	38

REFERENCES

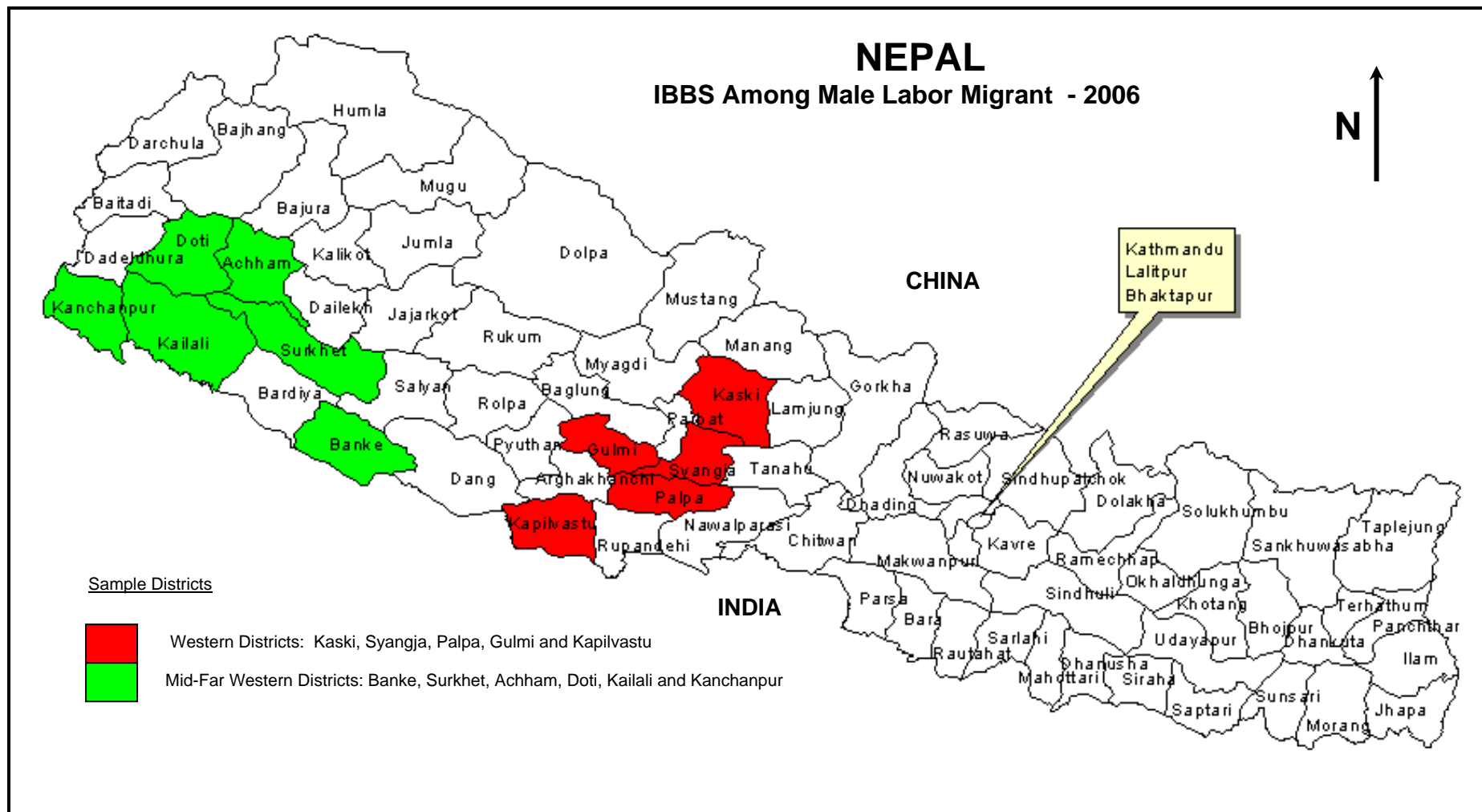
ANNEXES

LIST OF TABLES

	<u>Page</u>
Table 1: Number of Respondent by Birth District	10
Table 2: Socio-Demographic Characteristics of Respondents.....	11
Table 3: Migration Destinations of Male Labor Migrants	12
Table 4: Male Labor Migrants by Different Characteristics	13
Table 5: Types of Work of Male labor migrants in India	14
Table 6: Districts Visited and Types of Work Performed by Returnee Migrants in Nepal	14
Table 7: Sexual Behavior of Male Labor Migrants	15
Table 8: Sexual Behavior of Male Labor Migrants with FSWs in Nepal	16
Table 9: Sexual Behavior of Male Labor Migrants and Condom Use by Them with FSW in Nepal	17
Table 10: Sexual Behavior of Male Labor Migrants and Condom Use by Them with their Spouses in Nepal	18
Table 11: Sexual Behavior of Male Labor Migrants and Condom Use by Them with Girl Friends in Nepal	19
Table 12: Sexual Behavior of Male Labor Migrants and Condom Use with Other Female Partners in Nepal.....	20
Table 13: Sexual Behavior of Male Labor Migrants with FSWs in India	21
Table 14: Sexual Behavior of Male Labor Migrants and Condom Use by Them with FSW in India	22
Table 15: Sexual Behavior of Male Labor Migrants and Condom Use by Them with Their Girl Friend in India.....	23
Table 16: Sexual Behavior of Male Labor Migrants and Condom Use by Them with Other Female Partner in India.....	24
Table 17: Availability of Condoms as Reported by Male Labor Migrants.....	25
Table 18: Sources of Knowledge of HIV/AIDS among Male Labor Migrants	26
Table 19: Knowledge of HIV/AIDS among Male Labor Migrants	27
Table 20: Reported STI and Treatment (Past Year)	28
Table 21: Reported STI and Treatment (Current)	29
Table 22: Knowledge about HIV Testing Facilities among Labor Migrants and History of HIV Test	30
Table 23: Use of Alcohol and Drugs among Male Labor Migrants	31
Table 24: Percentage of Male Labor Migrants with Proper Knowledge of HIV/AIDS	32
Table 25: Knowledge on Ways of HIV/AIDS Transmission among Male Labor Migrants.....	32
Table 26: Stigma against HIV/AIDS among Male Labor Migrants	33
Table 27: HIV Prevalence By Sample Sites	34
Table 28: Relationship between Socio-Demographic Characteristics and HIV Infection	35

ABBREVIATIONS

AIDS	Acquired Immuno-Deficiency Syndrome
FHI	Family Health International
GO	Government Organization
HA	Health Assistant
HIV	Human Immuno-Deficiency Virus
IBBS	Integrated Bio-Behavioral Survey
ID	Identification Number
IDU	Injecting Drug Users
MSM	Men who have sex with men
NCASC	National Center for AIDS and STD Control
NGO	Non-government Organization
NHRC	Nepal Health Research Council
PHSC	Protection of Human Subjects Committee
STD	Sexually Transmitted Diseases
STI	Sexually Transmitted Infection
SW	Sex Workers
VDC	Village Development Committee



EXECUTIVE SUMMARY

This is the first round of the Integrated Bio-Behavioral Survey (IBBS) conducted among 360 migrant workers in five districts of Kaski, Palpa, Syangja, Kapilbastu and Gulmi in Western development region and another 360 migrants from Banke, Surkhet, Kailali, Kanchanpur, Doti, and Achham districts in Mid-Far Western regions. These districts were selected in consultation with FHI/Nepal and USAID/Nepal, as they have very high concentration of population who migrate for work to India. The IBBS was carried out during the months of March-June, 2006. The survey measured HIV and Syphilis prevalence among migrant workers and variables which are associated with the risk of HIV infection, such as condom use, sexual behaviors, knowledge of HIV/AIDS, reported cases of sexually transmitted infection (STI), STI treatment behaviors, exposure to HIV/AIDS messages and drug habits.

Study Methodology

Study Population

This cross-sectional IBBS was conducted among male labor migrants, one of the sub-groups of the clients of sex workers who are at higher risk for STI/HIV transmission. The eligibility criterion for recruitment into the study was: “A returnee male migrant aged 18-49 years, having stayed continuously or with interruption for at least 3 months in India as a migrant worker and having returned to Nepal within three years prior to the date of survey”.

Sample Design and Sample Size

Two stage cluster sampling was adopted. In the first stage 30 clusters were selected using probability proportional to size (PPS) sampling method and in the second stage migrants were selected randomly. A sample size of 360 labor migrants was deigned for each sector. Therefore in the second stage 12 migrants were selected from each of the clusters selected in the first stage. List of total returnee migrants available in the selected clusters at the time survey was updated and 12 migrants were drawn randomly from that list. A village development committee (VDC) with at least 25 returnee labor migrants in the village was defined as a cluster.

Laboratory Testing

After the interview of the respondent administering a structured questionnaire, an informed oral consent was obtained for HIV testing and the consent taking process was witnessed by another staff. After taking the consent, 5 ml blood was taken from each respondent for HIV testing. Syndromic treatment was provided for STI problems after the examination by a health assistant. All study participants were provided pre test counseling for HIV before blood sample collection.

This study was designed to provide results with counseling within minimum number of days after the blood sample collection. Hence reagents were chosen such that there was no need of maintaining cold chain. Serum samples were tested by two rapid tests for detection of HIV antibodies. Determine-ABBOTT, Japan and Capillus-Trinity

Biotech, Ireland were used. Uni-Gold-Trinity Biotech, Ireland was also used as a tie breaker test.

Findings

The returnee migrants included in the study were mostly young people with their median age being 25 and 26 years in Western and Mid-Far Western sample districts. They represented diverse castes/ethnic communities of the study areas. Only few of them had passed SLC or higher level of studies and 7.5 percent in Western and 14.2 percent in Mid-Far Western sampled districts were illiterate.

The respondents had mostly migrated for work to Delhi and Maharashtra (Mumbai is located in Maharashtra) in India. Migration takes place generally at young age as more than five in every ten of the respondents in both the samples had migrated before they were 20 years old. A majority of the respondents in the sampled districts had stayed in India for more than two years. Some of them (5.8% in Western and 1.1% in Mid-Far Western samples) had also migrated for work to other districts in Nepal after returning from India.

More than one-half of the returnee migrants in both the samples have had their first sexual encounters at quite an early age of 15-19 years. Their sex partners included their spouses, girl friends, other female friends and sex workers in Nepal as well as in India. In the past year, eight respondents in both the samples had sexual contact with sex workers in Nepal while 11 respondents in Western and 31 in Mid-Far Western sample had sexual contact with FSWs in India. Consistent use of condom was the lowest during sexual contacts with spouses (6.3% in Western and 5.3% in Mid-Far Western sample) in the past year. Consistent condom use during sexual intercourse with girlfriends/other female friends was also quite low. One-half of the respondents in Mid-Far Western sample districts had used condoms consistently with sex workers in Nepal while none from western districts had used them in the past year. Comparatively, condom use was higher among the respondents reporting to have had sexual contact with sex workers in India in the past year. More than 60 percent of them had consistently used condoms during such sexual encounters.

About 24 percent respondents in Western sample and 30.7 percent in Mid-Far Western sample reported that they had easy access to condoms and could get them within five minutes from the nearest place. Some respondents (14.4% in Western and 26.9% in Mid-Far Western sample) got condoms free of cost all the time. Most of them obtained free condoms from health post/health centers.

More than nine in every ten of the respondents had heard about HIV/AIDS. Radio was the most common source of information for about two thirds of the respondents in both the samples. Overall, 48.9 percent respondents in Western samples and 44.7 percent in Mid-Far Western sample also identified all the three- A (Abstinence from sex) B (Being faithful to a partner) and C (Consistent use of condom) as HIV/AIDS preventive measures. In total, 16.1 percent of the respondents in Western and 22.2 percent in Mid-Far Western samples were aware of five major indicators of HIV transmission.

More than two-fifths (43.1%) of the respondents in Western sample and more than one-half of them (55.8%) in Mid-Far Western sample knew that they could have a confidential HIV test in their community. However, only some (12.2% in Western and 8.6% in Mid-Far Western samples) had ever undertaken the test.

Thirty-seven respondents (10.3%) in Western and 30 (8.3%) in Mid-Far Western sample districts had been experiencing at least one STI symptom at the time of survey. However, around two-thirds of them in each sample region had not sought any treatment. The respondents who had gone for treatment had mostly visited private clinics.

Out of the 360 returnee migrants participating in the study, 4 (1.1%) in Western and 10 (2.8%) in Mid-Far Western sample respectively were tested positive for HIV. In Mid-Far Western sample, HIV prevalence was found to be significantly higher (with 5% significance level) among the older returnee migrants i.e. migrants aged more than 25 years, those who had indulged themselves in sexual contact with sex workers in India and those who had been to Maharashtra as labor migrants compared to their other counterparts. About 4.6 percent of respondents who were of age more than 24 years were HIV positive compared to 0.6 percent among those under 25 years age group. HIV prevalence among those respondents who had ever visited sex workers in India was 8.2 percent compared to 0.8 percent among those who did not have such sexual contacts. Additionally, HIV prevalence rate among those returnee migrants who had been to Maharashtra was 5.1 percent while it was 1.4 percent among those who had not been there. In western sample however, no such significant association between the above variables and HIV prevalence was noticed.

Recommendations

Migrants to India for work are more likely to be engaged in sex with multiple partners. HIV/AIDS awareness programs targeting this particular group at VDC and community level should be extensively launched.

The migrant workers do not use condoms consistently with their sex partners. Consistent use of condom was low even with sex workers. HIV/AIDS prevention programs should focus more on the need for consistent condom use for HIV/STI infection prevention purposes with all kinds of partners.

Free condom distribution programs for the returnee migrants through NGO/health workers/volunteers should be expanded further as a part of HIV/AIDS awareness campaign.

HIV awareness among the migrants is found to be limited. For instance, about two third of the respondents had the knowledge that abstinence can prevent HIV infection. Moreover, only about 16.1 percent respondents in Western and 22.2 percent in Mid-Far Western sample districts were aware of all the five major indicators of HIV transmission, namely being faithful to one partner and consistent condom use help prevent HIV, a healthy looking person may have HIV infection, and mosquito bite and *jutho* do not transmit HIV. IEC materials like poster/pamphlets and billboard/signboards have been quite effective in disseminating HIV/AIDS awareness information to the target group. Such activities should be continued and further extended to cover major highways and exit points.

Chapter 1.0: INTRODUCTION

1.1 Context

Nepal is presently experiencing a concentrated epidemic of HIV with prevalence at or over 5 percent in certain high risk groups such as injecting drug users (IDU), male sex workers (MSW) who sale sex to male clients and migrant laborers to India who go to cities like Mumbai. The possibility of transmission of HIV infection from these high-risk groups to the general population is a serious health concern that the country has been facing. The country's vulnerability to HIV has increased because of several socio-economic factors including poverty coupled with lack of employment opportunities, large-scale migration and ten years of conflict.

At the end of July 2006, a cumulative total of 7,373 cases of HIV infection had been reported to the National Center for AIDS and STD Control (NCASC). Among them, 49.6 percent were clients of FSWs or patients suffering from sexually transmitted diseases (STDs), 8.5 percent were FSWs and 21 percent were IDUs. Although the existing HIV/AIDS reporting system at NCASC cannot measure the prevalence rate of the infection because of underreporting and delays in reporting, these data fairly indicates which sub-populations are affected.

In Nepal socio- economic and political factors are seen responsible for inducing large-scale migration abroad, particularly to India. People owing low productive land and from low economic brackets and who are directly or indirectly influenced by ongoing political conflict are particularly the ones who are likely to migrate. A large number of men and women leave their households for seasonal or long-term labor migration to urban centers or to the neighboring countries, in search of employment. Labor migrants are reversible in nature and are characterized by the option of returning to his village of origin due to ownership of lands in different intervals of a year (Dilli Ram Dahal, et al., 1977) Separated from their spouses and adrift from the social bindings many of these migrants indulge in unsafe sexual practices at their working centers. Regular monitoring and health assistance to this population is lacking especially in the case of those who migrate in neighboring countries like India compared to those who receive authorized permission to work in third world countries. There is no authentic data to indicate the exact linkage between the extent of migration and HIV transmission in Nepal. However, migrants both internal and external make high-risk group for HIV transmission.

Studies conducted among migrant and non-migrant males of Kailali and Achham districts have revealed that international migrants are at higher risk of contracting STD and HIV infection (New ERA/SACTS/FHI, 2002). The study found 7.7 percent of the migrants who went to Mumbai in India from Achham district were HIV positive. Some other studies conducted in Mid-Far Western hill districts also indicated more than 8 percent HIV prevalence among the migrants who go to Mumbai. In view of such situation FHI/Nepal has launched number of behavioral change and HIV/STI control programs targeted to labor migrants particularly in the Mid-Far Western districts of Nepal. However, no study to represent migrants from larger areas in the Western to Mid-Far Western region of Nepal was conducted so far. New ERA and SACTS with technical support from FHI/USAID, Nepal carried out this integrated

bio-behavioral study (IBBS) to collect behavioral data from labor migrants and to estimate the prevalence of HIV among the migrant particularly of the age group 18 to 49 years. The focus of this study has been to reveal the prevalence rate of HIV and its relationship to sexual behavior among the returnee migrants.

1.2 Objective of the Study

The objective of the study is to determine the prevalence of HIV among returnee male labor migrant from India and to assess their HIV/STI risk related behaviors.

The specific objective of the study was to collect information related to socio-demographic characteristics; sexual and drug using behaviors; knowledge of HIV/AIDS; knowledge and treatment of STI problems and knowledge and use of condom from returnee male labor migrant from India in the 11 districts of Western to Far Western regions and to relate them with HIV infection.

Chapter 2.0: METHODOLOGY

2.1 Study Population

The study population for this cross-sectional Integrated Bio-behavior Survey (IBBS) was male returnee migrants, who are considered to be one of the high-risk sub-groups. The eligibility criteria for the inclusion in the study was “A male returnee migrant aged 18-49 years, having stayed continuously or with interruption for at least 3 months in India as a migrant worker and having returned to Nepal within three years prior to the date of survey”.

2.2 Study Area

Five districts were chosen from Western development region and six districts from the Mid to Far Western development regions. These districts were selected on the basis of the concentration of labor migrants who mostly migrate to India. In this selection process inputs from FHI/Nepal and USAID/Nepal were obtained. Western sample included Kaski, Palpa, Syangja, Kapilbastu and Gulmi districts while the Mid to Far-Western sample covered Kailali, Kanchanpur, Doti, Achham, Banke and Surkhet districts (Fig. 1).

2.3 Sample Design and Sample Size

This is the first IBBS being conducted among migrant population of the Western and Mid-Far Western region of Nepal. Before the initiation of the study, a preliminary field survey was conducted to understand the actual field situation in the study districts.

Concerned stakeholders at district and VDC level and local governmental organizations (GOs) and non-governmental organizations (NGOs) representatives were consulted to collect information on migrant population and their mobility pattern. A rapid listing of the migrants and their status was carried out at the VDC level. In addition to this, both maximum and minimum number of returnee migrants who could be met at the time of actual field survey, was listed in all study districts gathering information from district headquarters based GOs and NGOs. Few randomly selected VDCs in all districts were also visited to update the list and also to cross-check the information obtained from the district headquarters.

Based on the preliminary information collected prior to the field survey a list of the returnee migrants and those migrants who could possibly be met during the survey was prepared. The average estimated numbers of returnee migrants who would be available in the study districts at the time of survey was about 6,850 in five districts in Western and about 5,654 in six Mid to Far Western districts. As all VDCs in the study districts were not accessible due to the insurgency situation these estimated numbers are for 294 accessible VDCs only (Annex 1).

Two separate samples of size 360 labor migrants were designed in Western and Mid-Far Western clusters. The Western sector sample included Kaski, Syangja, Palpa, Gulmi and Kapilvastu districts and the Mid-Far Western sector sample included

Achham, Doti, Kailali, Kanchanpur, Banke and Surkhet districts. Two-stage cluster sampling was used to draw the sample. VDCs with at least 25 returnee labor migrants were defined as clusters in the first stage. VDCs with less than 25 estimated returnee labor migrants were combined with the neighboring VDC to make a cluster with minimum size of 25 migrants. In the first stage 30 clusters were selected using probability proportional to the size (pps) method and in the second stage from each selected clusters 12 respondents were selected randomly. Annex 2 shows the distribution of selected samples by districts.

The sample size of the male labor migrants was 360 each in Western and Mid-Far Western region. This study covered five districts in Western and six districts in Mid-Far Western districts.

2.4 Preparation for Fieldwork

Research Instruments

A quantitative research approach was adopted in the study. The structured questionnaire used in IBBS among male respondents was revised with some additional questions related to migration. Inputs received from the field team during the mock interview sessions conducted at the time of training of study team members prior to the survey were also duly considered for giving a final shape to the questionnaire. The questionnaire included questions on demographic characteristics and sexual behaviors - sexual history, use of condoms, risk perception, awareness of HIV/AIDS/STIs, incidence of STI symptoms, and alcohol/drug using habits (Annex 3). Apart from the structured questionnaire, questions related to STI symptoms were asked to the respondents by a health professional to verify the occurrence of such symptoms in the past or during the survey. The study participants were provided syndromic treatment for STI problems and a lab technician collected blood samples for HIV testing. Strict confidentiality was maintained throughout the study period.

Study Team

The study was conducted by a team of a study director, a research coordinator, a research officer, two research assistants and field staff.

Four male field teams were formed for the survey, each consisting of one team leader, four field supervisors/interviewers, one health assistant, one lab technician, one counselor.

Apart from these trained personnel, two locals from each cluster were recruited as a motivator and a runner. Locals were involved as team members to obtain their support in building good relation with the community, facilitation in local language and to some extent for security reasons. The motivator was more responsible in identifying the individual randomly selected in the sample and facilitating the recruitment process, while the runner was to support in setting up the clinic and performing other in- house tasks. Both locals hired were given briefing on the objectives of the survey and their responsibilities as a part of the study team.

Recruitment and Training of Research Team

Based on the past experience and academic qualification, team leaders, supervisors/interviewers and counselors were selected for the survey by New ERA. Exposure to HIV/AIDS programs was one of the main criterions in the selection process. For the clinical part of the study, the lab technicians were selected solely by SACTS while health assistants were recruited by New ERA in consultation with SACTS.

A one-week intensive training was organized for all the field researchers focusing on the introduction to the study, administration of the questionnaire including characteristics of the target groups, methods of approaching them, rapport building techniques, and sharing of previous study experiences (problems and solutions). In addition, the training session also involved mock interviews, role-plays, class lectures to understand each and every question included in the questionnaire. Role-play practices were carried out assuming the actual field situation. Possible problems that could be faced while approaching the respondents and ways of overcoming such problems were discussed. The training also focused on providing a clear concept of informed consent, pre-test counseling and basic knowledge of HIV and STIs to the research team.

2.5 Implementation of the Study

New ERA was the prime research organization responsible for carrying out the study. The clinical part of the study was conducted in collaboration with SACTS. SACTS was responsible for setting up the mobile laboratory in the field sites. It also provided training to lab technician, health assistant and conducted HIV tests from blood samples collected from the study participants. New ERA's overall responsibility was to design research methodology including sample design, develop research questionnaire, recruit and train field research team and manage the overall study. Assistance from many local organizations was also sought for the successful completion of the survey.

Identification and Recruitment Process

The field staff members were briefed about the study areas based on the preliminary survey report. District maps with selected VDCs/clusters were also provided to the field team to locate the study areas and plan their working schedule. Meeting at the grass root level was conducted at each selected site to inform the community about the general objective of the study. Local leaders, health personnel, government representatives and other key informants were included in the meeting.

Updating the List of Labor Migrants in the Selected Clusters

Once the study teams were in the selected clusters they visited each and every household in the cluster and prepared a list of returnee labor migrants who met the inclusion criteria for the study. Those migrant laborers who could possibly be met within the study period planned for that particular cluster were only included in the list. For the listing process information derived from the key informants, ward visits or even house to house visits were also utilized. Five to six days was allotted for each

site for updating the list and conducting interviews and providing test results with pre and post test counseling. While updating the list, the names of a returnee migrant and their detailed home address was collected so that the randomly selected individuals in the sample could be properly traced out for interview.

Recruitment and Refusal

People from local NGOs and community leaders were used as motivators/runners. This helped to build good relation with community people and played facilitating role in convincing the randomly selected respondents for their participation in the study. Every respondent was briefed on the objective of the study and the benefits and risks on participation in the study.

A total of 15 respondents in Western sample and 22 in Mid-Far Western sample refused to participate in the study. Primary reason for these refusals was lack of time on the part of the respondents for the interview. Such refusal cases were replaced by individuals preceding or following in the sampling list.

Field Work

The field work of IBBS among labor migrants in Western and Mid-Far Western regions was carried out during the months of March-June, 2006.

2.6 Field Operation Procedures

Clinic Set-up

Due to the mobile nature of the study team there were no specific guidelines for setting up the clinic. The team used locally available shelters like health posts, schools, private houses and even small huts to operate clinic and conduct interview among the respondents. However, hygiene and cleanliness was strictly maintained at each set-up. There were separate rooms for meeting the respondents, laboratory process, physical examination, conducting interview. In few clusters, because of unavailability of enough rooms, some interviews had to be taken in an open but confidential place.

Clinical Procedures

Interview was conducted once the informed consent was obtained from the participant and the consent form was signed by interviewer and the person who witnessed the consent taking procedure. After the completion of the interview trained Health Assistant (HA) examined the respondent for any sign of STI or general health problem (Annex 4). All respondents with any STI symptoms were provided syndromic treatment according to the national guidelines. Some basic medicines were also provided for the wives of the treated respondents. HAs also made referrals to identified cases that needed additional treatment other than those provided at the clinic.

Laboratory Procedures

After pre-test counseling the lab technician briefed the respondents about HIV testing process and sought his consent for drawing blood. From all respondents 5ml blood was drawn from vein using a disposable syringe and stored in a sterile glass tube with the respondents' identification number (ID). Serum was separated from the blood sample by centrifuging and put in a sterile serum vial with waterproof ID label.

This study was designed to provide test results with pre and post counseling in a minimum possible time. Such arrangement was necessary as the respondents were of mobile nature and the study team also had to move from cluster to cluster. As a consequence reagents which can be stored in room temperature were chosen. Serum samples were tested by two rapid tests for detection of HIV antibodies. Determine-ABBOTT, Japan and Capillus-Trinity Biotech, Ireland were used. In case of a tie case, Uni-Gold-Trinity Biotech, Ireland was used as a third test.

Interpretation of the Test Results

- All samples negative by two tests are reported as negative.
- All samples positive by two tests reported as positive.
- All samples positive by one test only subjected to tie breaker test.
- All tests positive by tiebreaker tests are reported positive
- All tests negative by tiebreaker test are reported as negative.

Quality Control of Laboratory Tests

Quality control was strictly maintained throughout the process of the collection of the specimen, their handling and testing stages. All the tests were performed using internal controls. These controls were recorded with all the laboratory data. A total of 10 percent sample selected randomly from the total serum collected was tested by different person from SACTS for quality control test. The quality control samples were given a separate code number to ensure that the person who performed the quality control had no access to the previous test results.

2.7 Coordination and Monitoring

New ERA carried out the overall coordination of the study. It sub-contracted SACTS for setting up laboratory in the field and for undertaking laboratory and clinical part of the study that consisted of collecting and storing the samples and testing them.

The principal investigators and research assistants conducted frequent monitoring and supervision of the field activities and coordinated with various concerned organizations to make the study transparent and effective. All the field members were responsible on a day-to-day basis to ensure that the study was implemented according to the protocol. Team meetings took place every day to update on daily activities and supplies. It helped them coordinate and solve field level problems if any. To coordinate and operate office level decisions field members reported to the senior supervisors or the project coordinator in Kathmandu by telephone whenever necessary. New ERA coordinated with FHI and SACTS to send an appropriate person to the field to deal with any problems reported from the field as and when necessary.

The principal investigators, in conjunction with other designated personnel, were responsible for the overall monitoring. Regular monitoring of the field work also was done from FHI/Nepal.

2.8 Ethical Issues

Ethical approval was obtained from the Nepal Health Research Council (NHRC), Government's ethical clearance body, which approved the protocol, consent forms and draft questionnaires and additionally from the Protection of Human Subjects Committee (PHSC) of Family Health International.

Informed consent was obtained in private setting from the selected respondent at the time of recruitment, at the field level. The purpose of the study and personal benefits to study participants from the study and the activities to be undertaken was explained in simple and understandable terms to all study participants. They were assured of confidentiality and anonymity of the study procedure. Their voluntary participation and freedom of refusal at any stage was also briefed. Their oral consent to participate in the study was signed in a detailed consent form with a witness among the study team within the clinical set-up (Annex 5).

Every respondent were given unique ID numbers as their identification to operate tests and to provide test results with post-tests counseling. They were briefed about use of ID card and risks of losing or mixing with other respondents. This also provided additional confidence among the respondents regarding their personal confidentiality.

2.9 HIV/STI Pre and Post-test Counseling and Follow-Up

After the interview with structured questionnaires, the trained enumerators provided pre-test counseling to the participants. Respondents were informed about the process of clinical check-ups and lab tests and probable consequences of knowing the results and its benefits. These enumerators were well trained on the pre-test counseling process.

A professional counselor provided post-test counseling to the participants who came back to receive the results after tests (Annex 6). Both types of respondents with positive or negative test results were given equal importance while providing counseling. More details were provided on subjects relating to HIV/AIDS and STIs. In both steps respondents were refreshed on the probable social and health consequences and precautions to be under taken, after knowing the results. While dealing with respondents showing positive test results, additional care was given in spite of their informed consent signed.

2.10 Constraints in the Field Work

Ongoing difficult political situation in the country was one of the factors in smooth conduction of the study. In most of the cases, mobility of field members and transport of clinical supplies between clusters was very hard due to route blockade. In most of the clusters the teams had to answer several questions from the community people, security and even the Maoists. Likewise in some clusters, the team faced problem in convincing respondents for voluntary participation because of the insurgency and to

certain extent, because of the nature of the study. However, no major problem was faced in the field that hampered the quality of the field work.

2.11 Data Processing and Analysis

Quality of data was cross-checked at various stages of the study. All the completed questionnaires were thoroughly checked by the field supervisors in the field. Consistency of data was tested by cross examination of the filled questionnaire among different members of a team. These questionnaires were brought to New ERA for further checking, coding, processing, data entry and analysis. In case of any inconsistency in data respective teams were immediately informed.

Double entry system was used to minimize errors in the data entry process. Simple statistical tools such as mean, median, frequency, percentages, etc. were used to analyze the data. The FoxPro database program was used for data entry and the data was analyzed using the SPSS package.

Chapter 3.0: KEY FINDINGS

A total of 720 male labor migrants from 11 districts in Western and Mid to Far Western districts participated in the study. Two separate samples of size 360 each were designed for Western five districts and Mid to Far-Western six districts. This chapter describes the characteristics and sexual behavior of the migrant workers and the prevalence of condom use among them. When describing the characteristics, the two groups (returnee migrants in Western and Mid-Far Western sample districts) are analyzed separately.

3.1 Birthplace and Currently Living Places

The respondents were born in different districts in West to Far-Western parts of Nepal. The largest proportion of 30.3 percent respondents in Western sample were born in Syangja, while in Mid-Far Western the largest proportion of 28.6 percent were born in Achham district. Some (1.1% in Western and 7.2% in Mid-Far Western sample) were born in other districts not included in the survey (Annex 7)

As seen in the Table below, at the time of survey most of the respondents were living in the same district where they were born. More than 90 percent of the respondents in all the sample districts in western region were currently living in the district of their origin. In Mid-Far Western sample too except for the district of Kailali, a majority of the respondents were born in the same district where they were interviewed (Table 1).

Table 1 : Number of Respondent by Birth District

Study Region	No of Migrants interviewed	Migrants born in the interviewed district	
		N	%
Western			
Syangja	120	109	90.8
Kapilbastu	72	71	98.6
Gulmi	60	57	95.0
Kaski	60	56	93.3
Palpa	48	43	89.6
Total	360	336	93.3
Mid to Far Western			
Achham	96	96	100.0
Surkhet	60	52	86.7
Banke	60	48	80.0
Doti	36	36	100.0
Kanchanpur	48	39	81.3
Kailali	60	35	58.3
Total	360	306	85.0

3.2 Socio-Demographic Characteristics

The respondents' age distribution was similar in both samples. The median age in Western and Mid-Far Western sample districts was 25 and 26 years respectively. A noticeably high proportion (36.9% in Western and 34.4% in Mid to Far Western samples) of the respondents belonged to 20-24 years age group.

Table 2: Socio-Demographic Characteristics of Respondents

Characteristics	Western		Mid-Far Western	
	N=360	%	N=360	%
Age				
18 – 19	34	9.4	40	11.1
20 – 24	133	36.9	124	34.4
25 – 29	69	19.2	75	20.8
30 – 34	51	14.2	49	13.6
35 – 49	73	20.3	72	20.0
Range	-	18-49 years	-	18-48 years
Mean/Median Age:	-	27.8/25.0	-	27.7/26.0
Education				
Illiterate	27	7.5	51	14.2
Literate, no schooling	17	4.7	10	2.8
Grade 1 – 5	132	36.7	122	33.9
Grade 6 – 9	156	43.3	148	41.1
SLC and Above	28	7.8	29	8.1
Ethnic/Caste Group				
Brahmin	85	23.6	49	13.6
Damai/Sarki/Kami	73	20.3	104	28.9
Magar	51	14.2	30	8.3
Chhetri/Thakuri	48	13.3	119	33.1
Musalman	21	5.8	3	0.8
Terai Caste	18	5.0	8	2.2
Gurung	15	4.2	0	0.0
Yadav/Ahir	14	3.9	4	1.1
Newar	12	3.3	1	0.3
Kumhal	6	1.7	4	1.1
Tharu	5	1.4	37	10.3
Pashwan	9	2.5	0	0.0
Tamang	1	0.3	0	0.0
Others (Dhobi, Sunwar)	2	0.6	1	0.3
Marital Status				
Married	259	71.9	303	84.2
Divorced/Separated	5	1.4	10	2.8
Widow	3	0.8	1	0.3
Never Married	93	25.8	46	12.8
Currently Living With				
With Wife	257	71.4	303	84.2
With Parents	94	26.1	54	15.0
With Children	4	1.1	1	0.3
Alone	2	0.6	1	0.3
With Others	3	0.8	1	0.3

Around eight percent of the respondents in Western sample and 14 percent in mid-far Western sample were illiterate. Slightly more than two-fifths (43.3% in Western and 41.1% in Mid-Far Western samples) had completed 6-9 grades while 7.8 percent in Western and 8% percent in Mid-Far Western sample had passed SLC (School Leaving Certificate) or higher level of education.

The respondents in both samples represented almost all castes/ethnic communities of the region. In Western sample Brahmins were in majority (23.6%) followed by ethnic communities of Damai/Sarki/Kami (20.3%), Magar (14.2%), and Chhetri/Thakuri (13.3%). In Mid-Far Western sample, Chhetri/Thakuris were in majority. The next most represented ethnic community was Damai/Sarki/Kami (28.9%) and Brahmin (13.6%).

The majority of the respondents in Western as well as in Mid-Far Western sample (71.9% and 84.2% respectively) were married. Almost all married respondents were living with their spouses at the time of survey. Other respondents were living with their parents, children, alone or with other friends (Table 2).

3.3 Migration History of the Respondents

A large number of Nepalese leave their homes in search of better economic opportunities. It was seen in this survey that people in Western sample districts migrate mostly to Delhi (42.2%); almost two-fifths (39.4%) had also been to Maharashtra. In Mid-Far Western sample, 43.3 percent of the respondents had migrated for work to Maharashtra, 16.4 percent in Uttaranchal Pradesh and 15.6 percent had worked in Gujarat. (Table 3)

Table 3: Migration Destinations of Male Labor Migrants

Destination	Western		Mid-Far Western	
	N=360	%	N=360	%
Maharashtra	142	39.4	156	43.3
Delhi	152	42.2	33	9.2
Uttaranchal Pradesh	1	0.3	59	16.4
Gujarat	24	6.7	56	15.6
Himanchal Pradesh	8	2.2	50	13.9
Punjab	36	10.0	34	9.4
Uttar Pradesh (U.P.)	33	9.2	20	5.6
Madhya Pradesh	28	7.8	19	5.3
Hariyana	26	7.2	26	7.2
Chandigadh	11	3.1	6	1.7
Rajasthan	9	2.5	7	1.9
Aandra Pradesh	8	2.2	10	2.8
Karnataka	8	2.2	3	0.8
West Bengal	7	1.9	0	0.0
Tamilnadu	6	1.7	4	1.1
Nagaland	4	1.1	1	0.3
Asam	4	1.1	0	0.0
Jharkhand	4	1.1	0	0.0
Jammu Kashmir	3	0.8	9	2.5
Other States	10	2.8	7	1.9

Note: The percentages add up to more than 100 because of multiple responses.

A majority of the respondents had left their homes in search of job before the age of 20 years (67.5% in Western and 58.1% in Mid- Far Western sample). Others had mostly migrated for job at the age of 20-29 years (27.8% in Western and 35.9% in Mid-Far Western samples). A majority of the respondents had stayed in India for more than two years (78.9% in Western and 65% in Mid- Far Western sample). Few (3.6% in Western and 6.7% in Mid-Far Western sample) had returned home after staying for less than six months in India.

A large proportion of the migrant workers (72.5% in Western and 68.9% in Mid- Far Western sample) made NRS 1001-5000 per month during their last stay in India. Few respondents only (2.5% in Western and 3.4% in Mid-Far Western sample) earned Rs 10,000 or more per month (Table 4).

Many respondents had recently returned from India, as 35.8 percent in Western and 50.3 percent in Mid-Far Western sample districts had returned home less than three months prior to the survey date. Slightly more than one-third of the respondents (39.2% in Western and 35% in Mid-Far Western sample) had returned home in the past 3-12 months. A majority of the respondents (61.7% in Western and 69.4% in Mid- Far Western sample) were intending to go to India again (Table 4).

Table 4: Male Labor Migrants by Different Characteristics

Characteristics	Western		Mid-Far Western	
	N=360	%	N=360	%
Age at first migration				
Up to 19	243	67.5	209	58.1
20-24	76	21.1	101	28.1
25-29	24	6.7	28	7.8
30-34	10	2.8	15	4.2
35-39	5	1.4	6	1.7
Above 40	2	0.6	1	0.3
Range Age	-	7-44 years	-	10-40 years
Mean/Median	-	18.6/18.0	-	19.8/19.0
Duration of Stay in India				
Up to 6 months	13	3.6	24	6.7
7 – 12 months	20	5.6	42	11.7
13 – 24 months	43	11.9	60	16.7
25 and above months	284	78.9	234	65.0
Returned home last				
< 3 months	129	35.8	181	50.3
3-6 months	82	22.8	79	21.9
7-12 months	59	16.4	47	13.1
13-24 months	62	17.2	45	12.5
25-36 months	28	7.8	8	2.2
Planning to revisit India				
Yes	222	61.7	250	69.4
No	108	30.0	67	18.6
Don't Know	30	8.3	43	11.9
During last stay In India the respondent lived with:				
Friends	175	48.6	175	48.6
Relatives	111	30.8	112	31.1
Alone	55	15.3	50	13.9
With Wife	17	4.7	22	6.1
Others	2	0.6	1	0.3
Monthly Income during the last stay in India (NRs)				
0	0	0.0	3	0.8
Below 1,000	0	0.0	1	0.3
1,001-5,000	261	72.5	248	68.9
5,001-10,000	90	25.0	96	26.7
10,001-15,000	8	2.2	10	2.8
More than 15000	1	0.3	2	0.6
Migration Trend				
Up to 2047	72	20.0	58	16.1
2048 – 2052	71	19.7	46	12.8
2053 – 2057	105	29.2	91	25.3
2058 – 2062	112	31.1	165	45.8
Range Year	-	2021-2062	-	2030-2062

Migration pattern as seen in Table 4 has gradually increased over the past some years. Twenty percent respondents in Western sample districts and 16.1 percent in Mid-Far Western sample districts had migrated for work before 2047 BS. The proportion of respondents migrating to India gradually increased by 2053-2057 BS and then after. The largest proportion of 31.1 percent in Western and 45.8 percent in Mid-Far Western samples had migrated for work to India from 2058-2062 BS (Table 4).

The respondents had mostly performed small and low-paying jobs in India. Slightly less than one-half of the respondents in Western sample districts had worked as laborers in factories and other construction sites (48.6%), while in the Mid-Far Western sample district the proportion of respondents reporting so was 55.6 percent (Table 5). The respondents had also worked as laborer in hotels (41.9% in Western and 26.7% in Mid-Far Western sample), security guards (16.9% in Western and 38.9% in Mid-Far Western sample) and as servants/caretakers in different households (29.4% in Western and 8.9 % in Mid-Far Western sample) in India.

Table 5: Types of Work of Male Labor Migrants in India

Type of Work	Western		Mid-Far -Western	
	N=360	%	N=360	%
Laborer/factory labor	175	48.6	200	55.6
Guard	61	16.9	140	38.9
Hotel labor	151	41.9	96	26.7
Caretaker/servant	106	29.4	32	8.9
Agricultural works	8	2.2	20	5.6
Transport worker	18	5.0	17	4.7
Labor in the shop	22	6.1	16	4.4
Technician/operator/mechanics	14	3.9	9	2.5
Government/Pvt. office employee (Cleaner/Cook etc.)	16	4.4	9	2.5
Sewing	11	3.1	5	1.4
Business	13	3.6	3	0.8
Carpenter	9	2.5	2	0.6
Exchange utensils	16	4.4	0	0.0
Supervision	3	0.8	0	0.0
Others	6	1.7	1	0.3

Note: The percentages add up to more than 100 because of multiple responses.

Among the sampled returnee migrants, 5.8 percent in Western and 1.1 percent in Mid-Far Western districts had been to other districts in Nepal for work after returning from India. Among them, in Western sample districts five each (23.8%) had visited Kathmandu and Rupandehi; four (19%) had also been to Kaski (Table 6). In Mid-Far Western sample the four respondents had visited Kathmandu, Kaski, Kalikot and Bajhang respectively. Only two respondents both from Western sample districts had spent less than one month in the place of visit. Others had stayed for longer duration. Most (33.3% in Western and 50% in Mid-Far Western sample districts) respondents had worked as factory laborers in these places too.

Table 6: Districts Visited and Types of Work Performed by Returnee Migrants in Nepal

Visited Districts and Types of Work	Western		Mid-Far Western	
	N	%	N	%
Visited any District in Nepal after Returning from India				
Yes	21	5.8	4	1.1
No	338	93.9	356	98.9
Don't Know	1	0.3	0	0.0
Total	360	100.0	360	100.0
Districts Migrated to				
Kathmandu	5	23.8	1	25.0
Kaski	4	19.0	1	25.0
Kalikot	0	0.0	1	25.0
Bajhang	0	0.0	1	25.0
Chitawan	1	4.8	0	0.0
Lamjung	2	9.5	0	0.0
Syangja	3	14.3	0	0.0
Rupandehi	5	23.8	0	0.0
Surkhet	1	4.8	0	0.0
Kailali	1	4.8	0	0.0
Total	21	*	4	*
Duration of Stay in the District Migrated				
< 1 months	2	9.5	0	0.0
1-2 months	2	9.5	1	25.0
3-4 months	4	19.0	2	50.0
More than 4 months	13	61.9	1	25.0
Total	21	100.0	4	100.0
Types of Work in Nepal				
Factory labor/Labor	7	33.3	2	50.0
Hotel Labor	3	14.3	0	0.0
Transport worker	4	19.0	0	0.0
Business	2	9.5	1	25.0
Government/ Pvt. Office employer (Cleaner/Cook etc.)	4	19.0	0	0.0
Others	2	9.5	1	25.0
Total	21	*	4	*

3.4 Sexual Behavior

The migrant workers were asked certain questions relating to their sex partners and sexual practices. Among the married respondents, 39 percent in Western and 54.5 percent in Mid-Far Western sample districts had been married at the age of 15-19 years of age. The median age of the respondents at the time of their first marriage was 20 years in Western and 19 years in Mid-Far Western sample districts (Table 7). The proportion of respondents who admitted ever having sexual intercourse with women was 96.4 percent in the mid-far Western part and 91.7 percent in Western sample. More than one half of them in both the sampled districts (57.6% in Western and 67.7% in Mid-Far Western samples) had their first sexual encounter at the age of 15-19 years. A noticeably less proportion of the returnee migrants in Western sample (18.1%) ever had sexual contact with a sex worker compared to those in mid-far Western sample (30.6%).

Table 7: Sexual Behavior of Male Labor Migrants

Sexual Behavior	Western		Mid-Far Western	
	N	%	N	%
Age at first marriage				
10-14	8	3.0	12	3.8
15-19	104	39.0	171	54.5
20-24	114	42.7	107	34.1
25-29	37	13.9	22	7.0
Above 29	4	1.5	2	0.6
Range	-	11-35	-	10-34
Mean/Median	-	20.7/20.0	-	19.3/19.0
Total	267	100.0	314	100.0
Ever Had Sex with a Female				
Yes	330	91.7	347	96.4
No	30	8.3	13	3.6
Total	360	100.0	360	100.0
Age at First Sex				
10 – 14	19	5.8	25	7.2
15 – 19	190	57.6	235	67.7
20 – 24	94	28.5	78	22.5
25 – 29	25	7.6	9	2.6
Above 29	2	0.6	0	0.0
Range	-	10-35	-	10-28
Mean/Median	-	19.0/18.0	-	17.9/18.0
Total	330	100.0	347	100.0
Ever Had Sex with a Sex Worker				
Yes	65	18.1	110	30.6
No	265	73.6	237	65.8
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0

3.5 Sexual Practices of Male Labor Migrants in Nepal

3.5.1 Sexual Contact with Female Sex Workers

About 3.6 percent respondents in Western and 8.1 percent of them in mid-far Western sample districts ever had sex with sex workers in Nepal (Table 8). In an average, the respondents in Western sample had visited 6.5 sex workers in Nepal in the last 12 months while in Mid-Far Western districts 4.1 was the average number of sex workers visited by the respondents. A total of 46.2 percent in Western sample districts had sex with more than five sex workers while in Mid-Far Western sample districts 44.8 percent had sex with 2-3 sex workers in Nepal in their lifetime. However, in the past year eight respondents in both the samples only admitted of having sexual contact

with sex workers in Nepal. Among them, 25 percent in Western and 37.5 percent in mid-far Western districts had sex with one sex worker. A majority of those who had sex with sex workers in Nepal (87.5% in Western and 62.5% in Mid-Far Western samples) had more than one sexual contact with sex workers in the last 12 months. Fifty percent respondents in Western and 12.5 percent in mid-far Western sample districts have had last sex with a sex worker within a month prior to the survey. Others had seen them earlier. Hotel/lodges were the most common places where the respondents in Western sample districts had met last sex worker while in Mid-Far Western sample districts they had mostly met them in the sex workers' houses.

Table 8: Sexual Behavior of Male Labor Migrants with FSWs in Nepal

Sexual Behavior	Western		Mid-Far Western	
	N	%	N	%
Ever had sex with FSWs in Nepal				
Yes	13	3.6	29	8.1
No	52	14.4	81	22.5
Never had sex with Sex Worker	265	73.6	237	65.8
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Total Number of FSWs Visited in Nepal				
1	4	30.8	7	24.1
2-3	2	15.4	13	44.8
4-5	1	7.7	3	10.3
>5	6	46.2	6	20.7
Range	-	1-25	-	1-20
Mean	-	6.5	-	4.1
Total	13	100.0	29	100.0
Number of FSWs Visited in the Past Year in Nepal				
1	2	25.0	3	37.5
2-3	3	37.0	5	62.5
4-5	0	0.0	0	0.0
>5	3	37.0	0	0.0
Range	-	1-7	-	1-3
Mean	-	3.8	-	2.1
Total	8	100.0	8	100.0
Frequency of Sex with FSWs in Nepal in the Past Year				
1	1	12.5	3	37.5
2-3	1	12.5	3	37.5
4-5	2	25.0	1	12.5
> 5	4	50.0	1	12.5
Range	-	1-30	-	1-7
Mean	-	9.1	-	2.8
Total	8	100.0	8	100.0
Last Time Sex with FSW in Nepal				
Less than a week	2	25.0	1	12.5
1 - 2 weeks ago	1	12.5	0	0.0
3 - 4 weeks ago	1	12.5	0	0.0
5-7 weeks ago	0	0.0	3	37.5
2 - 3 months ago	3	37.5	2	25.0
More than 3 months ago	1	12.5	2	25.0
Total	8	100.0	8	100.0
Place met last Sex Worker in Nepal				
Hotel/lodge	3	37.5	1	12.5
Restaurant	1	12.5	0	0.0
Street	1	12.5	0	0.0
FSWs house	2	25.0	4	50.0
Forest	0	0.0	2	25.0
Work place	0	0.0	1	12.5
Others	1	12.5	0	0.0
Total	8	100.0	8	100.0

3.5.2 Condom Use with Female Sex Workers

As shown in Table 9, among the sampled population of returnee migrants eight respondents in each of the district (2.2%) have had sex with sex worker in the past year. Among them 50 percent in Mid-Far Western and 12.5percent in Western sample districts had used condom during last sex with sex workers in Nepal. A majority of the respondents had themselves suggested using condom in most of these instances. In the past year however, none of the respondent in the Western districts had been consistent condom users although four in the Mid-Far Western part had used condoms consistently with sex workers. There were also some respondents who had never used condoms during sexual intercourse with sex workers in Nepal. Most of them had not used condoms because they did not like to use them. Non-availability of condoms was mentioned as the primary reason for not using them (Table 9). While interpreting the percentages in Table 9 it should be noted that denominators are very small.

Table 9: Sexual Behavior of Male Labor Migrants and Condom Use by Them with FSW in Nepal

Sexual Behavior and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had Sex with FSW in the Past Year				
Yes	8	2.2	8	2.2
No	5	1.4	21	5.8
Never had sex with sex worker in Nepal	52	14.4	81	22.5
Never had sex with Sex Worker	265	73.6	237	65.8
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Use of Condom During the Last Sex with FSW				
Yes	1	12.5	4	50.0
No	7	87.5	4	50.0
Total	8	100.0	8	100.0
Suggested to Use Condom During Last Sex				
Myself	1	100.0	3	75.0
My partner	0	0.0	1	25.0
Total	1	100.0	4	100.0
Consistent Use of Condom in the Past Year with FSW				
Every time	0	0.0	4	50.0
Most of the time	1	12.5	0	0.0
Sometimes	0	0.0	2	25.0
Rarely	2	25.5	0	0.0
Never	5	62.5	2	25.0
Total	8	100.0	8	100.0
Reason for not Using Condom Always				
Didn't like to use it	5	62.5	2	50.0
Not available	2	25.0	3	75.0
Didn't think it was necessary/Didn't think of it	0	0.0	1	25.0
Others	1	12.5	0	0.0
Total	8	*	4	*

* The percentages add up to more than 100 because of multiple responses.

3.5.3 Sexual Contact with Spouse and Condom Use

Among the study population, 71.1 percent in Western and 83.6 percent in Mid-Far Western sample districts had sex with their wives in the past year (Table 10). A majority of 69.5 percent in Western and 72.8 percent in mid-Far Western districts have had more than five sexual contacts with their wives during one month preceding the survey. Most of these respondents (87.1% in Western and 88% in Mid-Far Western sample) had not used condoms in their last sexual contact with their wives. Among those who had used them a 90.9 percent in Western and 88.9 percent in Mid-Far Western sample had themselves suggested its use. In the past one year too 6.3 percent in Western and 5.3 percent in Mid-Far Western districts had only used

condom consistently with their wives. Most of them had not used condoms because they did not consider it necessary to use them with their wives.

Table10: Sexual Behavior of Male Labor Migrants and Condom Use by Them with their Spouses in Nepal

Sexual Behavior and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had Sex with Wife in the Past Year				
Yes	256	71.1	301	83.6
No	3	0.8	2	0.6
Currently not married	8	2.2	11	3.1
Never married	93	25.8	46	12.8
Total	360	100.0	360	100.0
Use of Condom During Last Sex with Wife				
Yes	33	12.9	36	12.0
No	223	87.1	265	88.0
Total	256	100.0	301	100.0
Person to Suggest the Use of Condom During Last Sex				
Myself	30	90.9	32	88.9
My partner	3	9.1	4	11.1
Total	33	100.0	36	100.0
Consistent Use of Condom with Wife in the Past Year				
Every time	16	6.3	16	5.3
Most of the time	22	8.6	16	5.3
Sometimes	21	8.2	32	10.6
Rarely	16	6.3	32	10.6
Never	181	70.7	205	68.1
Total	256	100.0	301	100.0
Reason for not Using Condom Always				
Didn't think it was necessary/Didn't think of it	174	72.5	220	77.2
Wanted a child	55	22.9	61	21.4
Used Other Contraceptive	42	17.5	60	21.1
Didn't like to use it	36	15.0	53	18.6
Not available	32	13.3	25	8.8
Trust on sex partner	13	5.4	25	8.8
Partner Objected	8	3.3	14	4.9
Wife got pregnant	8	3.3	3	1.1
Lack of knowledge on using condom	6	2.5	2	0.7
Don't know	3	1.3	0	0.0
Others	5	2.1	1	0.4
Total	240	*	285	*
Frequency of Sex with Wife in the Past One Month				
0	11	4.3	8	2.7
1	5	2.0	6	2.0
2-3	31	12.1	25	8.3
4-5	30	11.7	43	14.3
> 5	178	69.5	219	72.8
Don't know	1	0.4	0	0.0
Range	-	0-60	-	0-75
Mean	-	13.8	-	15.7
Total	256	100.0	301	100.0

* The percentages add up to more than 100 because of multiple responses.

3.5.4 Sexual Contact with Girlfriend and Condom Use

Relatively a low proportion of the sampled population (9.4% in Western and 8.1% in Mid-Far Western sample districts) have had sex with their girlfriend in the past year (Table 11). Among them, 47.1 percent in Western and 41.4 percent in Mid-Far Western samples had used condom during their last sexual contact with their girlfriends. All these respondents in Western sample and 75 percent of them in the Mid-Far Western sample had themselves suggested the use of condom in these occasions. In the past year, 50 percent respondents in Western and 41.4 percent in Mid-Far Western sample districts had never used condom during sexual contact with

their girlfriends. Non-availability of condoms was the most popular response provided by the respondents in both sample districts (68.2% and 50%) for not using condoms consistently with their girlfriends. Nineteen respondents in Western (55.9%) and 10 (34.5%) in Mid-Far Western sample districts had not maintained sexual contact with their girlfriends in the past one month while six of them in Western sample (17.6%) and five (17.2%) had one sexual contact with them.

Table 11: Sexual Behavior of Male Labor Migrants and Condom Use by Them with Girl Friends in Nepal

Sexual Behavior and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had Sex with Girl Friend in the Past Year				
Yes	34	9.4	29	8.1
No	296	82.2	318	88.3
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Use of Condom During Last Sex with Girl Friend				
Yes	16	47.1	12	41.4
No	18	52.9	17	58.6
Total	34	100.0	29	100.0
Person to Suggest the Use Condom During Last Sex				
Myself	16	100.0	9	75.0
My partner	0	0.0	3	25.0
Total	16	100.0	12	100.0
Consistent Use of Condom with Girl Friend in the Past Year				
Every time	12	35.3	11	37.9
Most of the time	5	14.7	2	6.9
Sometimes	0	0.0	3	10.3
Rarely	0	0.0	1	3.4
Never	17	50.0	12	41.4
Total	34	100.0	29	100.0
Reason for not Using Condom Always				
Not available	15	68.2	9	50.0
Didn't think it was necessary/Didn't think of it	7	31.8	8	44.4
Trust on sex partner	3	13.6	1	5.6
Didn't like to use it	2	9.1	4	22.2
Partner Objected	1	4.5	3	16.7
Others	2	9.1	1	5.6
Total	22	*	18	*
Frequency of Sex with Girl Friend in the Past One Month				
0	19	55.9	10	34.5
1	6	17.6	5	17.2
2-3	7	20.6	8	27.6
> 3	2	5.9	6	20.7
Range	-	0-5	-	0-15
Mean	-	0.9	-	2.1
Total	34	100.0	29	100.0

*The percentages add up to more than 100 because of multiple responses.

3.5.5 Sexual Contact with Other Female Partners and Condom Use

The respondents were also asked if they had sex with other female partners in the past year in Nepal. In Western sample 5.3 percent and in Mid-Far Western sample 3.6 percent answered positively (Table 12). A majority of these respondents had not used condom during their last sex with their female friends. Among those who had used condoms, they themselves had mostly suggested their partners for using them. In the past year, 31.6 percent in Western and 15.4 percent in Mid-Far Western districts had consistently used condom with their other female partners while 52.6 percent and 61.5 percent had never used them. In Western sample 61.5 percent had not used condom always because it was not available. In Mid-Far Western sample 63.6 percent had not used them because they did not think it was necessary or because they did not

remember using it. In Western sample 10.5 percent and in Mid-Far Western districts 23.1 percent had one sexual contact with other female partners in the past one month.

Table 12: Sexual Behavior of Male Labor Migrants and Condom Use with other Female Partners in Nepal

Sexual Behavior and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had Sex with Other Female Partners in the Past Year				
Yes	19	5.3	13	3.6
No	311	86.4	334	92.8
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Use of Condom During the Last Sex with Other Female Partners				
Yes	7	36.8	3	23.1
No	12	63.2	10	76.9
Total	19	100.0	13	100.0
Person to Suggest Condom Use During Last Sex				
Myself	6	85.7	3	100.0
My partner	1	14.3	0	0.0
Total	7	100.0	3	100.0
Consistent Use of Condom with Other Female Partners in the Past Year				
Every time	6	31.6	2	15.4
Most of the time	2	10.5	1	7.7
Sometimes	1	5.3	2	15.4
Never	10	52.6	8	61.5
Total	19	100.0	13	100.0
Reasons for not Using Condom Always				
Not available	8	61.5	5	45.5
Didn't like to use it	4	30.8	4	36.4
Didn't think it was necessary/Didn't think of it	3	23.1	7	63.6
Partner Objected	0	0.0	1	9.1
Others	2	15.4	0	0.0
Total	13	*	11	*
Frequency of Sex with Other Female Partners in the Past One Month				
0	9	47.4	8	61.5
1	2	10.5	3	23.1
2-3	4	21.1	2	15.4
>3	4	21.1	0	0.0
Range	-	0-12	-	0-2
Mean	-	2.4	-	0.5
Total	19	100.0	13	100.0

* The percentages add up to more than 100 because of multiple responses.

3.5.6 Sexual Contact with Male Partners and Condom Use

Several studies have identified MSMs as another high risk group for HIV infection. In order to further analyze the risk behavior of the labor migrants, they were asked if they ever had sexual contact with any male partners. Three respondents in Western sample districts answered positively. None of them had ever used condom during sexual intercourse with their male partners. This was primarily because they did not consider it necessary to use them. In the past one month one respondent had one such sexual contact (Table Not Shown).

3.6 Sexual Practices of Male Labor Migrants in India

3.6.1 Sexual Contact with Female Sex Workers

Among the sampled returnee migrants, 17.2 percent in Western sample districts and 26.9 percent in Mid-Far Western sample districts ever had sex with sex workers in India. The number of sex workers visited by the respondents ranged between 1-25 in

Western and 1 - 60 in Mid-Far Western samples. Twenty nine percent of the respondents in Western and 30.9 percent in Mid-Far Western sample had visited one sex worker in India till the survey date. In the past year, 11 respondents in the Western sample districts and 31 in the Mid-Far Western sample districts had sex with sex workers in India. Among them, 36.4 percent in Western and 48.4 percent in Mid-Far-Western districts had sexual contact with one sex worker while the others had sexual contacts with more than one sex worker in India. In an average, respondents in Western sample had 3.2 and in Mid-Far Western sample had 6.1 sexual contacts in the past year. A majority of the respondents who had sex with sex worker in India both in Western and Mid-Far Western sample districts had last such sexual encounter more than three months prior to the survey date. In both samples most of the respondents had sexual contacts in Mumbai in the past year (Table 13). In Table 13 percentages should be interpreted with caution as the denominators are small.

Table 13: Sexual Behavior of Male Labor Migrants with FSWs in India

Sexual Behavior	Western		Mid-Far Western	
	N	%	N	%
Ever Had Sex with FSWs in India				
Yes	62	17.2	97	26.9
No	3	0.8	13	3.6
Never had sex with sex worker	265	73.6	237	65.8
Never had sex with female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Total Number of FSWs Visited in Lifetime in India				
1	18	29.0	30	30.9
2-3	27	43.5	23	23.7
4-5	5	8.1	17	17.5
>5	12	19.4	27	27.8
Range	-	1-25	-	1-60
Mean	-	3.9	-	6.1
Total	62	100.0	97	100.0
No. of FSWs visited in past year in India				
1	4	36.4	15	48.4
2-3	6	54.5	9	29.0
> 3	1	9.1	7	22.6
Range	-	1-5	-	1-6
Mean	-	2.2	-	2.2
Total	11	100.0	31	100.0
Frequency of sex with FSWs in the past Year in India				
1	4	36.4	7	22.6
2-3	5	45.5	14	45.2
> 3	2	18.2	10	32.3
Range	-	1-10	-	1-48
Mean	-	3.2	-	6.1
Total	11	100.0	31	100.0
Place of Sex in the Past Year in India				
Mumbai	5	45.5	7	22.6
Delhi	1	9.1	4	12.1
Puna	1	9.1	3	9.7
Badauda	0	0.0	2	6.5
Gujrat	1	9.1	2	6.5
Punjab	0	0.0	2	6.5
Other Places**	3	27.3	13	41.9
Total	11	*	31	*
Last Time Sex with FSW in India				
1-2 weeks ago	0	0.0	1	3.2
3-4 weeks ago	0	0.0	2	6.5
5-7 weeks ago	0	0.0	4	12.9
2-3 months ago	3	27.3	6	19.4
More than 3 months ago	8	72.7	18	58.1
Total	11	100.0	31	100.0

Table 13: Cont'd...

Sexual Behavior	Western		Mid-Far Western	
	N	%	N	%
Place where you met last SW in India				
Brothel	4	36.4	10	32.3
Hotel/lodge	3	27.3	5	16.1
Bhatti/liquor shop	2	18.2	1	3.2
Street	1	9.1	0	0.0
Work place	1	9.1	7	22.6
Restaurant	0	0.0	1	3.2
Forest	0	0.0	1	3.2
FSW's place	0	0.0	4	12.9
Others	0	0.0	2	6.5
Total	11	100.0	31	100.0

* The percentages add up to more than 100 because of multiple responses.

** Chandigarh, Madras, Sonapur, Satana, Jawalpur, Nagpur, Pathlipur, Mulun, Hyderabad, Girang Road, Ludhiyana, Paudi, Amril, Dadari, Rajkot

3.6.2 Condom Use with Female Sex Workers

Of the total respondents, 11 (3.1%) in Western sample and 31 (8.6%) in Mid-Far Western sample had sexual contact with sex workers in India in the year preceding the survey. Among them, more than 60percent in both Western and Mid-Far Western sample had used condoms in their last sexual contact with FSWs. Relatively higher percentage of respondents in Western sample than in Mid-Far Western sample had themselves suggested the use of condoms with sex workers. In the past year, more than three in five respondents in both samples have reported the use of condoms consistently with FSWs. Non-availability of condoms was the prominent reason provided by the respondents in both samples and 60 percent in far western districts for not using condom consistently in the past year (Table 14). In Table 14 percentages should be interpreted with caution as the denominators are small

Table 14: Sexual Behavior of Male Labor Migrants and Condom Use by Them with FSW in India

Sexual Behavior and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had Sex with FSW in the Past Year				
Yes	11	3.1	31	8.6
No	51	14.2	66	18.3
Never had sex with Sex Worker in India	3	0.8	13	3.6
Never had sex with Sex Worker	265	73.6	237	65.8
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Use of Condom During the Last Sex with FSW				
Yes	7	63.6	22	71.0
No	4	36.4	9	29.0
Total	11	100.0	31	100.0
Person to Suggest the Use of Condom During Last Sex				
Myself	6	85.7	8	36.4
My partner	1	14.3	14	63.6
Total	7	100.0	22	100.0
Consistent Use of Condom with FSW in the Past Year				
Every time	7	63.6	21	67.7
Most of the time	0	0.0	1	3.2
Sometimes	1	9.1	1	3.2
Rarely	1	9.1	2	6.5
Never	2	18.2	6	19.4
Total	11	100.0	31	100.0
Cause of not Using Condom Always				
Not available	3	75.0	6	60.0
Didn't think it was necessary/Didn't think of it	2	50.0	2	20.0
Didn't like to use it	0	0.0	3	30.0
Partner Objected	0	0.0	2	20.0
Others	0	0.0	1	10.0
Total	4	*	10	*

* The percentages add up to more than 100 because of multiple responses.

3.6.3 Sexual Contact with Girlfriends and Condom Use

Among the 360 sampled respondents in each sample, eight in Western sample and 14 in mid- Far Western sample had sex with their girl friends in the past year in India (Table 15). Among them majority have reported the use of condom during the last sex with their girl friends. All respondents who had sex with girlfriend in Western sample and half in Mid-Far Western sample had themselves suggested for condom use. In the past year, consistent condom use with their girl friends in India was reported by less than half of the respondents in both samples. Among those who had not consistently used condoms in the past year, majority in Western sample districts said that they did not like to use them while in Mid-Far Western sample districts said they did not consider its use necessary. In the past one month seven respondents from each sample had reported sex with their girl friends in India. In Table 15 percentages should be interpreted with caution as the denominators are small.

Table 15: Sexual Behavior of Male Labor Migrants and Condom Use by Them with Their Girl Friend in India

Sexual Behavior and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had Sex with Girl Friend in the Past Year				
Yes	8	2.2	14	3.9
No	322	89.4	333	92.5
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Use of Condom During Last Sex with Girl Friend				
Yes	5	62.5	8	57.1
No	3	37.5	6	42.9
Total	8	100.0	14	100.0
Person to Suggest the Use of Condom During Last Sex				
Myself	5	100.0	4	50.0
My partner	0	0.0	4	50.0
Total	5	100.0	8	100.0
Consistent Use of Condom with Girl Friend in the Past Year				
Every time	3	37.5	7	50.0
Most of the time	2	25.0	1	7.1
Sometimes	1	12.5	0	0.0
Rarely	0	0.0	3	21.4
Never	2	25.0	3	21.4
Total	8	100.0	14	100.0
Reason for not Using Condom Always				
Not available	2	40.0	2	28.6
Didn't like to use it	3	60.0	2	28.6
Didn't think it was necessary/Didn't think of it	1	20.0	6	85.7
Others	0	0.0	1	14.3
Total	5	*	7	100.0
Frequency of Sex with Girl Friend in the Past One Month				
0	7	87.5	7	50.0
1	0	0.0	1	7.1
2-3	1	12.5	4	28.6
>3	0	0.0	2	14.3
Range	-	0-2	-	0-4
Mean	-	0.3	-	1.4
Total	8	100.0	14	100.0

* The percentages add up to more than 100 because of multiple responses.

3.6.4 Sexual Contact with Other Female Partners and Condom Use

Of the total study participants, nine in the Western and five in mid- Far Western sample districts also had sex with other female partner in the past year in India. Among them, more than half in Western sample and about one fifth in mid- Far Western sample had used condom in last sex with these female friends and had also been consistent condom users during such sexual acts in the past year. The others had not used condoms because of the reasons like condoms were not available, they did

not like to use them and/or did not find them necessary. Only one respondent in Western sample had more than one such sexual contact in the past one month (Table 16). In Table 16 percentages should be interpreted with caution as the denominators are small.

Table 16: Sexual Behavior of Male Labor Migrants and Condom Use by Them with Other Female Partner in India

Sexual Behavior and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had Sex with Other Female Partner in the Past Year				
Yes	9	2.5	5	1.4
No	321	89.2	342	95.0
Never had sex with Female	30	8.3	13	3.6
Total	360	100.0	360	100.0
Use of Condom During the Last Sex with Other Female Partner				
Yes	5	55.6	1	20.0
No	4	44.4	4	80.0
Total	9	100.0	5	100.0
Person to Suggest Use of Condom During Last Sex				
Myself	3	60.0	0	0.0
My partner	2	40.0	1	100.0
Total	5	100.0	1	100.0
Consistent Use of Condom with Other Female in the Past Year				
Every time	5	55.6	1	20.0
Rarely	2	22.2	0	0.0
Never	2	22.2	4	80.0
Total	9	100.0	5	100.0
Reason for Not Using Condom Always				
Not available	2	50.0	2	50.0
Didn't like to use it	1	25.0	1	25.0
Didn't think it was necessary/Didn't think of it	2	50.0	4	100.0
Total	4	*	4	*
Frequency of Sex with Other Female in the Past One Month				
0	6	66.7	4	80.0
1	2	22.2	1	20.0
> 1	1	11.1	0	0.0
Range	-	0-10	-	0-1
Mean	-	1.3	-	0.2
Total	9	100.0	5	0.0

* The percentages add up to more than 100 because of multiple responses.

3.6.5 Sexual Contact with Male Partners and Condom Use

Of 360 respondents in each Western sample only four had sex with male partners in the past year. Only one of them had used condom in the last sexual act and had also been consistent condom user in the past year. The other three did not use condoms because they did not think it was necessary, it was not available and because the partner objected for the use. One respondent had two such sexual contacts in the past one month (Table not shown)

3.7 Availability of Condoms

The migrant workers were also asked whether they usually carried condoms with them. Around 16 percent of them in both samples replied positively. Around 24 percent of the respondents in Western sample and 30.7 percent in Mid-Far Western sample said that they could get condoms within five minutes from the nearest place. In the Western sample 52.7 percent respondents and in Mid- Far Western sample 39.6 percent of the respondents said that it takes more than 15 minutes for them to get condoms from the nearest place (Table 17).

About three quarter of the respondents in both samples reported that they could get condoms from pharmacies and health posts. NGO/health worker/volunteer were

named as sources for obtaining condoms by relatively high percentage of respondents in both samples (Table 17).

Table 17: Availability of Condoms as Reported by Male Labor Migrants

Condom Availability	Western		Mid-Far Western	
	N	%	N	%
Usually Carry Condoms				
Yes	59	16.4	56	15.6
No	301	83.6	304	84.4
Total	360	100.0	360	100.0
Places Where Condoms are Available				
Pharmacy	270	75.0	266	73.9
Health Post/ Health Center	262	72.8	303	84.2
General Retail Store (<i>Kirana Pasal</i>)	113	31.4	85	23.6
Hospital	84	23.3	83	23.1
NGO/Health Workers/Volunteers	36	10.0	113	31.4
Private Clinic	45	12.5	44	12.2
Peer/Friends	26	7.2	20	5.6
Paan Shop	17	4.7	8	2.2
FPAN Clinic	7	1.9	15	4.2
Hotel/Lodge	6	1.7	3	0.8
Brothel	5	1.4	2	0.6
Other	3	0.8	0	0.0
Don't Know	24	6.7	12	3.3
Total	360	*	360	*
Usually Obtain Condom				
Always free of cost	52	14.4	97	26.9
Purchase	74	20.6	56	15.6
Both ways	52	14.4	56	15.6
Condom never used	182	50.6	151	41.9
Total	360	100.0	360	100.0
Usually Obtain free Condom from				
Health Post/Health Center	88	84.6	122	79.7
NGO/Health workers/Volunteers	17	16.3	57	37.3
Peers/friends	15	14.4	28	18.3
Hospital	5	4.8	9	5.9
FPAN clinics	3	2.9	3	2.0
FSW	1	1	7	4.6
Others	0	0.0	2	1.3
Total	104	*	153	*
Most Convenient Place to Obtain Free Condom				
Health Post/Health Center	88	84.6	116	75.8
NGO/Health workers/Volunteers	13	12.5	45	29.4
Peers/friends	12	11.5	23	15.0
Hospital	7	6.7	6	3.9
FPAN clinics	1	1.0	2	1.3
FSW	1	1.0	3	2.0
Others	0	0.0	1	0.7
Total	104	*	153	*
Places of Purchasing Condom				
Pharmacy	114	90.5	102	91.1
General retail store (<i>Kirana Pasal</i>)	33	26.2	17	15.2
Private clinic	22	17.5	13	11.6
Pan Shop	3	2.4	2	1.8
Others	2	1.6	0	0.0
Total	126	*	112	*
Most Convenient Place to Purchase Condom				
Pharmacy	109	86.5	101	90.2
General retail store (<i>Kirana Pasal</i>)	18	14.3	15	13.4
Private clinic	21	16.7	13	11.6
Pan Shop	6	4.8	4	3.6
Others	2	1.6	0	0.0
Total	126	*	112	*
Time Needed to Obtain Condoms from Nearest Place				
Up to 5 minutes	80	23.8	107	30.7
6 – 10 minutes	50	14.9	74	21.3
11 – 15 minutes	29	8.6	29	8.3
16 – 20 minutes	43	12.8	31	8.9
21 and more minutes	134	39.9	107	30.7
Total	336	100.0	348	100.0

* The percentages add up to more than 100 because of multiple responses.

The migrant workers were further asked about the mode of availability and the places from where they could obtain condoms. In the Western sample 14.4 percent and mid-Far Western sample 26.9 percent mentioned that they always obtained condoms free of cost. However, about half respondents in Western and 41.9 percent in Mid-Far Western sample districts stated that they never used condoms. Among those respondents who reported obtaining free condoms all the time or occasionally, about four in five respondents in both samples said that health post/health centers provided free condoms for them. The majority of them also mentioned that they found it convenient to have free condoms from the same sources (Table 17).

Among those respondents who purchased condoms all the time or occasionally, a majority of them (90.5% in Western sample and 91.1% in Mid-Far Western sample) went to pharmacies to buy them. Some of them also got it from general retail stores, private clinic and *paan* shop (Table 17). When asked about their opinion on the most convenient places for them to purchase condoms, more than 85 percent of the respondents in both the samples said that pharmacies were the best places while around 14percent of them maintained that they could conveniently purchase condoms from general retail store.

3.8 Knowledge of HIV/AIDS

A majority of the migrant workers had heard about HIV/AIDS (93.3% in Western sample districts and 92.8% in Mid-Far Western sample districts). About two-thirds of the respondents in both the samples reported that radio was their major source of information on HIV/AIDS. Other important sources mentioned by the respondents in Western sample were television (45.3%), friends/relative/neighbor (39.7%) and pamphlet/posters (30%). The respondents in Mid-Far Western sample on the other hand named friends/relatives/neighbors (47.2%), television (22.5%) and pamphlet/posters (21.1%) as their important sources of information on HIV/AIDS (Table 18).

Table 18: Sources of Knowledge of HIV/AIDS among Male Labor Migrants

Sources of Knowledge	Western		Mid-Far Western	
	N	%	N	%
Ever Heard about AIDS				
Yes	336	93.3	334	92.8
No	24	6.7	26	7.2
Total	360	100.0	360	100.0
Sources of Information of HIV/AIDS				
Radio	238	66.1	241	66.9
Television	163	45.3	81	22.5
Friends/Relatives/neighbors	143	39.7	170	47.2
Pamphlet/Poster	108	30.0	76	21.1
Books	28	7.8	32	8.9
Health Workers/volunteers	30	8.3	52	14.4
Advertisements	9	2.5	4	1.1
Teacher/school	11	3.1	13	3.6
Street drama	9	2.5	10	2.8
Hospital/health post	3	0.8	3	0.8
People from NGOs	6	1.7	30	8.3
Billboard/Signboard	6	1.7	1	0.3
Discussion/workshop/conference/training	7	1.9	10	2.8
Work place	4	1.1	1	0.3
Others	4	1.1	0	0.0
Never heard of HIV/AIDS	24	6.7	26	7.2
Total	360	*	360	*

* The percentages add up to more than 100 because of multiple responses.

3.9 Access to HIV/AIDS awareness Messages

From the time FHI started intervention programs to bring awareness about HIV/AIDS among high-risk groups of people; various messages regarding the use of condoms for the prevention of HIV/AIDS were aired through radio and television. Elevated hoarding boards and posters were also put up with pictorial and rhetorical messages at different places including health posts and highways. In an effort to review the coverage of such interventions, the migrant laborers were asked about their awareness of such information. Table 19 below illustrates the messages and the responses provided by the respondents regarding their awareness of the messages. The figures show that more than half of the respondents (57.8% in Western sample and 64.7% in Mid-Far Western sample) were aware of message that says 'avoid unsafe sex and use condom'. Relatively a smaller proportion of the respondents were aware of other messages like sex with multiple partners should be avoided, HIV/AIDS is fatal, it could be transmitted through blood transfusion and that using of pre-used needle/syringe should be avoided.

Table 19: Knowledge of HIV/AIDS among Male Labor Migrants

HIV/AIDS Awareness	Western		Mid-Far Western	
	N=360	%	N=360	%
Heard Messages regarding HIV/AIDS				
Avoid unsafe sex and use condom	208	57.8	233	64.7
Avoid sex with multiple partners	83	23.1	46	12.8
HIV/AIDS is fatal and incurable disease	80	22.2	62	17.2
HIV/AIDS is transmitted through blood	67	18.6	84	23.3
Avoid using needle/syringe used by others	58	16.1	79	21.9
Avoid sex with FSWs	28	7.8	19	5.3
HIV/AIDS is transmitted through use of knife and blade	27	7.5	55	15.3
HIV/AIDS is communicable disease	20	5.6	13	3.6
HIV/AIDS is transmitted through physical contact, sharing food and kissing	13	3.6	5	1.4
HIV/AIDS is not transmitted through physical contact	12	3.3	3	0.8
HIV/AIDS symptoms are fever, aching body, weight loss, drowsiness, ulcers etc.	5	1.4	4	1.1
Person with HIV/AIDS should not be hated	3	0.8	1	0.3
Infected mother can transmit HIV/AIDS to her child	4	1.1	7	1.9
Others	8	2.2	2	0.6
Never heard of HIV/AIDS	24	6.7	26	7.2

Note: The percentages add up to more than 100 because of multiple responses.

The respondents had heard/seen HIV/STI related messages in different places in Nepal as well as in India. Some respondents (7.8% in Western and 7.5% in Mid-Far Western sample) had also been provided information about HIV/STIs in the past year in both the countries (Annex 8 and 9).

3.10 Knowledge and Treatment of Sexually Transmitted Infections (STIs)

Those migrant workers who maintain sexual contact with multiple partners are at risk for sexually transmitted infection. To know the extent of the problem of STIs among the respondents and their perception towards it, they were asked about their understanding of STIs and if they had experienced any STI symptoms during the past year. For 52.5 percent and 40.8 percent respondents in Western and Mid-Far Western sample respectively, STI meant HIV/AIDS. Another majority of the respondents (23.6% in Western and 31.4% in Mid-Far Western sample districts) also understood STI as Syphilis (*Bhiringi*)/Gonorrhoea. Some (23.1% in Western and 21.9% in Mid-Far Western samples) also identified ulcer or sore around genital part as STI. However, nearly one third of the respondents in both samples did not know about STIs (Table

20). In Table 20 percentages should be interpreted with caution as the denominators are small.

Table 20: Reported STI and Treatment (Past Year)

Reported STI Symptoms and Treatment	Western		Mid-Far Western	
	N	%	N	%
Understanding of STI				
HIV/AIDS	189	52.5	147	40.8
Syphilis (<i>Bhiringi</i>)/Gonorrhea	85	23.6	113	31.4
Ulcer or Sore Around Genital Area	83	23.1	79	21.9
White Discharge/Discharge of Pus/ <i>Dhatu</i> flow	45	12.5	75	20.8
Itching in genital areas	16	4.4	18	5.0
Pain During Urination	13	3.6	11	3.1
Burning Sensation while Urination	11	3.1	13	3.6
Tuberculosis	3	0.8	7	1.9
Fever	1	0.3	7	1.9
Becomes thin	1	0.3	4	1.1
Others	7	1.9	7	1.9
Don't know	117	32.5	129	35.8
Total	360	*	360	*
Types of STI Symptoms Experienced in the Past Year				
Burning Sensation while Urination	15	4.2	17	4.7
Ulcer or Sore Around Genital Area	14	3.9	11	3.1
Pain During Urination	8	2.2	13	3.6
White/Pus Discharge	6	1.7	8	2.2
Other	5	1.4	5	1.4
Any of the Above Symptoms	31	8.6	30	8.3
None of the Above Symptoms	329	91.4	330	91.7
Total	360	*	360	*
Received Treatment for Any of the Above Symptom				
Yes	10	32.3	16	53.3
No	21	67.7	14	46.7
Total	31	100.0	30	100.0
Places of Treatment of STI Symptoms in the Past Year				
Private Clinic	4	40.0	9	56.3
Health post/health center	2	20.0	1	6.3
Hospital	1	10.0	6	37.5
Self treated	1	10.0	0	0.0
Pharmacy	1	10.0	1	6.3
Others	1	10.0	0	0.0
Total	10	*	16	*
Received Counseling				
Yes	2	22.2	7	43.8
No	7	77.8	9	56.3
Total	9	100.0	16	100.0
Counseling Provided				
On Using Condom	0	0.0	2	28.6
On Reducing number of Sexual Partners	0	0.0	1	14.3
Others	2	100.0	4	57.1
Total	2	100.0	7	100.0

* The percentages add up to more than 100 because of multiple responses.

When asked about the STI symptoms that the sampled population had experienced in the past year, 8.6 percent in Western sample and 8.3 percent in Mid-Far Western sample reported to have had experienced at least one such symptom. Some of the reported STI symptoms were burning sensation while urination (4.2% in Western and 4.7% in Mid-Far Western sample districts), ulcer or sore around genital areas (3.9% in Western and 3.1% in Mid-Far Western sample districts) and pain during urination (2.2% in Western and 3.6% in Mid-Far Western sample districts). Among them, 32.3 percent in Western and 53.3 percent in Mid-Far Western samples had received treatment for the STI symptoms that they had experienced. For treatment purpose, the respondents had mostly visited private clinics (40% in Western and 56.3% in Mid-

Far Western samples). Of them a significant percent in both samples had also received counseling during treatment process (Table 20).

Apart from their past year's experiences, the respondents were further asked if they had currently been experiencing any STI symptom. The proportion of respondents answering positively was 10.3 percent in Western and 8.3 percent in Mid-Far Western sample districts. Some of the symptoms currently experienced by them were burning sensation while urination (5.6% in Western and 3.9% in Mid-Far Western sample), ulcer or sore around genitals (3.3% in Western and 2.8% in mid- Far Western sample), genital discharge (1.9% in Western and 2.8% in Mid-Far Western sample) and pain during urination (1.9% in Western and 3.1% in Mid-Far Western samples) (Table 21). In Table 16 percentages should be interpreted with caution as the denominators are small.

Table 21: Reported STI and Treatment (Current)

Reported STI Symptoms and Treatment	Western		Mid-Far Western	
	N	%	N	%
Current STI Symptoms				
Burning Sensation while Urination	20	5.6	14	3.9
Ulcer or Sore Around Genital Area	12	3.3	10	2.8
White/Pus Discharge	7	1.9	10	2.8
Pain During Urination	7	1.9	11	3.1
Other	6	1.7	3	0.8
Any of the Above Symptoms	37	10.3	30	8.3
None of the Above Symptoms	323	89.7	330	91.7
Total	360	*	360	*
Received Treatment for Above Symptoms				
Yes	12	32.4	10	33.3
No	25	67.6	20	66.7
Total	37	100.0	30	100.0
Treatment Received				
After Less than a week	2	16.7	2	20.0
After One week	2	16.7	0	0.0
After Two-Four Weeks	4	33.3	5	50.0
After More than Four Weeks	4	33.3	3	30.0
Total	12	100.0	10	100.0
Place visited for Treatment of STI Symptoms				
Private Clinic	5	41.7	5	50.0
Pharmacy	3	25.0	0	0.0
Health post/health center	2	16.7	0	0.0
Hospital	1	8.3	3	30.0
Self Treatment	1	8.3	0	0.0
Others	0	0.0	3	30.0
Total	12	*	10	*
Received Prescription for Medicine				
Yes	3	25.0	5	50.0
No	8	66.7	5	50.0
Self Treatment	1	8.3	0	0.0
Total	12	100.0	10	100.0
Obtained All the Medicine Prescribed				
Obtained All	3	100.0	4	80.0
Obtained Some	0	0.0	1	20.0
Total	3	100.0	5	100.0
Took All the Prescribed Medicine				
Yes	3	100.0	4	100.0
No	0	0.0	0	0.0
Total	3	100.0	4	100.0
Amount Paid for the Medicine				
Up to RS. 100	8	66.7	4	40.0
RS. 101-500	4	33.3	6	60.0
Total	12	100.0	10	100.0

* The percentages add up to more than 100 because of multiple responses.

Around two-thirds of the respondents in both samples had not sought treatment for the STI symptom/s that they had experienced. Among those few who had done so, one third respondents in both samples had waited 2-4 weeks to get the treatment. More than two fifth respondents in both Western and Mid-Far Western sample districts had been to private clinic. Among them, three respondents in Western and five in mid- Far Western samples had received prescription for the medicines required and had mostly taken those medicines.

3.11 Perception on HIV Test

The migrant workers were also asked various questions relating to HIV test. Among them 43.1 percent in Western sample and 55.8 percent in Mid-Far Western sample reported that it was possible for them to have a confidential HIV test in their community. However, only some (12.2% in Western and 8.6% in Mid-Far Western samples) had ever undertaken the test. Among them, 67.7 percent from mid- Far Western and 40.9 percent from Western sample districts have had the test voluntarily. Among those respondents who had taken up the test, 31.8 percent in Western and 38.7 percent in mid-Far Western sample had done it within last 12 months preceding the survey. Most of them in both samples had got the test results while some others had not collected the results because they did not feel it necessary to have the results and were sure of not being infected (Table 22).

Table 22: Knowledge about HIV Testing Facilities among Labor Migrants and History of HIV Test

Knowledge of HIV Test	Western		Mid-Far Western	
	N	%	N	%
Confidential HIV test facility available in the Community				
Yes	155	43.1	201	55.8
No	116	32.2	73	20.3
Don't Know	89	24.7	86	23.9
Total	360	100.0	360	100.0
Ever had HIV test				
Yes	44	12.2	31	8.6
No	292	81.1	303	84.2
Don't know	24	6.7	26	7.2
Total	360	100.0	360	100.0
Voluntarily underwent the test or because it was required				
Voluntarily	18	40.9	21	67.7
Required	26	59.1	10	32.3
Total	44	100.0	31	100.0
Obtained the test result				
Yes	39	88.6	30	96.8
No	5	11.4	1	3.2
Total	44	100.0	31	100.0
Reason for Not Receiving the Test Result				
Felt unnecessary	4	80.0	0	0.0
Sure of not being infected	1	20.0	0	0.0
Others	0	0.0	1	100.0
Total	5	100.0	1	100.0
Most Recent HIV Test				
Within Last 12 months	14	31.8	12	38.7
Between 1-2 years	13	29.5	8	25.8
Between 2-4 years	11	25.0	5	16.1
More than 4 years ago	6	13.6	6	19.4
Total	44	100.0	31	100.0

3.12 Use of Alcohol and Drugs

A series of questions were asked regarding the use of alcohol and oral and injecting drugs by the respondents. Around two third of the migrant workers reported having

consumed alcohol at least once during the past one month. Among them, 11.7 percent in Western sample and 7.5 percent in Mid-Far Western sample s reported that they took alcohol on a daily basis in the month preceding the survey.

At the same time, 8.9 percent in Western and 13.6 percent in mid- Far Western samples had also tried drugs at least once in the past month. One respondent in the Western sample reported that he had injected drugs too. The returnee migrants were also asked about their drinking habits during their last stay in India. Slightly more than two-fifth respondents in both the sample districts had never consumed alcohol while around five percent of them in each district had taken it everyday during their last stay in India.

Table 23: Use of Alcohol and Drugs among Male Labor Migrants

Consumption of Alcohol and Drugs	Western		Mid-Far Western	
	N=360	%	N=360	%
Consumption of Alcohol during Past One Month				
On a Daily Basis	42	11.7	27	7.5
Once a week	49	13.6	51	14.2
2-3 times a week	72	20.0	53	14.7
Less than Once a Week	68	18.9	103	28.6
Never	128	35.6	126	35.0
Don't know	1	0.3	0	0.0
Tried Any Types of Drugs during Past One Month				
Yes	32	8.9	49	13.6
No	328	91.1	311	86.4
Ever Injected Drugs				
Yes	1	0.3	0	0.0
No	359	99.7	400	100.0
Consumption of Alcohol during last stay in India				
Everyday	18	5.0	19	5.3
2-3 times a week	44	12.2	38	10.6
Once a week	58	16.1	73	20.3
Less than once a week	91	25.3	77	21.4
Never	149	41.4	153	42.5

3.13 Knowledge of HIV/AIDS

Table 24 shows the extent of knowledge of **A** (abstinence from sex) **B** (being faithful to one partner or avoiding multiple sex partners) and **C** (consistent condom use or use of condom during every sex act) among the respondents for avoiding HIV/AIDS. More than 60 percent of the respondents in both sample were aware of each of these three major ways of avoiding HIV/AIDS. Overall, 48.9 percent respondents in Western sample and 44.7 percent in Mid-Far Western sample identified all the three- A, B and C as HIV/AIDS preventive measures. Additionally, more than three fourth respondents in both samples knew that a healthy looking person can be infected with HIV. Additionally 50 percent in Western and 61.1 percent in Mid-Far Western samples rejected the local misconception that sharing of meal with an HIV infected person transmitted HIV. However, a relatively less proportion (26.1% in Western sample and 31.4% in Mid-Far Western sample) rejected another common local misconception that mosquito bite transmitted HIV virus. In total, 16.1 percent of the respondents in Western and 22.2 percent in Mid-Far Western samples were aware of five major indicators of HIV transmission.

Table 24: Percentage of Male Labor Migrants with Proper Knowledge of HIV/AIDS

Proper Knowledge of HIV/AIDS	Western		Mid-Far Western	
	N=360	%	N=360	%
A Can protect themselves through abstinence from sexual contact	238	66.1	220	61.1
B Can protect themselves through monogamous sexual relations	257	71.4	256	71.1
C Can protect themselves through condom Use every time during sex	284	78.9	280	77.8
D A healthy-looking person can be infected with HIV	277	76.9	286	79.4
E A person can not get the HIV virus from mosquito bite	94	26.1	113	31.4
F Can not get HIV by sharing a meal with an HIV infected person	180	50.0	220	61.1
Knowledge of all the three –ABC	176	48.9	161	44.7
Knowledge of all the five major indicators-BCDEF	58	16.1	80	22.2

Note: The percentages add up to more than 100 because of multiple responses.

The migrant workers were also asked if they were aware of any person infected with HIV or who had died of AIDS. One-third respondents in Western sample and nearly one half in Mid-Far Western sample replied positively. Of them, 35.8 percent respondents in Mid-Far Western sample districts and 17.5 percent in Western samples had their close relative who had suffered from HIV/AIDS or had succumbed to it (Table 25).

Table 25: Knowledge on Ways of HIV/AIDS Transmission among Male Labor Migrants

Knowledge on Ways of HIV/AIDS Transmission	Western		Mid-Far Western	
	N	%	N	%
Know Anyone Infected with HIV or has Died of AIDS	120	33.3	176	48.9
A close relative or close friend				
Close relative	21	17.5	63	35.8
Close friend	16	13.3	19	10.8
No relation	83	69.2	94	53.4
Total	120	100.0	176	100.0
Awareness on HIV/AIDS				
A woman with HIV/AIDS can transmit the virus to her new-born child through breastfeeding	187	51.9	223	61.9
Can not get HIV by holding an HIV infected person's hand	262	72.8	269	74.7
A person can get HIV, by using previously used needle/syringe	316	87.8	327	90.8
Blood transfusion from an infected person to transmit HIV	320	88.9	326	90.6
A pregnant woman infected with HIV/AIDS can transmit the virus to her unborn child	282	78.3	302	83.9
A pregnant woman can reduce the risk of transmission of HIV to her unborn child				
Take medicine	81	28.7	98	32.5
Take advice and counseling	14	5.0	16	5.3
Cannot be treated	3	1.1	3	1.0
Others	2	0.7	1	0.3
Don't know	182	64.5	184	60.9
Total	282	100.0	302	100.0

The migrant workers' understanding of HIV/AIDS and its different modes of transmission were also tested with the help of certain probing questions. More than 85 percent of the respondents in both samples reported that HIV could be transmitted through the transfusion of blood from an infected person to another, and that a person can get HIV by using previously used needles/syringes. Similarly, 78.3 percent in Western and 83.9 percent of respondents in West and Mid-Far Western samples knew that an infected mother could transmit the virus to her unborn child and 51.9 percent in Western sample and 61.9 percent in Mid-Far Western samples said that an HIV infected mother could transmit the virus to her new-born child through breastfeeding. About 70 percent respondents in both samples reported that holding of an HIV infected person's hand did not pose threat for HIV transmission. Additionally, of the 282 and 302 respondents in Western and Mid- Far Western samples who had reported that HIV virus could be transmitted from an infected mother to her unborn child, little more than 60 percent of them expressed their unawareness of any measure to

minimize such risk. Some of them (28.7% in Western and 32.5% in mid- Far Western sample districts) however said that taking medicine would be helpful (Table 25).

3.14 Stigma and Discrimination

HIV/AIDS is stigmatized in Nepal, increasing the impact of HIV on PLHA and those most at risk. Questions about the attitude of migrant workers towards HIV positive people and their perception towards HIV/AIDS were asked in the survey. More than 85 percent of the respondents in the Mid-Far Western samples were willing to take care of any of their male or female relatives with HIV if the need arose. The proportion of respondents reporting so was slightly lower in the west (75%). Moreover, 62.5 percent respondents in both samples also mentioned that if they had a HIV positive member in the family, they would not mind talking about it to others.

Table 26: Stigma against HIV/AIDS among Male Labor Migrants

Stigma and Discrimination	Western		Mid-Far Western	
	N=360	%	N=360	%
Respondent Willing to take care of HIV positive male relative in the household				
Yes	271	75.3	322	89.4
No	78	21.7	33	9.2
Don't know	11	3.1	5	1.4
Respondent Willing to take care of HIV positive female relative in the household				
Yes	270	75.0	312	86.7
No	79	21.9	43	11.9
Don't know	11	3.1	5	1.4
Respondent Willing to maintain confidentiality of a HIV positive family member				
Yes	122	33.9	123	34.2
No	225	62.5	225	62.5
Don't know	13	3.6	12	3.3

Chapter 4.0: HIV PREVALENCE

4.1 Prevalence of HIV

HIV infection status was derived from two rapid tests “Capillus” and “Determine” done on the blood samples collected by drawing 5ml blood by vein puncture from the study participants. In case of a tie in the first two test results, a third confirmatory test known as “Uni-Gold TM” was performed. Out of the 360 each in Western and Mid/Far-Western region blood samples of the returnee migrants participating in the study, 4 (1.1%) in Western and 10 (2.8%) in mid/Far west tested positive for HIV respectively.

Table 27: HIV Prevalence by Sample Sites

Sample Sites	Total Sample	HIV Prevalence	%
Western sample (5 districts)*	360	4	1.1
Mid-Far Western sample (6 Districts)**	360	10	2.8

* Kapilvastu, Gulmi, Synja, Palpa and Kaski Districts

** Achham, Doti, Kailai, Kanchanpur Surkhet and Banke Districts

4.2 Relationship between Socio-Demographic Characteristics and HIV Infection

Table 28 below shows the association between HIV and some socio-demographic and behavioral. In the Western sample population HIV infection has no significant association with any of the five variables listed in Table 28 in 5 percent significant level because all the p values are greater than 0.5. But in Mid- Far Western sample sexual exposure to female sex workers in India and the place visited by the respondents in India have significant association with HIV infection in at least 5 percent significance level. Similarly in the Mid- Far Western sample age of the respondent also has significant association with HIV infection. About 4.6 percent of respondents who were of age more than 24 years are HIV positive where as such percentage is only 0.6 in the under 25 age group (Table 28). On the other hand among those respondents who had ever visited sex workers in India HIV prevalence is 8.2 percent compared to the HIV prevalence of 0.8 percent among those respondents who had not visited sex worker in India. The returnees migrants in mid-Far Western samples who go to Maharashtra State (Mumbai is in Maharashtra State) are in greater risk to be infected with HIV. HIV prevalence rate among those returnee migrants who went to Maharashtra was 5.1 percent and among those who did not go to Maharashtra was only 1.4 percent.

Table 28: Relationship between Socio-Demographic Characteristics and HIV Infection

Characteristics	Western				Mid/Far Western			
	Total	HIV+	%	p value	Total	HIV+	%	p value
Age								
Below 25 years	167	1	0.6	>.05	164	1	0.6	<.05
25 years and Above	193	3	1.6		196	9	4.6	
Marital status								
Ever married	267	3	1.1	>.05	314	10	3.2	>.05
Never married	93	1	1.1		46	0	0.0	
Literacy								
Illiterate/No schooling	44	1	2.3	>.05	61	2	3.3	>.05
Formal school	316	3	0.9		299	8	2.7	
Ever had sex with FSW in India								
Yes	62	2	3.2	> .05	97	8	8.2	< .01
No/Never had sex with female	298	2	0.7		263	2	0.8	
Total	360	4	1.1		360	10	2.8	
Visited Sites*								
Maharashtra state (Mumbai)	142	4	2.8	> .05	156	8	5.1	< .05
Other States	257	4	1.6		208	3	1.4	

* Labor migrants had visited more than one state

Chapter 5.0: CONCLUSIONS AND RECOMMENDATIONS

5.1 Conclusions

- The respondents were almost of the same age group in both the sample districts with their median age in Western and Mid-Far Western samples being 25 and 26 years respectively
- Around eight percent of the respondents in Western sample and 14.2 percent in Mid-Far Western sample were illiterate.
- The majority of the respondents in Western as well as in Mid-Far Western sample (71.9% and 84.2% respectively) were married. Thirty nine percent respondents in Western and 54.5 percent in Mid-Far Western sample had been married at the age of 15-19 years of age.
- The returnee migrants in Western sample districts had migrated for work mostly to Delhi (42.2%); almost two-fifths (39.4%) had also been to Maharashtra. In Mid-Far Western sample, 43.3 percent of the respondents had migrated for work to Maharashtra, 16.4 percent to Uttaranchal Pradesh and 15.6 percent had worked in Gujarat.
- A majority of the respondents had migrated for work before the age of 20 years (67.5% in Western and 58.1% in Mid-Far Western sample districts). Others had mostly migrated for work between 20-29 years of age (27.8% in Western and 35.9% in Mid-Far Western sample districts).
- A majority of the respondents had stayed in India for more than two years (78.9% in Western and 65% in Mid-Far Western sample districts). Few (3.6% in Western and 6.7% in Mid-Far Western sample districts) had returned home after staying for less than six months in India.
- More than one half of the respondents in both the sample districts (57.6% in Western and 67.7% in Mid-Far Western sample districts) had their first sexual encounter at the age of 15-19 years.
- In the past year, only eight respondents in both samples have reported having had sexual contact with sex workers in Nepal. Of them, none of the respondent in the Western samples had used condoms consistently, although half in the Mid-Far Western part had been consistent condom users in the past year.
- Among the sampled population 34 in Western sample and 29 respondents in Mid-Far Western sample had sex with their girlfriends in Nepal in the past year. Of them, 50 percent in Western and 41.4 percent in Mid-Far Western samples had never used condom during sexual contact with them.

- Overall 11 respondents in Western and 31 in Mid- Far Western sample had sexual contact with FSWs in India in the past year. Among them, about two third reported consistent condom use in the last year.
- Of the 360 respondents eight in Western and 14 in Mid-Far Western samples had sex with their girl friend in the past year in India. Consistent condom use was reported by about half respondents in both samples.
- In the Western sample 14.4 percent and Mid-Far Western sample districts 26.9 percent respondents mentioned that they always obtained condoms free of cost.
- When asked about their opinion on the most convenient places for them to purchase condoms, more than 85 percent of the respondents in both the sample said that pharmacies were the best places. Around 14 percent respondents reported that they could conveniently purchase condoms from general retail stores as well.
- A majority of the migrant workers had heard about HIV/AIDS (93.3% in Western sample and 92.8% in Mid-Far Western sample). About two-thirds of the respondents in both the samples (66.1% in Western and 66.9% in Mid-Far Western sample) reported that radio was their major source of information on HIV/AIDS
- More than half of the respondents (57.8% in Western sample and 64.7% in Mid-Far Western sample) were aware of message that says ‘avoid unsafe sex and use condom’.
- For 52.5 percent and 40.8 percent respondents in Western and Mid- Far Western sample districts respectively, STI meant HIV/AIDS. Another majority of the respondents (23.6% in Western and 31.4% in Mid-Far Western samples) also understood STI as Syphilis (*Bhiringi*)/Gonorrhoea.
- In total, 16.1 percent of the respondents in Western and 22.2 percent in Mid-Far Western sample were aware of five major indicators of HIV transmission.
- Thirty-one respondents (8.6%) in Western sample and 30 (8.3%) in Mid-Far Western sample have had experienced at least one STI symptom in the past year. For treatment purpose, the respondents had mostly visited private clinics (40% in Western and 56.3% in Mid-Far Western sample districts).
- Thirty-seven respondents (10.3%) in Western and 30 (8.3%) in Mid-Far Western sample said that they were experiencing at least one STI symptom at the time of survey.
- Around two-thirds of the respondents in both samples had not sought treatment for the STI symptom/s that they had experienced.

- The respondents in Western sample who had treatment for STI had been to private clinic (41.7%) and pharmacies (25%) while those in Mid-Far Western sample had mostly been to private clinics (50%).
- Among the respondents, 43.1 percent in Western sample and 55.8 percent in Mid-Far Western sample reported that it was possible for them to have a confidential HIV test in their community. However, only some (12.2% in Western and 8.6% in Mid-Far Western sample) had ever undertaken the test.
- Among those who had previously tested for HIV infection a larger proportion of respondents from Mid- Far Western sample (67.7%) than from Western sample (40.9%) have had the test voluntarily.
- Out of the 360 returnee migrants participating in the study in Western sample, 4 (1.1%) were tested HIV positive. Similarly, in Mid-Far Western sample also out of 360 respondents 10 (2.8%) were tested positive for HIV.
- In Mid-Far Western sample, the prevalence of HIV was found to be significantly higher among the older returnee migrants i.e., migrants aged more than 25 years, those who had indulged themselves in sexual contact with sex workers in India and those who had been to Maharashtra as labor migrants.

5.2 Recommendations

- Migrants migrating to India for work are more likely to be engaged in sex with multiple partners. HIV/AIDS awareness programs targeting this particular group at VDC and community level should be extensively launched.
- The migrant workers do not use condoms consistently with their sex partners. Consistent use of condom was low even with sex workers. HIV/AIDS prevention programs should focus more on the need for consistent condom use for HIV/STI infection prevention purposes with all kinds of partners.
- Free condom distribution programs for the returnee migrants through NGO/health workers/volunteers should be expanded further as a part of HIV/AIDS awareness campaign.
- HIV awareness among labor migrants is limited. For instance, about two third of the respondents had the knowledge that abstinence can prevent HIV infection. Moreover, only about 16.1 percent respondents in Western and 22.2 percent in Mid-Far Western sample districts were aware of all the five major indicators of HIV transmission, namely being faithful, consistent condom use, a healthy looking person may have HIV infection, mosquito bite do not transmit HIV and *jutho* also do not transmit HIV. IEC materials like poster/pamphlets and billboard/signboards have been quite effective in disseminating HIV/AIDS awareness information to the target group. Such activities should be continued and further extended to cover major highways and exit points.

References

- NCASC. 2006. Cumulative HIV/AIDS Situation in Nepal.
- New ERA/SACTS/FHI. 2005a. *Behavioral and Sero Prevalence Survey Among IDUs in Kathmandu Valley*. A Report submitted to Family Health International/Nepal. Kathmandu.
- New ERA/SACTS/FHI. 2005b. *Behavioral and Sero Prevalence Survey Among IDUs in Pokhara Valley*. A Report submitted to Family Health International/Nepal.
- New ERA/SACTS/FHI. 2005c. *Behavioral and Sero Prevalence Survey Among IDUs in Eastern Terai*. A Report submitted to Family Health International/Nepal. Kathmandu.
- New ERA/SACTS/FHI. 2005d. *Behavioral and Sero Prevalence Survey Among IDUs in Western to Far Western Terai*. A Report submitted to Family Health International/Nepal. Kathmandu.
- New ERA/SACTS/FHI. 2000. *STD and HIV Prevalence Survey Among Female Sex Workers and Truckers on Highway Routes in the Terai, Nepal*; New ERA/SACTS, Kathmandu. A Report submitted to Family Health International/Nepal.
- New ERA. 2003c. *Behavioral Surveillance Survey in the Highway Route of Nepal: Round No. 5*, A Report submitted to Family Health International/Nepal. Kathmandu. New ERA.
- New ERA. 2003d. *Behavioral Surveillance Survey of Female Sex Workers and Clients in Pokhara Valley: Round I*, A Report submitted to Family Health International/Nepal. Kathmandu. New ERA.
- New ERA/SACTS/FHI. 2004. *STI/HIV Prevalence and Risk Behavioral Study Among Female Sex Workers and Truckers Along the Terai Highway Routes Covering 22 Districts of Nepal*; New ERA/SACTS, Kathmandu. A Report submitted to Family Health International/Nepal.
- New ERA/SACTS/FHI. 2002. *HIV/STI Prevalence and Risk Factors among Migrant and Non-Migrant Males of Kailali District in Far-Western Nepal*.
- New ERA/SACTS/FHI. 2002. *HIV/STI Prevalence and Risk Factors among Migrant and Non-Migrant Males of Achham District in Far-Western Nepal*
- Pokharel, B R; Aryal, S; Bhattarai, A; Pyakuryal, A; Suvedi, B K. 2000. *Situation Analysis of HIV/AIDS in Nepal*, Richoi Associates, Kathmandu. Final draft submitted to National Center for AIDS and STD Control, Kathmandu, Nepal.
- Dilli Ram Dahal, Navin Kumar Rai, Andrew e. Manzardo. Land and migration in Far-Western Nepal', INAS, Kirtipur Nepal, 1977
- SACTS. 2001. *Kathmandu FSW Seroprevalence Study*. A Report submitted to Family Health International/Nepal. Kathmandu.

ANNEXES

ANNEX - 1

Total Number of VDCs and Estimated Returnee Male Labor Migrants by Districts

Districts	Total VDCs	VDCs covered	Estimated Returnee Migrants
Western			
Kaski	45	35	1142
Syangja	62	60	2168
Palpa	66	32	816
Gulmi	79	36	1232
Kapilvastu	78	36	1492
Total	330	199	6850
Mid to Far western			
Achham	75	23	1464
Doti	51	18	526
Kanchanpur	20	11	760
Kailali	44	14	985
Surkhet	48	15	882
Banke	47	24	1037
Total	285	95	5654

ANNEX - 2

Region/District Wise No. of Returnee migrants and sample Selection

Region	District	No. of Selected Clusters in the sample	No. of Returnee Migrants at the time of Visit	Sample Selected
Western	Kapilvastu	6	518	72
	Syangja	10	302	120
	Palpa	4	196	48
	Gulmi	5	279	60
	Kaski	5	103	60
Total		30	1398	360
Mid/Far-Western	Kailali	5	746	60
	Kanchanpur	4	329	48
	Achham	8	901	96
	Doti	3	439	36
	Surkhet	5	965	60
	Banke	5	429	60
Total		30	3809	360

ANNEX – 3

CONFIDENTIAL

**INTEGRATED BIO - BEHAVIOUAL SURVEY (IBBS) AMONG LABOR MIGRANTS
IN WESTERN TO FAR WESTERN NEPAL
FHI/New ERA/SACTS - 2006**

Labor Migrant Questionnaire

Namaste! My name is, I am here from New ERA to collect data for a research study. During this data collection, I will ask you some personal questions that will be about sexual behavior, use and promotion of condoms, STI/HIV/AIDS, drugs and migration pattern. You may feel uneasy responding to some personal questions. But please provide correct information only. We will also draw a 5-6 ml. of blood sample from your arm for laboratory testing. If it is determined that you have any STI symptoms, we will also provide treatment free of charge. The information given by you will be strictly treated as confidential. Nobody will know whatever we talk because your name will not be mentioned in this form and collected samples. All the mentioned information will be used only for objective of the study. This survey will take about 40 to 60 minutes.

It depends on your wish to participate in this survey or not. You do not have to answer any questions that you do not want to answer, and you may end this interview at any time you want to. But I hope, you will participate in this survey and make it success by providing correct answers of all the questions.

Would you be willing to participate?

1. Yes 2. No

Signature of Interviewer: _____ Date: 2062/____/____

Definition of Respondent

Respondent has to have stayed at least for 3 months in India for work and has returned within 3 years from the date of survey.

Name of interviewer: _____ Code No. of Interviewer:

--	--	--	--	--

Date of Interview: 2062/_____/____

Checked by the supervisor: Signature: _____ Date: 2062/_____/____

Has someone from New ERA interviewed you with a questionnaire in last few weeks?

1. Yes 2. No (Go to Q. # 101)



When?
_____ Days ago (**STOP INTERVIEW**)

1.0 GENERAL INFORMATION

No.	Questions and Filters	Coding Categories	Skip To
101	Respondent ID No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
102	Interview Starting Time Interview Completion Time	_____ _____	
103	Where were you born?	District _____ VDC/Municipality _____ Ward No. <input type="text"/> <input type="text"/> Village/Tole _____	
104	Where do you live now? (Name of Current Place of Residence)	Districts: _____ VDC/Municipality: _____ Ward No. <input type="text"/> <input type="text"/> Village/Tole: _____	

2.0 PERSONAL INFORMATION

No.	Questions and Filters	Coding Categories	Skip To
201	How old are you?	Age <input type="text"/> <input type="text"/> (write the completed years)	
202	What is your caste? (Write code no. as per Ethnicity/Caste Manual)	Ethnicity/Caste _____ (Specify) Code No. <input type="text"/> <input type="text"/>	
203	What is your educational status? (Circle "00" if illiterate, '19' for the literate without attending the school, and write exact number of the completed grade)	Illiterate 0 Literate 19 Grade <input type="text"/> <input type="text"/> (write the completed grade)	
204	What is your present marital status?	Married 1 Divorced/Permanently Separated 2 Widower 3 Never married 4	206
205	How old were you when you were first married?	Age <input type="text"/> <input type="text"/> (write the completed years)	
206	With whom are you staying currently?	With wife 1 With male friends 2 With female friends 3 Alone 4 With parents 5 With children 6 Others (Specify) 96	
207	How many dependents are there in your family?	Number <input type="text"/> <input type="text"/>	

3.0 WORK AND MIGRATION

301. Before you came back to Nepal where did you work in abroad and for how long?

Mention first place of work at first. Write detail description of each location and duration in this table

Visited Country	Visited Cities			Date of Visited		Months Spent in Abroad	Date of Returned Back to Nepal		Months Spent in Nepal	Type of Work in Abroad
	State	City	Nearby City	Year	Month		Year	Month		

No.	Questions and Filters	Coding Categories	Skip to
302	How old were you when you had gone abroad for work for the first time?	Age <input type="text"/> <input type="text"/> (write the completed years)	
303	When your were abroad for the last time, how much did you earn per month in your last job?	Rupees ... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (If it is IC convert it into NC)	
304	When did you come back to Nepal for the last time? (If less than a month, write "00")	Months ago..... <input type="text"/> <input type="text"/> Don't know 98	
305	When you were in abroad for the last time, how often did you have drinks containing alcohol?	Every day1 2-3 times a week2 At least once a week3 Less than once a week4 Never5	
306	When you were in abroad for the last time, with whom did you live?	Alone1 With wife2 With other woman3 With friends4 With relative.....5 Other (Specify) 96	
307	Will you be going back to abroad again for work?	Yes1 No.....2 Don't know 98	
308	After your return from abroad have you ever lived any other place in Nepal for work? (Other place means different from currently living place and spent night in that place)	Yes1 No.....2 Don't know 98	} 401

309. Where did you work in Nepal and for how long?
(First time returned back from abroad to till now)

Mention first place of work at first. Write detail description of each location and duration in this table

Date of Visit		Visited cities and Duration			Type of Work
Year	Month	District	VDC/Municipality	Months Spent	

4.0 INFORMATION ON SEXUAL BEHAVIOR

Q. N.	Questions and Filters	Coding Categories	Skip to
401	Did you ever had sexual intercourse with a woman? (If answer is 'No' Probe)	Yes1 No.....2	525
402	How old were you at your first sexual intercourse? (In completed years)	Year's old <input type="text"/> <input type="text"/> Don't know/can't recall 98	
403	Have you ever had sex with a sex worker? (If answer is 'No' Probe)	Yes1 No.....2	501

Sexual Behavior with Female Sex Workers in Nepal

No.	Questions and filters	Coding categories	Skip to
404	Did you ever had sex with a sex worker in Nepal? (If answer is 'No' Probe)	Yes1 No.....2	412
405	In Nepal, about how many sex workers did you have sex with in your lifetime?	Number <input type="text"/> <input type="text"/>	
406	In Nepal, did you have sex with a sex worker in the past year?	Yes1 No.....2	412
407	During past one year, how many FSWs did you have sexual intercourse with in Nepal?	Number <input type="text"/> <input type="text"/>	
408	How many times did you have sex with sex workers in the past 12 months in Nepal?	Times <input type="text"/> <input type="text"/>	
409	When was the last time you had sex with a sex worker in Nepal? (Write "00" if the answer is less than a week)	Weeks ago <input type="text"/> <input type="text"/>	
410	Where did you find that last sex worker for sexual intercourse in Nepal?	Lodge/Hotel 1 Eating-place (Restaurant)2 Bhatti (Liquor shop)..... 3 On the street..... 4 Forest..... 5 Workplace 5 Others (Specify) 96	

No.	Questions and filters	Coding categories	Skip to
411	How many rupees and/or other items did you pay that sex worker at that time? (Ask the money spend for sexual intercourse only)	Cash _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Gift equivalent to _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Total _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Other (Specify) _____ 96	

Sexual Behavior with Female Sex Workers in Abroad

No.	Questions and filters	Coding categories	Skip to
412	Did you ever had sex with sex workers in abroad? (If answer is 'No' Probe)	Yes1 No.....2	501
413	In abroad, about how many sex workers did you have sex with in your lifetime?	Number <input type="text"/> <input type="text"/>	
414	In abroad, did you have sex with a sex worker in the past year?	Yes1 No.....2	501
415	During the past year, how many FSWs did you have sexual intercourse with in abroad?	Number <input type="text"/> <input type="text"/>	
416	How many times did you have sex with sex workers in the past 12 months in abroad?	Times <input type="text"/> <input type="text"/>	
417	In which places in abroad did you have sex with sex workers in the past years?	Name of Country City/ Nearby City _____ _____ _____	
418	When was the last time you had sex with a sex worker in abroad? (Write "00" if the answer is less than a week)	Weeks ago <input type="text"/> <input type="text"/>	
419	Where did you find that last sex worker for sexual intercourse in abroad?	Lodge/Hotel..... 1 Eating-place (Restaurant)2 <i>Bhatti</i> (Liquor shop)..... 3 On the street..... 4 Forest..... 5 Brothel 6 Workplace 7 Others (Specify) 96	
420	How many rupees and/or other items did you pay that sex worker at that time? (Ask the money spend for sexual intercourse only)	Cash _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Gift equivalent to _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Total _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Other (Specify) _____ 96	
421	When you went to a sex worker in abroad, did you usually go alone or with friends?	Alone 1 With friends.....2	

5.0 Use of Condom with Sex Partners

Condom Use with Wife

Note: If the answer is other than married in Q. 204 Go to Q. 505

Q. N.	Questions and Filters	Coding Categories	Skip to
501	During the past one-year have you had sexual intercourse with your wife?	Yes1 No.....2	505
502	How many times did you have sexual intercourse with your wife over the last 30 days? Write '00' if there was no sexual intercourse in last 30 days.	Times <input type="text"/> <input type="text"/> Don't know 98	
503	Did you use condom in your last sexual intercourse with your wife?	Yes1 No.....2	503.2
503.1	Who suggested condom use that time?	Myself1 My wife.....2 Don't know 98	} 504
503.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) 96 Don't know 98	
504	Over the last 12 months, how often did you use condom while having sex with your wife?	All of the time1 Most of the time2 Some of the time3 Rarely4 Never5	505
504.1	Why you did not use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) 96 Don't know 98	

Condom Use with Female Sex Worker in Nepal

Note: If the answer is 'No' in Q. 404 or 406 then Go to Q. 507

Q. N.	Questions and Filters	Coding Categories	Skip to
505	Did you use a condom in your last sexual intercourse with a sex worker in Nepal?	Yes1 No.....2	505.2
505.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 506

Q. N.	Questions and Filters	Coding Categories	Skip to
505.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	
506	Over the last 12 months, how often did you use condom while visiting sex workers in Nepal?	All of the time.....1 Most of the time2 Some of the time3 Rarely4 Never5	507
506.1	Why didn't you use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	

Condom Use with Girl Friend in Nepal

Q. N.	Questions and Filters	Coding Categories	Skip to
507	During the past 12 months did you have sexual intercourse with your girl friend in Nepal?	Yes1 No.....2	511
508	Over the last 30 days, how many times did you have sexual intercourse with your girl friend? (Write '00' if there is no sexual intercourse with girl friend in last 30 days)	Number of time <input type="text"/> <input type="text"/> Don't know 98	
509	Did you use a condom in your last sexual intercourse with your girl friend in Nepal?	Yes1 No.....2	509.2
509.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 510
509.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	
510	Over the last 12 months, how often did you use condom while having sex with your girl friend in Nepal?	All of the time.....1 Most of the time2 Some of the time3 Rarely4 Never5	511

Q. N.	Questions and Filters	Coding Categories	Skip to
510.1	Why you did not use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	

Condom Use with Other Female Friend in Nepal

Q. N.	Questions and Filters	Coding Categories	Skip to
511	Over the past one-year did you have sexual intercourse with your other female friends in Nepal?	Yes1 No.....2	515
512	Over the last 30 days, how many times did you have sexual intercourse with your other female friends in Nepal? (Write '00' if there is no sexual intercourse with female friend in last 30 days)	Number of time <input type="text"/> <input type="text"/> Don't know 98	
513	Did you use condom in your last sexual intercourse with your other female friends in Nepal?	Yes1 No.....2	513.2
513.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 514
513.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	
514	Over the last 12 months, how often did you use condom with your other female friend in Nepal?	All of the time.....1 Most of the time2 Some of the time3 Rarely4 Never.....5	515
514.1	Why you did not use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	

Condom Use with Female Sex Worker in Abroad

Note: If the answer is “N0” in any one in Q. 412 or 414 then Go to Q. 517

Q. N.	Questions and Filters	Coding Categories	Skip to
515	Did you use a condom in your last sexual intercourse with a sex worker in abroad?	Yes1 No.....2	515.2
515.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 516
515.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	
516	Over the last 12 months, how often did you use condom while visiting sex workers in abroad?	All of the time.....1 Most of the time2 Some of the time3 Rarely4 Never.....5	517
516.1	Why didn't you use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	

Condom Use with Girl Friend in Abroad

Q. N.	Questions and Filters	Coding Categories	Skip to
517	Over the past 12 months did you have sexual intercourse with your girl friend in abroad?	Yes1 No.....2	521
518	Over the last 30 days, how many times did you have sexual intercourse with your girl friend in abroad? (Write '00' if there is no sexual intercourse with girl friend in last 30 days)	Number of time <input type="text"/> <input type="text"/> Don't know 98	
519	Did you use a condom in your last sexual intercourse with your girl friend in abroad?	Yes1 No.....2	519.2
519.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 520
519.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
520	Over the last 12 months, how often did you use condom while having sex with your girl friend in abroad?	All of the time.....1 Most of the time2 Some of the time3 Rarely4 Never5	521
520.1	Why you did not use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	

Condom Use with Other female Friend in Abroad

Q. N.	Questions and Filters	Coding Categories	Skip to
521	During the past one-year did you have sexual intercourse with other female friends in abroad?	Yes1 No.....2	525
522	Over the last 30 days, how many times did you have sexual intercourse with your other female friends in abroad? (If there is none sexual intercourse with other female friend in last 30 days write"00")	Number of time <input type="text"/> <input type="text"/> Don't know 98	
523	Did you use condom in your last sexual intercourse with your other female friends in abroad?	Yes1 No.....2	523.2
523.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 524
523.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	
524	Over the last 12 months, how often did you use condom with your other female friend in abroad?	All of the time.....1 Most of the time2 Some of the time3 Rarely4 Never5	525
524.1	Why you did not use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	

Condom Use with Male Partner in Nepal

Q. N.	Questions and Filters	Coding Categories	Skip to
525	During the past one-year did you have anal sex with a male partner in Nepal?	Yes1 No.....2	529
526	Over the last 30 days, how many times did you have anal sex with male partner in Nepal? (Write "00" if there is no anal sex with male partner in last 30 days)	Number of time <input type="text"/> <input type="text"/> Don't know 98	
527	Did you use a condom in your last anal sex with your male partners in Nepal?	Yes1 No.....2	527.2
527.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 528
527.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) 96 Don't know 98	
528	Over the last 12 months, how often did you use condom while having anal sex with male partner in Nepal?	All of the time1 Most of the time2 Some of the time3 Rarely4 Never5	529
528.1	Why you did not use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) 96 Don't know 98	

Condom Use with Male Partner in Abroad

Q. N.	Questions and Filters	Coding Categories	Skip to
529	During the past one-year did you have anal sex with male partner in abroad?	Yes1 No.....2	533
530	Over the last 30 days, how many times did you have anal sex with male partner in abroad? (Write '00' if there is no anal sex with male partner in last 30 days)	Number of time <input type="text"/> <input type="text"/> Don't know 98	
531	Did you use condom in your last anal sex with male partners in abroad?	Yes1 No.....2	531.2
531.1	Who suggested condom use that time?	Myself1 My Partner2 Don't know 98	} 532

Q. N.	Questions and Filters	Coding Categories	Skip to
531.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	
532	Over the last 12 months, how often did you use condom with male partner in abroad?	All of the time.....1 Most of the time2 Some of the time3 Rarely4 Never.....5	533
532.1	Why you did not use condom always? (Multiple answers. Do not read the possible answers)	Not available.....1 Too expensive.....2 Partner objected3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Other (Specify) _____ 96 Don't know 98	
533	With whom did you have the last sexual intercourse?	FSW1 Wife.....2 Other female friend.....3 Lover/female friend4 Male friend.....5 No sexual intercourse in last 12 months6 Never had sexual intercourse 7	} 535
534	Where did you have the last sexual intercourse?	Nepal1 Abroad.....2	

Condom Accessibility

Q. N.	Questions and Filters	Coding Categories	Skip to
535	Do you usually carry condoms with you?	Yes1 No.....2	
536	Which places or persons do you know where you can obtain condoms? (Multiple answers. Do not read the possible answers)	Health Post / Health Center....1 Pharmacy2 General retail store (<i>Kirana Pasal</i>)3 Private Clinic4 Paan shop.....5 Hospital6 FPAN Clinic.....7 Peer/Friends8 NGO/Health Workers/Volunteers9 Bar/Guest House/Hotel 10 Brothel 11 Other (Specify) _____96 Don't know 98	537

Q. N.	Questions and Filters	Coding Categories	Skip to
536.1	How long does it take for you to get condom from your work place or home?	Minute..... <input type="text"/> <input type="text"/>	
537	How do you usually obtain condoms?	I get it free of cost1 I buy.....2 Both3 Never used condom4	538 601
537.1	From where do you often obtain free condoms? (Multiple answers. Do not read the possible answers)	Health Post/ Health Center.....1 Hospital 2 FPAN Clinic3 Peer/Friends.....4 During Community Program .5 NGO/Health Workers/Volunteers6 Other (Specify) _____96	
537.2	Which would be the most convenient place/s for you to obtain free condoms? (Multiple answers. Do not read the possible answers)	Health Post/ Health Center1 Hospital2 FPAN Clinic3 Peer/Friends.....4 During Community Programme5 NGO/Health Workers/Volunteers6 Other (Specify) _____96	
(Note: If response is '1' in 573, Go to Q. 601)			
538	From where do you often buy condoms? (Multiple answers. Do not read the possible answers)	Pharmacy1 General retail store (Kirana Pasal).....2 Private clinic3 Paan Shop4 Other (Specify) _____96	
538.1	Which would be the most convenient places for you to buy condom? (Multiple answers. Do not read the possible answers)	Pharmacy1 General retail store (Kirana Pasal)2 Private clinic3 Paan Shop4 Other (Specify) _____96	

6.0 AWARENESS OF HIV/AIDS

Q. N.	Questions and Filters	Coding Categories	Skip to
601	Have you ever heard of an illness called HIV/AIDS?	Yes1 No.....2	701
602	Where have you seen or heard messages regarding HIV/AIDS? Name district and/or city and country any others?	<u>Country</u> <u>City</u> <u>District/State</u> _____ _____	
603	What messages have you heard? (Probe this about any others)	List Messages 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	

Q. N.	Questions and Filters	Coding Categories	Skip to
604	What are the sources of information of HIV/AIDS?	1----- 2----- 3----- 4----- 5-----	
605	Has any person tried to educate you about HIV or STDs in the past year?	Yes1 No.....2 Don't know 98	} 607
606	In which district or city did those people educate you?	Country City District/State _____ _____ _____ _____	

Knowledge, Opinion and Attitudes About HIV/AIDS

Q. N.	Questions and Filters	Coding Categories	Skip to
607	Do you know anyone who is infected with HIV or who has died of AIDS?	Yes1 No.....2	} 609
608	Do you have a close relative or close friend who is infected with HIV or has died of AIDS?	Yes, a close relative1 Yes, a close friend.....2 No.....3	
609	Can people protect themselves from HIV by having one uninfected faithful sex partner?	Yes1 No.....2 Don't know 98	
610	Can people protect themselves from HIV, virus causing AIDS, by using condom correctly in each sexual contacts?	Yes1 No.....2 Don't know 98	
611	Do you think a healthy-looking person can be infected with HIV?	Yes1 No.....2 Don't know 98	
612	Can a person get the HIV virus from mosquito bite?	Yes1 No.....2 Don't know 98	
613	Can a person get HIV by sharing a meal with an HIV infected person?	Yes1 No.....2 Don't know 98	
614	Can a pregnant woman infected with HIV/AIDS transmit the virus to her unborn child?	Yes1 No.....2 Don't know 98	} 616
615	What can a pregnant woman do to reduce the risk of transmission of HIV to her unborn child?	Take Medication1 Other (Specify).....96 Don't know 98	
616	Can a woman with HIV/AIDS transmit the virus to her newborn child through breastfeeding?	Yes1 No.....2 Don't know 98	
617	Can people protect themselves from HIV virus by abstaining from sexual intercourse?	Yes1 No.....2 Don't know 98	
618	Can a person get HIV by holding on with HIV infected person's hand?	Yes1 No.....2 Don't know 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
619	Can a person get HIV by using previously used needle/syringe?	Yes1 No.....2 Don't know 98	
620	Can blood transfusion from HIV infected person transmit HIV to others?	Yes1 No.....2 Don't know 98	
621	Is it possible in your community for someone to have a confidential HIV test?	Yes1 No.....2 Don't know 98	
622	I don't want to know the result , but have you ever had an HIV test?	Yes1 No.....2	701
623	Did you voluntarily undergo the HIV test or was it required?	Voluntarily1 Required2 No Response99	
624	Please do not tell me the result , but did you find out the result of your test?	Yes1 No.....2	626
625	Why did you not receive the test result?	Sure of not being infected.....1 Afraid of result.....2 Felt unnecessary.....3 Forgot it4 Others (Specify) _____ 96	
626	When did you have your most recent HIV test?	Within last 12 months.....1 Between 1-2 years.....2 Between 2-4 years.....3 More than 4 years ago.....4	

7.0 STI (SEXUALLY TRANSMITTED INFECTION)

Q. N.	Questions and Filters	Coding Categories	Skip to
701	Which diseases do you understand by STI? (Multiple answers. Do not read the possible answers)	White Discharge/Discharge of Pus/ <i>Dhatu</i> flow1 Pain during urination2 Burning Sensation while Urinating3 Ulcer or sore around genital area.4 Syphilis (<i>Bhiringi</i>)5 HIV/AIDS6 Other (Specify) _____ 96 Don't know 98	
702	Do you currently have any of the following symptoms? Symptoms	Yes	No
	1. White Discharge/Discharge of pus	1	2
	2. Pain during urination	1	2
	3. Burning sensation while urinating	1	2
	4. Ulcer or sore around genital area	1	2
	96. Others (Specify) _____	1	2
	(If answer is "No" to all in the Q. No. 702 Go to Q. 710)		
703	Have you gone through medical treatment for any of these symptoms?	Yes1 No.....2	710
703.1	If yes, for how long did you wait to go for treatment? (Write "00" if less than a week)	Week <input type="text"/> <input type="text"/>	

Q. N.	Questions and Filters	Coding Categories	Skip to
704	Where did you go for the treatment? (Multiple answers. Do not read the possible answers)	Private Clinic1 N-SARC Clinic2 FPAN Clinic3 Health Post/ Health Center....4 Hospital5 Pharmacy6 Self Treatment (Specify)____7 Others (Specify) _____96	
705	For which symptoms did you get treatment? Specify the treatment.		
	Symptoms	Treatment	
	1. White Discharge/Discharge of Pus		
	2. Pain during urination		
	3. Burning Sensation while Urinating		
	4. Ulcer or sore around genital area		
	96.Others (Specify)_____		
706	Did you receive a prescription for medicine?	Yes1 No.....2	709
707	Did you obtain all the medicine prescribed?	Yes I obtained all of it1 I obtained some but not all....2 I did not obtain the medicine 3	709
708	Did you take all of the medicine prescribed?	Yes1 No.....2	709
708.1	If not, why did you not take all of the medicine prescribed?	Forgot to take1 Felt cured2 Medicine did not work properly3 Others (Specify)_____96	
709	How much did you pay for medicine you took? [Note: If not paid mention the reasons]	Rs. _____ Reason _____ _____ _____	
710	Did you have any of the following symptoms during the past year?		
	Symptoms	Yes	No
	1. White Discharge/Discharge of pus	1	2
	2. Pain during urination	1	2
	3. Burning sensation while urinating	1	2
	4. Ulcer or sore around genital area	1	2
	96. Others (Specify) _____	1	2
	(If answer is “No” to all in Q. No. 710 Go to Q. 801)		
711	Did you get treatment for the symptoms cited in the past year?		
	Symptoms	Yes	No
	1. White Discharge/Discharge of pus	1	2
	2. Pain during urination	1	2
	3. Burning sensation while urinating	1	2
	4. Ulcer or sore around genital area	1	2
	96. Others (Specify) _____	1	2
	(If answer is “No” to all in Q. No. 711 Go to Q. 801)		

Q. N.	Questions and Filters	Coding Categories	Skip to
712	Where did you go for the treatment? (Multiple answers. Do not read the possible answers)	Private Clinic1 N-SARC2 FPAN Clinic3 Health Post/ Health Center....4 Hospital5 Pharmacy6 Self Treatment (Specify)____7 Others (Specify) _____96	801
713	Did anyone from the place you visit for treatment counsel you about how to avoid the problem?	Yes1 No.....2	801
714	What did she/he tell you?	Told me to use condom1 Told me to reduce number of sexual partners2 Others (Specify) _____96	

8.0 USE OF DRUGS AND INJECTION

Q. N.	Questions and Filters	Coding Categories	Skip to
801	During the last 30 days how often did you have drinks containing alcohol?	Everyday1 2-3 times a week2 At least once a week3 Less than once a week4 Never5 Don't know 98	
802	Some people take different types of drugs. Have you also tried any of those drugs in the past 30 days?	Yes1 No.....2 Don't know 98	
803	Some people inject drugs using a syringe. Have you ever injected drugs? (Do not count drugs injected for medical purpose or treatment of an illness)	Yes1 No.....2 Don't know 98	} 901
804	Have you injected drugs in last 12 months? (Do not count drugs injected for medical purpose or treatment of an illness)	Yes1 No.....2 Don't know 98	
805	Are you currently injecting drugs?	Yes1 No.....2	901
806	Think about the last time you injected drugs. Did you use a needle or syringe that had previously been used by someone else?	Yes1 No.....2 Don't know 98	
807	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?	Every Time1 Almost Every Time.....2 Sometimes3 Never4 Don't Know..... 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
808	Usually how did you get that syringe/needle?	My friend/relative gave it to me after his use1 Unknown person gave it to me.....2 I picked it up from a public place which was left there by others3 I picked it up from a public place which was left there by myself.....4 I used a new needle/syringe given by NGO volunteer.....5 I used a needle/syringe which I purchased6 Others (Specify) _____ 96	

9.0 STIGMA AND DISCRIMINATION

Q. N.	Questions and Filters	Coding Categories	Skip to
901	If a male relative of yours become ill with HIV, would you be willing to care for him in your household?	Yes1 No.....2 Don't know 98	
902	If a female relative of yours become ill with HIV, would you be willing to care for him in your household?	Yes1 No.....2 Don't know 98	
903	If a member of your family become ill with HIV, would you want it to remain secret?	Yes1 No.....2 Don't know 98	

☪ Thank You. ☪

ANNEX - 4

CONFIDENTIAL

**INTEGRATED BIO-BEHAVIORAL SURVEY AMONG FEMALE SEX WORKERS,
TRUCKERS AND MALE LABOR MIGRANTS IN SELECTED SITES IN NEPAL
FHI/New ERA – 2006**

Clinical/Lab Checklist for Male Labor Migrants

Respondent ID Number:
2062/____/____

--	--	--	--	--	--

Date:

Name of Clinician:

Name of Lab Technician: _____

(A) Clinical Information

(B) Specimen collection

		Yes	No
Age of respondent: _____			
Weight: _____ Kg.	Pre test counseled	1	2
B.P.: _____ mm of Hg.	Blood Collected for HIV	1	2
Pulse: _____	Date & place for post-		
Temperature: _____ ° F	test result given	1	2
	Condom Given	1	2
	Vitamins Given	1	2
	IEC materials given	1	2

1.0 Syndromic Treatment Information

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

- 1. Yes
- 2. No

[If yes, give treatment for gonorrhoea and chlamydia]

102. Did you have sore or ulcer around your genitals in the past one-month?

- 1. Yes
- 2. No

[If yes, give time for follow-up visit]

ANNEX 5
Family Health International (FHI), Nepal
Consent Form for Male Labor Migrants

Title: Integrated Bio-behavioral Survey (IBBS) among Male Labor Migrants in 11 districts in the Western and Far Western Districts of Nepal.

Sponsor: Family Health International, Nepal and USAID, Nepal

Principal Investigator: Asha Basnyat, Country Director

Address: Family Health International/Nepal, GPO BOX 8803,
Gairidhara

Kathmandu, Nepal, Email: asha@fhi.org.np

Introduction to Research

We are requesting you to take part in research to collect information on knowledge of HIV/STIs, HIV/STI related risk behaviors, STI treatment practices and to measure the prevalence of HIV among the populations like you. We want to be sure you understand the purpose and your responsibilities in the research before you decide if you want to be in it. If you decide to be in this research, we will ask you to sign this paper (or make your mark in front of a witness). If you want to keep a copy of this paper, we will give it to you. Please ask us to explain any words or information that you may not understand.

General Information about the Research

Study participants will be selected randomly. In total 720 male labor migrants will be selected for interview from 11 districts in Western and Mid-Far Western parts of Nepal. We will ask you some questions and then ask you to provide blood sample. We will draw few drops of blood from your arm. 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. 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.

You are free to decide if you want to be in this research. If you decide not to participate, your decision will not affect the health care you would normally receive at this place.

Your Part in the Research

If you agree to be in the research, you will be asked some questions regarding your age and education. We will also ask you some questions about your travel, the history of your sexual behavior and symptoms of sexually transmitted diseases.

We will explain you what laboratory tests are performed and what treatment and care is available to you. Then we will collect your blood samples.

Your name will neither be recorded on blood sample nor in the questionnaire. All the questionnaire and samples will be labeled with a code number. HIV will be examined from your blood sample. HIV test will be done by SACTS and if you wish we could provide you HIV test results after the completion of the fieldwork in your cluster. Your part in the research will last approximately 60 minutes.

Possible Risks

The risk of participating in this study is the minor discomfort due to bleeding bruising during blood drawing. 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 test results. But you will get proper pre and post-test counseling on HIV and STI through a qualified counselor.

Possible Benefits

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 results of 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 Decide Not to Be in the Research

You are free to decide if you want to be in this research. Your decision will not affect in any way in the health services you have been seeking now and you would normally receive.

Confidentiality

We will protect information collected about you and you taking part in this research to the best of our ability. We will not use your name in any reports. Someone from FHI might want to ask you questions about being in the research, but you are free to answer them. A court of law could order medical records shown to other people, but that is unlikely.

Payment

We will not pay you for your participation but you will be given small gift, condom and some reading materials about HIV/AIDS and STI as compensation for your participation in the research.

Leaving the Research

You may leave the research at any time. If you do, it will not change the healthcare you normally receive from the study clinic.

If You Have a Questions about the Study

If you have any questions about the research, call

Asha Basnyat, Family Health International (FHI), Gairidhara, Kathmandu, Phone Number: 01-4427540.

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

Laxmi Bilas Acharya, Family Health International (FHI), Gairidhara, Kathmandu, Phone: 01-4427540.

Research Related Injuries

If you are sick or have a health problem due to your participation in this research, you will not have to pay for visits to see the research clinic staff. If you need more help, we will refer you to other clinics, where you may have to pay.

Your Rights as a Participant

This research has been reviewed and approved by the Institutional Review Board of Family Health International and Nepal Health Research Council (NHRC). If you have any questions about how you are being treated by the study or your rights as a participant you may contact

Asha Basnyat, Family Health International (FHI), Gairidhara, Kathmandu, Nepal, Phone Number: 01- 4427540 OR Mr. David Borasky, Protection of Human Subjects Committee, PO Box 13950, Research Triangle Park, NC 27709, USA, phone number: [International Access Code]-1-919-405-1445, e-mail: dborasky@fhi.org.

VOLUNTEER AGREEMENT

The above document describing the benefits, risks and procedures for the research titled “Integrated Bio-behavioral Survey (IBBS) among labor migrants in 10 districts in the Western and Far Western Sectors of Nepal” has been read and explained to me. I have been given an opportunity to have any questions about the research answered to my satisfaction. I agree to participate as a volunteer.

If volunteers cannot read the form themselves, a witness must sign here:

I was present while the benefits, risks and procedures were read to the volunteer. All questions were answered and the volunteer has agreed to take part in the research.

Signature of witness

Date

I certify that the nature and purpose, the potential benefits, and possible risks associated with participating in this research have been explained to the above individual.

Signature of Person Who Obtained Consent

Date

ANNEX - 6

Date and Places of Counseling Performed to Male Labor Migrants

Region	Date of Counseling	Total No. of Study Participants	Attended in Post-test Counseling	
			Total Counseled	With HIV
Western	March to April, 2006	360	317	3
Mid-Far Western	May to June, 2006	360	329	10

ANNEX 7

Birthplace and Currently Living Places of Male Labor Migrants

Variable	Western		Mid-Far Western	
	N=360	%	N=360	%
Birthplace				
Syangja	109	30.3	-	-
Kapilbastu	71	19.7	-	-
Gulmi	60	16.7	-	-
Kaski	56	15.6	-	-
Palpa	44	12.2	-	-
Achham	-	-	103	28.6
Surkhet	-	-	56	15.6
Banke	-	-	49	13.6
Doti	-	-	45	12.5
Kanchanpur	-	-	43	11.9
Kailali	-	-	35	9.7
Other Districts	4	1.1	26	7.2
India	16	4.4	3	0.8
Currently Living				
Syangja	120	33.3	-	-
Kapilbastu	72	20.0	-	-
Kaski	60	16.7	-	-
Gulmi	60	16.7	-	-
Palpa	48	13.3	-	-
Achham	-	-	96	26.7
Kailali	-	-	60	16.7
Banke	-	-	60	16.7
Surkhet	-	-	60	16.7
Kanchanpur	-	-	48	13.3
Doti	-	-	36	10.0

ANNEX - 8

Places Seen or Heard regarding HIV/AIDS by Male Labor Migrant

Places Seen or Heard regarding HIV/AIDS	Western		Mid-Far Western	
	N=360	%	N=360	%
India				
Maharashtra	97	16.6	81	16.5
Delhi	89	15.2	16	3.3
Gujarat	11	1.9	24	4.9
Uttar Pradesh (U.P.)	15	2.6	4	0.8
Punjab	15	2.6	12	2.4
Uttaranchal Pradesh	2	0.3	13	2.6
Haryana	10	1.7	9	1.8
Madhya Pradesh	11	1.9	6	1.2
Himanchal Pradesh	1	0.2	6	1.2
Rajasthan	5	0.9	1	0.2
Tamilnadu	5	0.9	3	0.6
Chandigadh	5	0.9	4	0.8
Jharkhand	4	0.7	0	0
Aandra Pradesh	3	0.5	4	0.8
Karnataka	3	0.5	0	0
Goa	1	0.2	3	0.6
Others (Asam, Mizuram, Nagaland West Bengal, Kerala, Jammu Kashmir etc.)	11	3.0	1	0.3
Nepal				
Syangja	97	16.6	0	0
Achham	0	0	74	15.1
Banke	0	0	53	10.8
Surkhet	0	0	53	10.8
Kailali	0	0	52	10.6
Kaski	50	8.6	0	0
Kapilvastu	46	7.9	0	0
Gulmi	44	7.5	0	0
Kanchanpur	1	0.2	40	8.1
Palpa	39	6.7	0	0
Doti	0	0	30	6.1
Rupandehi	9	1.5	0	0
Kathmandu	7	1.2	2	0.4
Others (Chitwan, Tanahu, Pyuthan)	3	0.6	0	0.0

Note: The percentages add up to more than 100 because of multiple responses

ANNEX - 9

Person and places providing Information on HIV/AIDS/STI

Person and places for Information	Western		Mid-Far Western	
	N	%	N	%
Person informing about HIV/AIDS/STI in the Past Year				
Yes	28	7.8	27	7.5
No	308	85.6	307	85.5
Never heard of HIV/AIDS	24	6.7	26	7.2
Total	360	100.0	360	100.0
Place of information provided				
India				
Gujrat	2	7.1	2	7.1
Mahdyia Pardesh	5	17.9	1	3.6
Maharastra	5	17.9	2	7.1
Punjab	0	0.0	1	3.6
Other places	3	10.8	0	0.0
Nepal				
Syangja	5	17.9	0	0.0
Gulmi	3	10.7	0	0.0
Kapilbastu	3	10.7	0	0.0
Banke	0	0.0	5	17.9
Achham	0	0.0	8	28.6
Doti	0	0.0	3	10.7
Kailali	0	0.0	3	10.7
Other places	3	10.8	2	7.1
Total	28	100.0	27	100.0

Family Health International
Nepal Country Office
PO Box 8803, Gopal Bhawan, Anamika Galli, Baluwatar Kathmandu, Nepal
Tel: 977-1-4437173, Fax: 977-1-4417475
E-mail: fhinepal@fhi.org.np, Web: www.fhi.org