Integrated Biological and Behavioral Surveillance Survey among Male Labor Migrants in 11 Districts in Western and Mid to Far-Western Regions of Nepal

Round II -2008

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Ministry of Health and Population
National Centre for AIDS and STD Control

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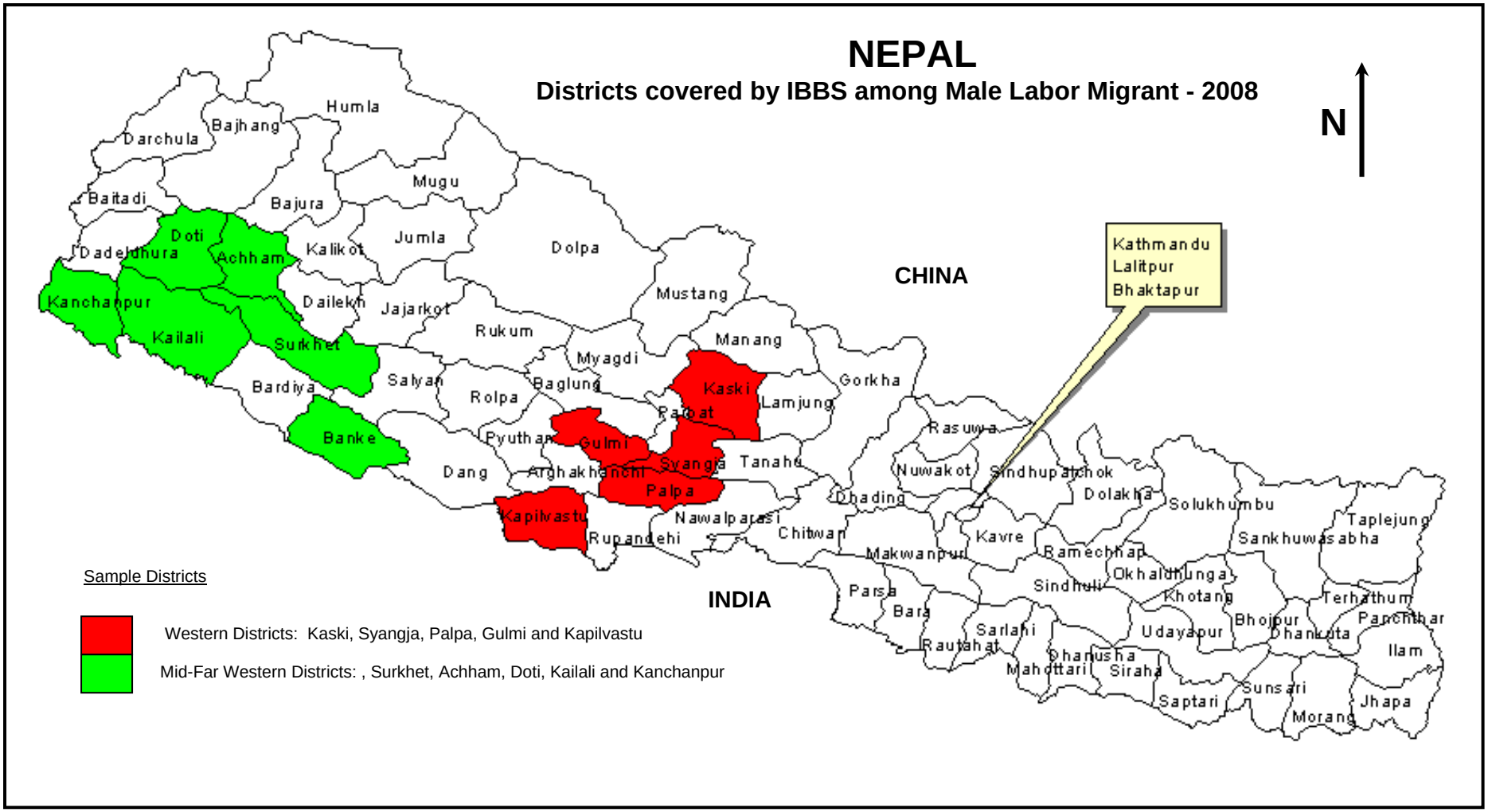
ABBREVIATIONS

AIDS	=	Acquired Immuno-Deficiency Syndrome
DIC	=	Drop-in Centre
FCHVs	=	Female Community Health Volunteers
FSWs	=	Female Sex Workers
GOs	=	Governmental Organizations
HA	=	Health Assistant
HIV	=	Human Immuno-Deficiency Virus
IBBS	=	Integrated Biological and Behavioral Surveillance Survey
ID	=	Identification Number
IDU	=	Injecting Drug User
MSW	=	Men who Have Sex with Men
NCASC	=	National Centre for AIDS and STD Control
NGOs	=	Non-governmental Organizations
OE	=	Outreach Educators
PE	=	Peer Educators
PPS	=	Probability Proportional to Size
SACTS	=	STD/AIDS Counselling and Training Services
STIs	=	Sexually Transmitted Infections
TPHA	=	Treponema Pallidum Hemaggultination Assay
VCT	=	Voluntary Counseling and Testing
VDC	=	Village Development Committee


NEPAL
Districts covered by IBBS among Male Labor Migrant - 2008
N
CHINA
INDIA
Kathmandu
Lalitpur
Bhaktapur
Humla
Darchula
Bajhang
Mugu
Baitadi
Bajura
Doti
Achham
Dadeldhura
Kalikot
Jumla
Dolpa
Kanchanpur
Dailekh
Jajarkot
Mustang
Kailali
Surkhet
Rukum
Manang
Myagdi
Bardiya
Salyan
Rolpa
Baglung
Kaski
Gorkha
Lamjung
Pyuthan
Gulmi
Parbat
Rasuwa
Banke
Syangja
Tanahu
Dang
Arghakhanchi
Nuwakot
Sindhupalchok
Palpa
Dhading
Dolakha
Solukhumbu
Kapilvastu
Nawalparasi
Chitwan
Kavre
Taplejung
Rupandehi
Makwanpur
Ramechhap
Sankhuwasabha
Okhaldhunga
Parsa
Sindhuli
Khotang
Terhathum
Bara
Bhojpur
Panchthar
Sarlahi
Udayapur
Dhankuta
Rautahat
Ilam
Dhanusha
Mahottari
Siraha
Sunsari
Saptari
Jhapa
Morang
Sample Districts
Western Districts: Kaski, Syangja, Palpa, Gulmi and Kapilvastu
Mid-Far Western Districts: , Surkhet, Achham, Doti, Kailali and Kanchanpur

EXECUTIVE SUMMARY

This is the second round of the Integrated Biological and Behavioral Surveillance Survey (IBBS) conducted among 360 migrant workers in five districts of the Western development region and another 360 migrants of the Mid to Far Western development regions. The field survey was carried out during the months of June to September 2008. The survey measured HIV and STI prevalence among migrant workers, as well as condom use, sexual behaviors, knowledge of HIV/AIDS and exposure to HIV/AIDS messages, cases of sexually transmitted infection (STIs), STI treatment behaviors, and drug habits.

Study Methodology

Study Population: This cross-sectional IBBS was conducted among male labor migrants of the Western development region and the Mid to Far Western development regions. The recruitment criteria were: "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). A sample size of 360 labor migrants was deigned for each sector. In the second stage, 12 migrants were selected from each of the clusters selected in the first stage. A list of total returnee migrants available in the selected clusters at the time the survey was updated, and 12 migrants were drawn randomly from this list. A village development committee (VDC) with at least 25 returnee labor migrants in the village was defined as a cluster.

Laboratory Testing: Informed oral consent was obtained for HIV testing and the consent-taking process was witnessed by another member of staff. A blood sample was then taken from each respondent. All study participants were provided pre-test counselling for HIV. Blood samples were tested by Determine - HIV 1/2 for detection of HIV antibodies. If the first test result was positive, the second test was performed using Uni-gold HIV 1/2. If there was a tie between the first two tests, a third test was performed using SD Bioline HIV 1/2 as a tie-breaker.

Study Findings

The labor migrants in the Western region were slightly younger than those from the Mid to Far Western region. The proportion of illiterate migrants was noticeably lower in the Western region (10.6%) than in the Mid to Far Western region (18.6%). Not much difference was observed in the educational attainment of the respondents from the two regions. Nearly all major caste/ethnic groups from both regions were represented in the study.

A high percentage of labor migrants from both regions had gone to the state of Maharastra (36.9% in the Western and 34.2% in the Mid to Far Western samples) and to Delhi (43.9% in the Western and 11.1% in the Mid to Far Western samples) for work. A noticeably higher percentage of respondents had also gone to other states in India, including Gujarat, Uttaranchal Pradesh, and Himanchal Pradesh.

Labor migrants of both regions had migrated at a very young age, mostly while in their teens (67.8% in the Western and 59.7% in the Mid to Far Western samples). Most of the labor migrants stayed with friends (54.2% in the Western and 45.6% in the Mid to Far Western samples) or relatives (28.9% in the Western and 31.4% in the Mid to Far Western samples) while they lived and worked in India. The income of the majority of labor migrants from both regions, irrespective of their place of destination, ranged between NRs. 1 to 5 thousand and NRs. 5 to 10 thousand per month.

The great majority of the labor migrants were first married by the age of 24. The great majority in the Western region (86.9%) and nearly all (95. 8%) in the Mid to Far Western region had sex with a female. Most of the respondents had their first sexual encounter by 24 years of age. Within the two regions, the respondents having had sex with a female sex worker in India was higher among those from the Mid to Far Western region.

The use of condoms during the last sex act with migrants' wives was low (11.3% in the Western and 14.6% in the Mid to Far Western samples). The great majority of respondents (77.4% in the Western and 63.5% in the Mid to Far Western samples) had never used a condom with their wife in the past year. The reason for not using condoms with wives was reported by over half of respondents (55.8% in the Western and 56.4% in the Mid to Far Western samples) as, "didn't think it was necessary/didn't think of it". Most of the respondents who last had sex with a FSW in India had used a condom every time (4/5 in the Western and 12/18 in the Mid to Far Western samples). Although sex with girlfriends and other females was also reported, it was not very frequent or common.

Nearly all respondents in the Mid to Far Western region (98.6%) and a slightly lower percentage in the Western region (95.8%) had heard about HIV/AIDS. The radio was the main source of information (63.6% in the Western and 72.2% in the Mid to Far Western samples) in both of the study regions. Community networks, especially friends/neighbors/relatives, were another important source of information (57.8% in the Western and 61.4% in the Mid to Far Western samples) on HIV/AIDS. Most respondents were aware of the use of condoms (48.6% in the Western and 68.1% in the Mid to Far Western samples) for protection against HIV.

The appearance of any of the STI symptoms in the current year was low (2.5% in the Western and 6.7% in the Mid to Far Western samples) among the respondents. The STI treatment-seeking behavior of the labor migrants was found to be poor. Only about half in the Western region (47.5%) and nearly one-third in the Mid to Far Western region (31.1%) were aware of the availability of confidential HIV testing facilities in the community. A relatively small proportion of respondents in both regions (8.1% in the Western and 11.7% in the Mid to Far Western samples) had ever undergone HIV testing.

A relatively small number of respondents in the Western region (7/360) compared to the Mid to Far Western region (54/360) had met, had discussions with, or interacted with peer educators (PE) or outreach educators (OE) in the last 12 months. A small number of respondents in both regions (6/360 in the Western and 15/360 in the Mid to Far Western samples) had visited an STI clinic in the past 12 months. The participation of respondents in HIV/AIDS awareness-raising programs or community events was very low (4/360 in the Western and 19/360 in the Mid to Far Western samples).

A smaller proportion of respondents from both regions in 2008 (from 17.2% to 9.7% in the Western region and from 26.9% to 21.7% in the Mid to Far Western region) reported ever

having had sex with a female sex worker in India than the respondents who had reported on this in 2006. The proportion of labor migrants from both regions who had ever had sex with a female sex worker in Nepal had also declined slightly in the 2008 round compared to 2006 results. A small number of respondents had used condoms in the last act of sexual intercourse with a female sex worker in Nepal and in India.

Slightly over 60 percent of respondents of both regions had knowledge about abstinence, ('**A**'), as one of the ways of protecting oneself from HIV infection. About 71 percent knew about being faithful to only one single sex partner ('**B**'). About 80 percent of respondents knew about the consistent use of condoms ('**C**'). Knowledge that 'a healthy-looking person can be infected with HIV' ('**D'**) was 79 percent in the Western and 86 percent in the Mid to Far Western regions. The numbers of respondents knowing that 'a person cannot get HIV virus from a mosquito bite' ('**E'**) remained low (about one-third) in the 2008 round. Some changes, though not very significant, were observed regarding the knowledge that 'a person cannot get HIV by sharing a meal with an HIV-infected person' ('**F'**). Knowledge of all three indicators ('**ABC'**) had slightly declined in the Western region while it had increased in the Mid to Far Western region between the two rounds of the IBBS. Similarly, the knowledge of all five major indicators (**'BCDEF'**) had remained low (46% in the Western and 48% in the Mid to Far Western samples) in both regions in 2008.

Out of 360 respondents in both samples, 5 (1.4%) in the Western and 3 (0.8%) in the Mid to Far Western regions tested positive for HIV. In the Mid to Far Western sample of labor migrants, *sexual exposure to female sex workers in India* was found to *have significant association* with *HIV infection* to at least a 5 percent significance level.

CHAPTER - I: INTRODUCTION

1.1 Context

Nepal is experiencing a concentrated epidemic of HIV with prevalence at, or over, 5 percent in certain high-risk groups, such as intravenous drug users (IDUs) and migrant laborers in India who go to cities such as Mumbai. The possibility of transmission of HIV infection from these high-risk groups to the general population is a serious health concern. Nepal's vulnerability to HIV has increased because of several factors, including poverty coupled with the lack of employment opportunities, large-scale migration, and ten years of conflict.

By mid-November 2008, a cumulative total of 12,746 cases of HIV infection had been reported to the National Centre for AIDS and STD Control (NCASC). Among them, 45 percent were clients of FSWs or patients suffering from sexually transmitted infections (STIs); 6.1 percent were FSWs; and 18.3 percent were IDUs. Although the existing HIV/AIDS reporting system at NCASC cannot measure the prevalence rate of the infection because of under-reporting and delays in reporting, this data indicates fairly which sub-populations are affected.

In Nepal, socio-economic and political factors are held responsible for inducing large-scale migration abroad, particularly to India. People owning land that cannot support them and those from low economic brackets and who are directly or indirectly influenced by the ongoing political conflict are particularly likely to migrate. A large number of men and women leave their households for seasonal or long-term labor migration to urban centres or to neighbouring countries in search of employment. The migration of laborers is reversible in nature and is characterized by the option for migrants to return to their village of origin at different intervals in the year because they own land (Dilli Ram Dahal, et.al., 1977). Separated from their spouses and adrift from social bindings, many of these migrants exercise unsafe sexual practices. Regular monitoring and health assistance to this population is lacking, especially in the case of those who migrate to neighboring countries like India, compared to those who receive authorized permission to work in other 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 up a 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 a higher risk of contracting STIs and HIV infection (New ERA/SACTS/FHI, 2002). The study found that 7.7 percent of the migrants who went to Mumbai in India from Achham district were HIV positive. Some other studies conducted in the Mid-Far Western hill districts also indicated more than 8 percent HIV prevalence among the migrants who go to Mumbai. In view of such a situation, FHI/Nepal has launched a number of behavioral change and HIV/STI control programs targeted at labor migrants, particularly in the Mid and Far Western districts of Nepal. In this context, New ERA and SACTS with technical support from FHI/USAID, Nepal conducted the first round of IBBS to represent migrants from larger areas in the Western and Mid to Far Western region of Nepal.

This is the second round of the Integrated Bio-Behavioral Survey (IBBS) conducted in 2008 to collect behavioral data from labor migrants in the Western and the Mid to Far Western districts of Nepal. This round was conducted in order to obtain updated estimates of the prevalence of HIV among the labor migrants, particularly in the age group 18 to 49 years. Apart from the updates on the HIV prevalence, the second round of the IBBS also aimed to assess the changes that have taken place in the migration trends and the sexual behavior of the labor migrants in the Western and Mid to Far Western region since 2006.

1.2 Objective of the Study

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

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

CHAPTER - II: METHODOLOGY

2.1 Study Population

The study population for this cross-sectional Integrated Biological and Behavioral Surveillance Survey (IBBS) was male returnee migrants, who are considered to be one of the high-risk sub-groups. The eligibility criteria were, "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 the survey".

2.2 Study Area

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

2.3 Sample Design and Sample Size

The baseline information on the migrant population and their mobility pattern was already available from the first round of the IBBS. In this study, too, concerned stakeholders at the district and VDC level and local governmental organizations' (GOs) as well as non-governmental organizations' (NGOs) representatives were consulted in order to assess the changes that might have taken place on the field situation and the mobility pattern of the migrant population. A rapid listing of the migrants and their status was carried out at the VDC level. Both a maximum and a minimum number of returnee migrants who could be met at the time of the actual field survey was listed in all the study districts gathering information from district headquarter-based GOs and NGOs.

Based on the preliminary information collected prior to the field survey, a list of VDCs with an estimated number of returnee migrants from India and those migrants who could potentially 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 the survey was about 19,104 in five districts in the Western districts, and about 37,196 in the six Mid to Far Western districts (Annex - 2).

Two separate samples of 360 labor migrants were designed in the Western and Mid-Far Western regions. 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, 30 clusters were selected using probability proportional to the size (PPS) method; while in the second stage, 12 respondents were selected randomly from each selected cluster. Annex - 3 shows the distribution of selected samples by districts. A total sample of 720 labor migrants with 360 each in the Western and Mid to Far Western region was included in the study.

2.4 Preparation for Fieldwork

Research Instruments

A quantitative research approach was adopted. The same questionnaire used in the first round was used in this study as well. However, in order to assess the exposure of migrant workers to HIV/AIDS/STI programs, a series of questions on selected program activities was also collected in this round of the IBBS. Inputs received from the field team during the mock interview sessions conducted at the time the study team was trained were also considered. The questionnaire included questions on demographic characteristics and sexual behaviors: i.e., sexual history, use of condoms, risk perception, awareness of HIV/AIDS/STIs, incidence of STI symptoms, and alcohol/drug using habits (Annex - 4). Apart from the structured questionnaire, questions related to STI symptoms were asked 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 team included a study director, a research coordinator, a research officer, two research assistants, and field staff. Six field teams were formed for the survey, each consisting of one male team leader/interviewer, four male field supervisors/interviewers, one health assistant, one lab technician and one counselor.

Apart from these trained personnel, two locals from each cluster were recruited as a motivator and runner. Locals were involved as team members to obtain their support in building good relations with the community, facilitation in the local language, and to some extent for security reasons. The motivator was more responsible for identifying the individual randomly selected in the sample and for facilitating the recruitment process, while the runner supported the setting up of the clinic and performed other in-house tasks. Both locals hired were given a 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 past experience and academic qualification, team leaders, supervisors, and counselors were selected for the survey by New ERA. Exposure to HIV/AIDS programs was one of the main criteria 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 period 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, and class lectures to help researchers understand each question included in the questionnaire. Role-play practice was carried out assuming actual field situations. Possible problems that could be faced while approaching the respondents and ways of overcoming them 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 and to manage the overall study. The clinical part of the study was conducted in collaboration with STD/AIDS Counselling and Training Services (SACTS). SACTS was responsible for setting up the mobile laboratory in the field sites. It also provided training to the lab technician and the 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, to develop the research questionnaire, to recruit and train the field research team, and to carry out data analysis and report writing. 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. District maps with selected VDCs/clusters were also provided to the field team to locate the study areas and plan their work schedule. A meeting at the grass roots 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 household in the cluster and prepared a list of returnee labor migrants who met the inclusion criteria for the study. Only those migrant laborers who could be met within the study period for that particular cluster were included. For the listing process, information from the key informants, ward visits, or even house-to-house visits were utilized. Five to six days was allotted for each site to update the list, conduct interviews, and provide test results with pre- and post-test counseling. While updating the list, the names of returnee migrants and details of their home address were collected so that the randomly-selected individuals in the sample could be easily traced for interview.

Recruitment and Refusal

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

A total of 4 respondents in the Western sample and 31 in the Mid to Far Western sample refused to participate in the study. The primary reason for these refusals was lack of time and no interest in participating in the study. 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 to Far Western regions was carried out during the months of June 29, 2008 to September 15, 2008.

2.6 Field Operation Procedures

Clinic Set-up

The team used locally available shelters such as health posts, schools, private houses, and even small huts to operate the clinic and conduct interview among respondents. Hygiene was strictly maintained at each set up. There were separate rooms for meeting the respondents, for the laboratory process, for physical examinations, and for conducting interviews. In a few clusters, because of unavailability of rooms, some interviews had to be taken in an open but confidential place.

Clinical Procedures

Interviews were conducted once informed consent was obtained and the consent form was signed by interviewer and the person who witnessed the consent-taking procedure. After completion of the interview, a trained health assistant (HA) examined the respondent for any signs of STI or general health problems (Annex - 5). All respondents with 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 the HIV testing process and sought consent for drawing blood. Blood samples were drawn in 3 to 5 capillary tubes by finger prick. The samples were tested only for HIV on the spot within an hour.

This study was designed to provide test results with pre- and post-counseling in the shortest possible time. Such an arrangement was necessary as the respondents were of a mobile nature and the study team also had to move from cluster to cluster. As a consequence, reagents which can be stored at room temperature were chosen. Blood samples were tested using Determine HIV1/2 (Abbott, Japan Co. Ltd) as first test to detect antibodies against HIV. If the first test result was positive, a second test was performed by using Uni-Gold HIV 1/2 (Trinity Biotech, Dublin, Ireland). In case of a tie between the first two tests, a third test was performed using SD Bioline HIV 1/2 (Standard Diagnostics, Inc., Kyonggii-do South Korea) as a tie breaker.

Interpretation of the Test Results

- All samples negative by first test are reported as negative.
- All samples positive by one test only subjected to second test.
- All tests positive by tiebreaker test 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, handling, and testing stages. All the tests were performed using internal controls. These controls were recorded with all the laboratory data. During the site monitoring visit, a senior lab technician from SACTS performed tests of all positive samples and some negative samples available at the time to ensure quality. All HIV positive samples and 10 percent of the negative samples selected randomly from the total serum collected and stored in filter paper at the sites was tested by different persons at the SACTS laboratory for quality control. 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. SACTS set up the laboratory in the field and undertook the laboratory and clinical part of the study, i.e., collecting, storing, and testing the samples.

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 for ensuring that the study was implemented according to the protocol. Team meetings took place every day to update daily activities and supplies. This helped the team coordinate and solve any field-level problems. 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), the Government's ethical clearance body, which approved the protocol, consent forms, and draft questionnaires, and additionally from the Protection of Human Subjects Committee (PHSC) an ethical review board of Family Health International.

Informed consent was obtained in a private setting from the selected respondent at the time of recruitment at the field level. The purposes of the study and personal benefits to study participants from the study and the activities to be undertaken were explained in simple terms to all study participants. They were assured of the confidentiality and anonymity of the study procedure. They were briefed on their voluntary participation and freedom of refusal at any stage. Their oral consent to participate in the study was formalized by their signature on a detailed consent form witnessed by an individual from the study team within the clinical set-up (Annex - 6).

Every respondent were given unique ID numbers as their identification to operate tests and to provide test results with post-tests counselling. They were briefed about use of ID card and how the study team had minimized the risk 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 using the 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 the probable consequences of knowing the results and its benefits. These enumerators were well trained on the pre-test counseling process.

A rapid test kit was used to test HIV. Participants were asked to wait for an hour or come at a convenient time to get their test result. A professional counselor provided post-test counseling to the participants who came back to receive the results with their ID card after testing (Annex - 7). 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 undertaken after finding out the results. When dealing with respondents showing positive test results, additional care was given in spite of their informed consent.

2.10 Constraints in the Field Work

Frequent transport strikes in different parts of the Western and the Far Western regions caused field researchers delays when traveling from one cluster to another. As the field work coincided with the rainy season it was difficult to find people at home. The researchers had to search for potential respondents on their farms for listing and bring them to the study sites. However, these problems did not affect the quality of the field work.

2.11 Data Processing and Analysis

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

A double entry system was used to minimize errors in the data entry process. The data entry and data analysis was done by authorized persons on password protected computers only. 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 - III: KEY FINDINGS

This chapter presents the socio-demographic characteristics, sexual behaviors, and condom use patterns of the labor migrants. As in the 2006 IBBS, a total of 720 male labor migrants from 11 districts in the Western and the Mid to Far Western regions (5 districts in Western and 6 districts in Mid to Far Western region) were included in the 2008 IBBS..

3.1 Birth Place and Current Living Place

Of the total sampled migrants in the Western region, nearly half (46.7%) were interviewed in Gulmi and about one-quarter (23.3%) were interviewed in Kapilvastu districts. Relatively higher percentages of labor migrants were also interviewed in Palpa (16.7%) and Syangja (10%) districts. The lowest percentages (3.3%) of them were interviewed in Kaski. Similarly, in the Mid to Far Western region, the highest numbers of labor migrants, one-third (33.3%) and another one-quarter (26.7%), were interviewed in Achham and Surkhet districts respectively. A relatively higher number of migrants were also interviewed in Kailali (16.7%) and Doti (10%) districts. About 7 percent were interviewed in both Banke and Kanchanpur districts.

All labor migrants interviewed in Kaski were born in the same district. Overall, 95 percent of the responding labor migrants interviewed in the Western region were born in the same district where they were enumerated. In the Mid to Far Western region, the majority of the respondents were also born in the districts in which they were enumerated (Table 3.1).

Table 3.1: Number of Respondent by Birth District

Study Region	No of Migrants Interviewed	Migrants Born in the Interviewed District	
		N	%
Western			
Gulmi	168	164	97.6
Kapilvastu	84	76	90.5
Palpa	60	58	96.7
Syangja	36	33	91.7
Kaski	12	12	100.0
Total	**360**	**343**	**95.3**
Mid to Far Western			
Achham	120	118	98.3
Surkhet	96	84	87.5
Kailali	60	45	75.0
Doti	36	35	97.2
Banke	24	22	91.7
Kanchanpur	24	15	62.5
Total	**360**	**319**	**88.6**

Overall, compared to the migrant workers interviewed in the Western region where 95 percent were enumerated in their birth districts, the percentages of migrants interviewed in their birth districts within the Mid to Far Western region (89%) was slightly lower. In this region nearly all the labor migrants interviewed in Achham (98.3%) and Doti (97.2%) districts were born in the same district. Similarly about 92 percent and another 88 percent of the labor migrants interviewed respectively in Banke and Surkhet districts were also born in the same district in which they were enumerated. The lowest percentage of labor migrants

(62.5%) born and interviewed in the same district were those in Kanchanpur District (Table 3.1).

3.2 Socio-demographic Characteristics

Some differences in the age patterns of the labor migrants was observed between the Western and Mid to Far Western region. The proportion of migrants in the age groups of 18-19 and 20-24 years is slightly higher in the Western region while the proportion of migrants in the age groups of 25-29 and 30-34 years is higher in the Mid to Far Western region. Nearly one-third of the labor migrants (31.7%) are represented in the 35-49 age groups in the Western region, while only about 28 percent are represented in the same age group in the Mid to Far Western region (Fig. 2). Overall, the median age of the respondents in Mid to Far Western region is higher by 1 year (28 years) than in the Western region (27 years) (Table 3.2).

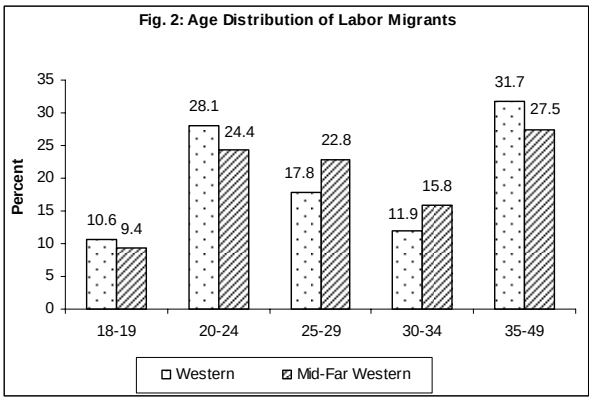


Table 3.2: Socio-demographic Characteristics of Respondents

Characteristics	Western		Mid-Far Western	
	N=360	%	N=360	%
Age				
18 – 19	38	10.6	34	9.4
20 – 24	101	28.1	88	24.4
25 – 29	64	17.8	82	22.8
30 – 34	43	11.9	57	15.8
35 – 49	114	31.7	99	27.5
Range	-	**18-49 years**	-	**18-49 years**
Mean/Median Age	-	**29.6/27.0**	-	**29.2/28.0**
Education				
Illiterate	38	10.6	67	18.6
Literate, no schooling	19	5.3	15	4.2
Grade 1 – 5	140	38.9	131	36.4
Grade 6 – 9	112	31.1	128	35.6
SLC and above	51	14.2	19	5.3
Ethnic/Caste Group				
Damai/Sarki/Kami	82	22.8	102	28.3
Brahmin	80	22.2	28	7.8
Magar	55	15.3	17	4.7
Chhetri/Thakuri	52	14.4	150	41.7
Terai Caste	37	10.3	8	2.3
Musalman	14	3.9	4	1.1
Tharu	13	3.6	44	12.2
Kumhal	5	1.4	0	0.0
Sanyasi	5	1.4	0	0.0
Newar	4	1.1	0	0.0
Kurmi	4	1.1	0	0.0
Gurung	1	0.3	2	0.6
Rai	0	0.0	2	0.6
Others (Dhobi, Sunwar, Sundi, Rajbhar, Gaderi/Pal, Tamang)	8	2.2	3	0.8
Marital Status				
Married	281	78.1	317	88.1
Divorced/separated	3	0.8	3	0.8
Widow	2	0.6	3	0.8
Never married	74	20.6	37	10.3
Currently Living With				
With wife	275	76.4	316	87.8
With parents	75	20.8	40	11.1
Others (with children, relatives, alone)	6	1.8	4	1.1
No response	4	1.1	0	0.0

The proportion of illiterate migrants is noticeably higher (18.6%) in the Mid to Far Western region compared to the same in the Western region (10.6%). Not much difference was observed in the education attainment among the respondents from these regions, except for those who have attained SLC or higher. In the Western region, 14 percent of the respondents reported attaining SLC or a higher level of education compared to 5 percent in the Western to Far Western region (Table 3.2).

Nearly all major caste/ethnic groups were represented from both regions in the 2008 IBBS. In the Western region, higher proportions of those from the Dalit (Damai/Sarki/Kami) (22.8%); Brahmin (22.2%); Magar (15.3%); and Chhetri/Thakuri (14.4%) ethic groups/castes were represented in the study. Similarly, in the Mid to Far Western region, very high numbers of Chhetri/Thakuri, about 4 in every 10 respondents (or 41.7%) were represented in the interview. Comparatively, the representation of the Dalit (28.3%) and Tharu (12.2%) population was also high in this region (Table 3.2).

Overall, nearly 80 percent of respondents in the Western region and nearly 90 percent of respondents in the Mid to Far Western region were currently married. The proportion of divorced/separated and widow population was very low (less than 1%) in both regions. About 21 percent of the respondents in the Western region reported that they had never married, while the proportion of the same was just half (10.3%) in the Mid to Far Western region (Table 3.2).

The 2008 IBBS results further shows that great majority of the respondents (76.4% in Western and 87.8% in Mid to Far Western region) were currently living with their wife. The proportion of respondents currently living with parents was high in the Western region (20.8%) compared to the respondents who reported the same (11.1%) in the Mid to Far Western region. The proportion of respondents living with other persons or living alone (with relatives, children, and alone) was very low (less than 2%) in both regions (Table 3.2).

3.4 Migration History of the Respondents

The study population for this study was male returnee migrants from India who worked as a migrant worker and returned to Nepal within three years prior to the date of the survey. The data presented in this section represents the migration history of these groups of migrants.

Maharastra remains the most popular destination among the labor migrants of both regions. The destinations in India of over one-third (36.9%) and slightly over 40 percent (43.9%) of the labor migrants from the Western region respectively were Maharastra and Delhi. The other popular destinations in India for labor migrants from this region were UP (15.6%); Punjab (11.1%); and Gujarat (10.3%). The main destination in India of labor migrants from the Mid to Far Western region was also Maharastra (34.2%) state. A relatively high percentage of respondents from this region also went to Gujarat (23.1%). A higher percentage of respondents from this region had also gone to other states in India including, Uttaranchal Pradesh (20.3%); Himanchal Pradesh (17.8%); and Delhi (11.1%) (Table 3.3).

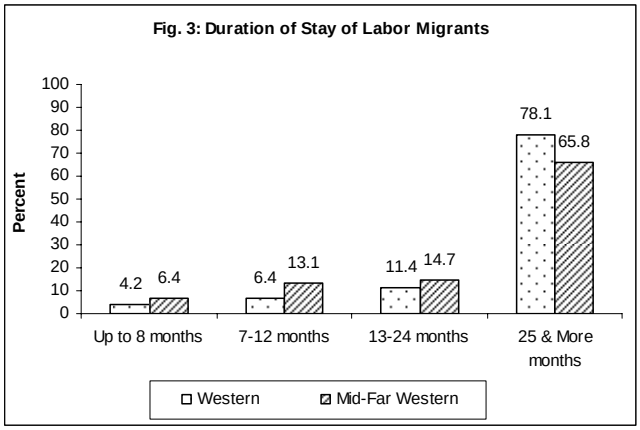
Table 3.3: Migration Destinations of Male Labor Migrants

Destination	Western		Mid-Far Western	
	N=360	%	N=360	%
Delhi	158	43.9	40	11.1
Maharastra	133	36.9	123	34.2
Uttar Pradesh (U.P.)	56	15.6	39	10.8
Punjab	40	11.1	31	8.6
Gujarat	37	10.3	83	23.1
Hariyana	34	9.4	16	4.4
Rajasthan	11	3.1	17	4.7
Aandra Pradesh	10	2.8	12	3.3
Nagaland	10	2.8	0	0.0
Asam	8	2.2	0	0.0
Tamilnadu	6	1.7	9	2.5
Himanchal Pradesh	5	1.4	64	17.8
Madhya Pradesh	5	1.4	19	5.3
Jammu Kashmir	4	1.1	6	1.7
Bihar	4	1.1	11	3.1
Karnataka	4	1.1	6	1.7
Meghalaya	4	1.1	0	0.0
Uttaranchal Pradesh	3	0.8	73	20.3
West Bengal	2	0.6	3	0.8
Jharkhand	0	0.0	2	0.6
Other States	7	1.9	7	1.9
Don't know	1	0.3	6	1.7

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

The IBBS results indicate that most labor migrants migrate to India at a very young age. Nearly 70 percent in the Western region and 60 percent of respondents from the Mid to Far Western region had first migrated to India when they were still in their teens, i.e., up to 19 years of age. About 20 percent from both regions had first migrated at the age of between 20-24 years. Overall, the great majority of respondents in both regions had first migrated to India on, or before, they were 24 years of age. The median age at first migration in both regions was 18 years (Table 3.4).

The duration of stay in India for the majority of labor migrants from both regions was over 2 years. Seventy-eight percent from the Western region and 66 percent from the Mid to Far Western region had stayed in India for 25 months or more (Fig. 3).



Nearly one half (47.2%) and little over one-quarter (28.1%) of the respondents in the Western region and the Mid to Far Western region respectively reported the period of their coming back home as less than 3 months prior to the survey date. Similarly, in the Western region about one-quarter (25.6%) and in the Mid to Far Western region about one-third (33.1%), had come back home during the 3-6 months prior to the survey date. The great majority of labor migrants (74.7% in the Western and 77.5% in Mid to Far Western samples) had plans to revisit India for work (Table 3.4).

The study results show that labor migrants mostly stay with friends or relatives while they live and work in India. More than a half (54.2%) and a quarter (28.9%) of the respondents from the Western region had lived with friends or relatives respectively during their last stay in India. Similar living arrangements during their last stay in India were reported by

respondents from the Mid to Far Western region. A sizeable proportion of the respondents from both regions (12.5% from Western and 18.9% from the Mid to Far Western regions) also reported living alone during their last stay in India (Table 3.4).

Table 3.4: Male Labor Migrants by Migration Characteristics

Characteristics	Western		Mid-Far Western	
	N=360	%	N=360	%
Age at first migration				
Up to 19	244	67.8	215	59.7
20-24	75	20.8	75	20.8
25-29	23	6.4	33	9.2
30-34	12	3.3	27	7.5
>=35	6	1.6	10	2.8
Range age	-	**9 - 43 years**	-	**7 - 46 years**
Mean/Median	-	**18.7/18.0**	-	**20.1/18.0**
Returned home last				
< 3 months	170	47.2	101	28.1
3-6 months	92	25.6	119	33.1
7-12 months	51	14.2	61	16.9
13-24 months	35	9.7	57	15.8
25-36 months (34, 32)	12	3.3	22	6.1
Planning to revisit India				
Yes	269	74.7	279	77.5
No	82	22.8	65	18.1
Don't know	9	2.5	16	4.4
During last stay In India the respondent lived with				
Friends	195	54.2	164	45.6
Relatives	104	28.9	113	31.4
Alone	45	12.5	68	18.9
With wife	15	4.2	12	3.3
Others	1	0.3	3	0.9
Monthly income during the last stay in India (NRs)				
1,120-5,000	192	53.3	220	61.1
5,001-10,000	147	40.8	125	34.7
10,001-15,000	15	4.2	15	4.2
More than 15000	6	1.7	0	0.0
Migration trend				
Up to 2047	76	21.1	48	13.3
2048 – 2052	57	15.8	53	14.7
2053 – 2057	78	21.7	71	19.7
2058 – 2062	93	25.8	126	35.0
2063 – 2065	56	15.6	62	17.2
Range Year	-	**2028-2065**	-	**2030-2065**

The income of the majority of respondents from both regions, irrespective of their place of destination, ranged from between NRs. 1 to 5 thousand per respondent per month (53.3% in the Western and 61.1% in the Mid to Far Western samples); and NRs. 5 to 10 thousand per respondent per month (40.8% in Western and 34.7% in the Mid to Far Western samples). A small proportions of respondents (4% each) in the Western and Mid to Far Western region reported having a monthly income of NRs. 10 thousand. Less than 2% of the respondents from the Western region reported earning more than NRs. 15 thousand, while no-one from the Mid to Far Western region reported earning this amount per month (Table 3.4).

In the Western region, the volume of migration was slightly higher (58.6%) than in the Mid to Far Western region (47.7%) up to the year 2057 BS (2000/2001 AD). After 2058 BS (2001/2002 AD) the volume of migration from the Mid to Far Western region increased and reached its highest during the period 2058 – 2062 BS (2001/02 – 2005/06 AD). More than one-third of the respondents had migrated to India from the Mid to Far Western region compared to about one-quarter from the Western region during the period 2052 – 2062 BS (1995/96 – 2005/06 AD). The migration volume declined sharply during the 2063 – 2065 (2006/07 – 2008 -09 AD) period in both regions (Table 3.4).

The highest percentages of respondents who had worked in India as laborers/factory laborers were from the Western region (41.4%) and the Mid to Far Western region (45.8%). The second highest percentage of laborers who had worked as hotel laborers were from the Western region (37.5%) and the Mid to Far Western region (15.8%). As can be seen, more respondents from the Western region reported working as hotel laborers. Similarly, the percentage of respondents who reported working as caretakers/servants was high among those from the Western region (24.4%) compared to those from the Mid to Far Western region (8.9%). Comparatively a very high percentage of respondents (38.1%) from the Mid to Far Western region reported working as a security guard while they were in India. The other type of work reported by a lower percentage of respondents in both regions included: labor in a shop, transport worker, technician, and employee in government/private offices (Table 3.5).

Table 3.5: Types of Work of Male Labor Migrants in India

Type of Work	Western		Mid-Far -Western	
	N=360	%	N=360	%
Laborer/factory labor	149	41.4	165	45.8
Hotel labor	135	37.5	57	15.8
Caretaker/servant	88	24.4	32	8.9
Guard	35	9.7	137	38.1
Labor in the shop	30	8.3	20	5.6
Transport worker	22	6.1	11	3.1
Technician/operator/mechanics	21	5.8	9	2.5
Government/ Pvt. office employee (Cleaner/Cook etc.)	14	3.9	27	7.5
Business	13	3.6	3	0.8
Agricultural works	9	2.5	17	4.7
Sewing	8	2.2	1	0.3
Others (Carpenter, Exchange utensils, Supervision)	17	4.7	8	1.7

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

The respondents from both study regions were asked if they had visited any district in Nepal for work after returning from India. Overall, the survey results indicate that labor migrants seldom visit different districts/places in Nepal for work. Only about 4% of the respondents (14/360) from each region had visited other districts in Nepal for work. Of these, higher numbers had migrated either to Kathmandu or to other districts in the Western and Mid to Far Western regions of Nepal. Most respondents (10/14 in the Western and 6/14 in the Mid to Far Western samples) had stayed in the migration districts for more than 4 months. In the districts of migration within Nepal, about one-third of the respondents from both regions (4/14 in Western and 5/14 in the Mid to Far Western samples) had worked as transport workers. Four respondents from the Western region had also worked in Nepal as technicians/mechanics/operators. Other respondents from both regions had worked as factory laborers, hotel workers, and cleaners/cooks in government and/or private offices (Table 3.6).

Table 3.6: 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	14	3.9	14	3.9
No	344	95.6	345	95.8
Don't know	2	0.6	1	0.3
Total	**360**	**100.0**	**360**	**100.0**
Districts migrated to				
Rupandehi	5	35.7	0	0.0
Kathmandu	2	14.3	4	28.6
Banke	2	14.3	1	7.1
Kailali	0	0.0	3	21.4
Achham	0	0.0	3	21.4
Other districts **	6	42.9	4	28.6
Total	**14**	*****	**14**	*****
Duration of stay in the district migrated				
1-2 months	3	21.4	5	35.7
3-4 months	1	7.1	3	21.4
More than 4 months	10	71.4	6	42.9
Total	**14**	**100.0**	**14**	**100.0**
Types of work in Nepal				
Transport worker	4	28.6	5	35.7
Technicians/mechanics/operator	4	28.6	0	0.0
Factory labor/labor	2	14.3	3	21.4
Business	2	14.3	0	0.0
Government/ Pvt. Office employer (Cleaner/cook etc.)	1	7.1	7	50.0
Hotel labor	1	7.1	2	14.3
Others	1	7.1	2	14.3
Total	**14**	*****	**14**	*****

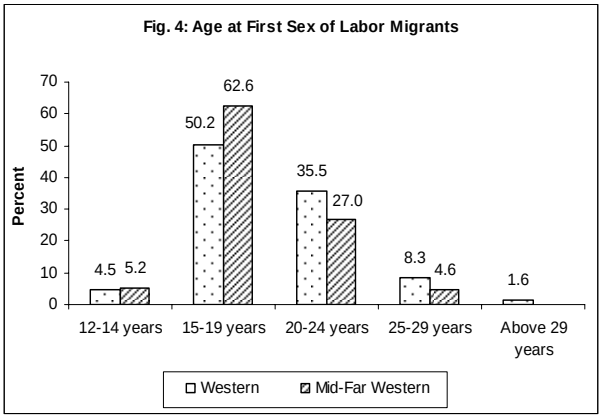
* Percentage may add up to more than 100 due to multiple responses

** Chitawan, Bara, Baglung, palpa, Nawalparasi,Dang ,Baitadi, Dhanusha, Kanchanpur

3.5 Sexual Behavior

The labor migrants were asked a series of questions related to their sexual behavior, such as age at first sexual encounter, sexual contact/relationships with female sex workers both in India and Nepal, number and frequency of visits to female sex workers, and their sexual relationships with any other male partner. This section presents the general findings of the study regarding these issues.

The great majority of the labor migrants had first married by the age of 24 years. In the Western region, about 40 percent each of the labor migrants reported first getting married at the age of 15-19 and 20-24 years. In the Mid to Far Western region, however, more than half (52.9%) and slightly more than one-third (35.9%) had got married at the age of 15-19 and 20-24 years respectively. A small proportion of the remaining respondents reported their age at first marriage as below the age of 14 years or 25 years or higher. Overall, the median age at first marriage of the respondents in the Western region was higher by 1 year (20 years) than those of the Mid to Far Western region (19 years) (Table 3.7).



Over 80 percent in the Western and over 90 percent of respondents in the Mid to Far Western region reported ever having had sex with a female. For the great majority (over 85%) of respondents in both regions, their first sexual encounter was when they were 15-24 years old (Fig. 4).

The median age of the respondents at their first sexual encounter was 1 year higher in the Western region (19 years) compared to those in the Mid to Far Western region (18 years). Furthermore, the age of the labor migrants when they first had first sex from both regions was 1 year lower than their age at first marriage.

The survey findings show that the prevalence of a sexual encounter(s) with a sex worker was low among the respondents in the Western region compared to the Mid to Far Western region. Only 11% in the Western region, compared to 23% in the Mid to Far Western region reported ever having sex with sex worker(s) (Table 3.7).

Table 3.7: Sexual Behavior of Male Labor Migrants

Sexual Behavior	Western		Mid-Far Western	
	N	%	N	%
Age at first marriage				
< 14 years	19	6.6	11	3.4
15-19	114	39.9	171	52.9
20-24	114	39.9	116	35.9
25-29	32	11.2	21	6.5
Above 29	7	2.4	4	1.2
Range	-	**6 – 35**	-	**9 – 37**
Mean/Median	-	**20.1/20.0**	-	**19.5/19.0**
Total	**286**	**100.0**	**323**	**100.0**
Ever had sex with a female				
Yes	313	86.9	345	95.8
No	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100.0**
Age at first sex				
12 – 14	14	4.5	18	5.2
15 – 19	157	50.2	216	62.6
20 – 24	111	35.5	93	27.0
25 – 29	26	8.3	16	4.6
Above 29	5	1.6	0	0.0
Don't know/ can't recall	0	0.0	2	0.6
Range	-	**12 – 32**	-	**12 – 29**
Mean/Median	-	**19.4/19.0**	-	**18.4/18.0**
Total	**313**	**100.0**	**345**	**100.0**
Ever had sex with a sex worker				
Yes	40	11.1	84	23.3
No	273	75.8	261	72.5
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100.0**

3.6 Sexual Practices of Male Labor Migrants in Nepal

3.6.1 Sexual Contact with Female Sex Workers in Nepal

Only 9 (2.5%) of respondents in the Western region and 23 (6.4%) in the Mid to Far Western region reported ever having sex with female sex worker(s) in Nepal. Overall, the reported number of female sex workers visited in Nepal by the respondents in the Western region was low compared to those in the Mid to Far Western region. The mean number of female sex workers visited in Nepal by the respondents was 2.1 (with a reported range of 1 to 5 female sex workers) in the Western region, while the same was 5.3 (with a reported range of 1 to 25 female sex workers) in the Mid to Far Western region (Table 3.8).

Table 3.8: 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	9	2.5	23	6.4
No	31	8.6	61	16.9
Never had sex with sex worker	273	75.8	261	72.5
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100.0**
Total number of FSWs visited in Nepal				
1	4	44.4	6	26.1
2-3	3	33.3	7	30.4
4-5	2	22.2	4	17.4
>5	0	0.0	6	26.1
Range	-	**1 – 5**	-	**1 – 25**
Mean	-	**2.1**	-	**5.3**
Total	**9**	**100.0**	**23**	**100.0**

Furthermore, the frequency of visits to sex workers in the past year was reported as low in the Western region (with a mean of 7 times) compared to the Mid to Far Western region (with a mean of 10 times). The meeting place for all labor migrants with FSWs was a hotel or a lodge (Annex - 8).

3.6.2 Condom Use with Female Sex Workers in Nepal

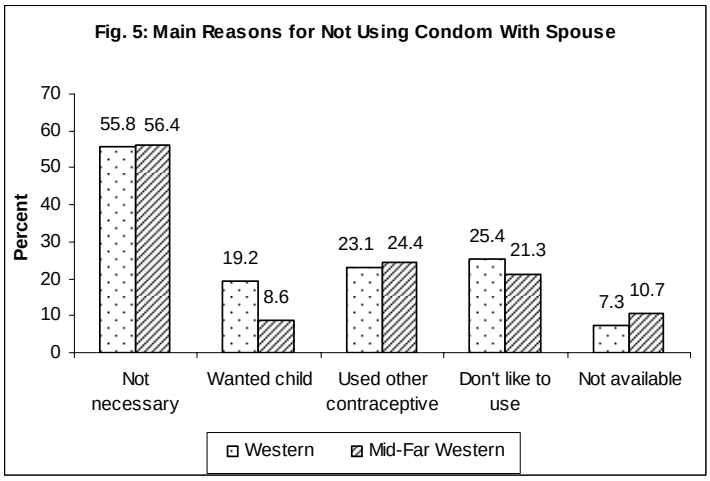
Three out of 4 respondents from the Western region and 1 out of 2 respondents from the Mid to Far Western region who had sex with FSWs in Nepal had used condoms in Nepal in their last sexual encounter with female sex workers. All but 2 respondents (from the Western region) had suggested the use of condom themselves in their last sexual encounter with a sex worker, while the partner had suggested using a condom in the case of 1 respondent. Three out of 4 and 1 out of 2 respondents respectively from the Western and Mid to Far Western region had used condoms consistently – every time they had sex. 'Non-availability' and 'partner objected' were the reasons given for inconsistent use of condoms by 1 respondent each from the two regions (Annex - 9).

3.6.3 Sexual Contact with Spouse and Condom Use

A large percentage of the currently married respondents, 76 percent in the Western and 88 percent in the Mid to Far Western regions, reported having had sex with their wife in the past year. Although the percentage of respondents who had sex with their wife was reported as high, the use of condoms during the last sex act with respondents' wives was low. Only 11 percent and 15 percent of respondents respectively in the Western and Mid to Far Western regions reported the use of a condom during the last sex act with their wives. Of these respondents, about 90 percent (28/31) in the Western region, and over 70 percent (35/46) in the Mid to Far Western region had suggested the use of a condom themselves. The study result shows that consistent use of condoms with wives among the labor migrant workers was also very low. Very low percentages of respondents (5.1% in the Western and 7.6% in the Mid to Far Western samples) reported using condoms every time they had sex with their wife in the past year. The great majority of respondents in the Western (77.4%) and Mid to Far Western region (63.5%) had not used a condom with their wife in the past year (Table 3.9).

On the reasons for not always using a condom, over half of the respondents in the Western (55.8%) and Mid to Far Western region (56.4%) reported that they 'didn't think it was necessary/didn't think of it'. About one-quarter of the respondents from the two regions did not

use a condom because they were 'using other contraceptives'. For about one-quarter of the respondents (25.4% in the Western and 21.3% in the Mid to Far Western samples), the reason was 'did not like to use a condom' (Fig. 5).



Similarly, over 9 in 10 respondents in both regions had sex with their wife in the past month. Of these, the large majority (79.6% in Western and 74% in the Mid to Far Western samples) had sex with their wife more than 5 times in this period (Table 3.9).

Table 3.9: 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	274	76.1	315	87.5
No	7	1.9	2	0.6
Currently not married	5	1.4	6	1.7
Never married	74	20.6	37	10.3
Total	**360**	**100.0**	**360**	**100.0**
Use of condom during last sex with wife				
Yes	31	11.3	46	14.6
No	243	88.7	269	85.4
Total	**274**	**100.0**	**315**	**100.0**
Person to suggest the use of condom during last sex				
Myself	28	90.3	35	76.1
My partner	3	9.7	11	23.9
Total	**31**	**100.0**	**46**	**100.0**
Consistent use of condom with wife in the past year				
Every time	14	5.1	24	7.6
Most of the time	13	4.7	15	4.8
Sometimes	17	6.2	43	13.7
Rarely	18	6.6	33	10.5
Never	212	77.4	200	63.5
Total	**274**	**100.0**	**315**	**100.0**
Frequency of sex with wife in the past one month				
0	12	4.4	16	5.1
1	2	0.7	3	1.0
2-3	14	5.1	26	8.2
4-5	26	9.5	37	11.7
> 5	218	79.6	233	74.0
Don't know	2	0.7	0	0.0
Range	-	**0 - 90**	-	**0 - 70**
Mean	-	**13.6**	-	**15.2**
Total	**274**	**100.0**	**315**	**100.0**

3.6.4 Sexual Contact with Girlfriends and Condom Use in Nepal

The 2008 IBBS results indicate that sexual relationships with girlfriends in Nepal are not very common among labor migrants. Of all respondents, 10% in the Western and about 7 percent in the Mid to Far Western regions reported having had sex with a girlfriend in the past year. Similarly, on the question of condom use, moderate numbers of these respondents in the Western region (15/36) and Mid to Far Western region (16/25) reported having used a condom in the last sex act with their girlfriend. Of these respondents, over 90 percent in the

Western region and over 70 percent of respondents in the Mid to Far Western region reported having suggested using a condom themselves. Overall, consistent use of condoms with girlfriends was low among the respondents, as less than half (41.7% in Western and 48% in the Mid to Far Western samples) in both regions reported using condom every time they had sex in the past year. A relatively high percentage (38.9% in Western and 32% in the Mid to Far Western samples) of the respondents in both regions reported never using a condom with their girlfriend. 'Non-availability', 'didn't like to use it', and 'didn't think it was necessary/didn't think of it' were the reasons given by the respondents for not using a condom every time they had sex with a girlfriend (Table 3.10).

The survey results also indicate that sex with girlfriends is not very frequent among the labor migrants. About 40 percent of respondents in both regions had no sex with girlfriends during the month period preceding the survey date. In both regions, slightly more than 10 percent of respondents reported having had sex with a girlfriend only once in the past month. About 31 percent in the Western region and 20 percent in the Mid to Far Western region had sex with a girlfriend 2-3 times in the same period. The mean number of times respondents reported having sex with a girlfriend was quite high (5.8 times) in the Mid to Far Western region compared to the Western region (2 times) (Table 3.10).

Table 3.10: 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	36	10.0	25	6.9
No	277	76.9	320	88.9
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100.0**
Use of condom during last sex with girl friend				
Yes	15	41.7	16	64.0
No	21	58.3	9	36.0
Total	**36**	**100.0**	**25**	**100.0**
Person to suggest the use condom during last sex				
Myself	14	93.3	12	75.0
My partner	1	6.7	4	25.0
Total	**15**	**100.0**	**16**	**100.0**
Consistent use of condom with girl friend in the past year				
Every time	15	41.7	12	48.0
Most of the time	0	0.0	2	8.0
Sometimes	5	13.9	2	8.0
Rarely	2	5.6	1	4.0
Never	14	38.9	8	32.0
Total	**36**	**100.0**	**25**	**100.0**
Reason for not using condom always				
Not available	12	57.1	6	46.2
Didn't like to use it	7	33.3	7	53.8
Didn't think it was necessary/didn't think of it	5	23.8	2	15.4
Trust on sex partner	1	4.8	1	7.7
Partner objected	0	0.0	4	30.8
Others	1	4.8	0	0.0
Don't know	1	4.8	0	0.0
Total	**21**	*****	**13**	*****
Frequency of sex with girl friend in the past one month				
0	14	38.9	10	40.0
1	4	11.1	3	12.0
2-3	11	30.6	5	20.0
> 3	7	19.4	7	28.0
Range	-	**0 – 10**	-	**0 - 90**
Mean	-	**2.0**	-	**5.8**
Total	**36**	**100.0**	**25**	**100.0**

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

3.6.5 Sexual Contact with Other Female Partners in Nepal and Condom Use

A small percentage of labor migrants in the Western region (2.8%) and the Mid to Far Western region (3.1%) reported having had sex with other female partners in the past year. Only 20 percent of these respondents in the Western region compared to about half (54.5%) in the Mid to Far Western region had used a condom with the other female sex partner in the past year. The survey result shows that all the respondents had suggested condom use in these sexual encounters themselves. Only 2 (2/10) in the Western region and 4 (4/11) respondents in the Mid to Far Western region had used a condom every time they had sex with a girlfriend in the past year. A relatively higher number of respondents had never used a condom in the specified period (Table 3.11).

Table 3.11: 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	10	2.8	11	3.1
No	303	84.2	334	92.8
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100**
Use of condom during the last sex with other female partners				
Yes	2	20.0	6	54.5
No	8	80.0	5	45.5
Total	**10**	**100.0**	**11**	**100**
Person to suggest condom use during last sex				
Myself	2	100.0	6	100
Total	**2**	**100.0**	**6**	**100**
Consistent use of condom with other female partners in the past year				
Every time	2	20.0	4	36.4
Most of the time	1	10.0	0	0.0
Sometimes	0	0.0	3	27.3
Rarely	1	10.0	0	0.0
Never	6	60.0	4	36.4
Total	**10**	**100.0**	**11**	**100**
Reasons for not using condom always				
Not available	7	87.5	2	28.6
Didn't think it was necessary/didn't think of it	2	25.0	3	42.9
Didn't like to use it	1	12.5	3	42.9
Partner objected	0	0.0	1	14.3
Total	**8**	*****	**7**	*****
Frequency of sex with other female partners in the past one month				
0	5	50.0	4	36.4
1	3	30.0	2	18.2
2-3	1	10.0	2	18.2
>3	1	10.0	3	27.3
Range	**-**	**0 - 6**	**-**	**0 - 8**
Mean	**-**	**1.2**	**-**	**2.3**
Total	**10**	**100.0**	**11**	**100.0**

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

'Non-availability', 'didn't like to use it', and 'didn't think it was necessary/didn't think of it' were the reasons given by higher numbers of respondents for not using a condom every time they had sex with other female sex partners. Similarly, on the question of frequency of sex, one-half in the Western region and slightly more than one-third in the Mid to Far Western region had no sex with other female partners in the month preceding the survey date. Among the rest, the frequency of intercourse with other female partners ranged from 1 to 8 times in the one month period. The mean number of times the respondents had sex with other female sex partners was about half in the Western region (1.2 times) compared to the Mid to Far Western region (2.3 times) (Table 3.11).

3.7 Sexual Practices of Male Labor Migrants in India

3.7.1 Sexual Contact with Female Sex Workers in India

Of all respondents included in the study, about 10 percent in the Western region and 22 percent of respondents in the Mid to Far Western region reported ever having sex with female sex workers in India (Table 3.12).

Table 3.12: 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	35	9.7	78	21.7
No	5	1.4	6	1.7
Never had sex with sex worker	273	75.8	261	72.5
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100**
Total number of FSWs visited in lifetime in India				
1	12	34.3	16	20.5
2-3	16	45.7	26	33.3
4-5	4	11.4	11	14.1
>5	3	8.6	25	32.1
Range	-	**1 – 12**	-	**1-75**
Mean	-	**2.8**	-	**8.0**

A small proportion of respondents from the Western (1.4%) and Mid to Far Western region (5%) reported having sex with an FSW in the past year in India. Most of these respondents (80% in the Western and 67% in the Mid to Far Western samples) had used a condom in the last act of sex with an FSW. More than half (58.3%) from the Mid to Far Western region and three-quarters (75%) from the Western region had suggested using a condom themselves in the last act of sex with FSWs. Likewise, most of these respondents (4/5 in the Western sample and 12/18 in the Mid to Far Western samples) had used a condom every time they had sex with an FSW in the past year. 'Non-availability' and 'didn't like to use it' were the main reasons for not using a condom every time the respondents had sex with an FSW (Table 3.13).

Table 3.13: 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	5	1.4	18	5.0
No	30	8.3	60	16.7
Never had sex with sex worker in India	5	1.4	6	1.7
Never had sex with sex worker	273	75.8	261	72.5
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100**
Use of condom during the last sex with FSW				
Yes	4	80.0	12	66.7
No	1	20.0	6	33.3
Total	**5**	**100.0**	**18**	**100**
Person to suggest the use of condom during last sex				
Myself	3	75.0	7	58.3
My partner	1	25.0	5	41.7
Total	**4**	**100.0**	**12**	**100**
Consistent use of condom with FSW in the past year				
Every time	4	80.0	12	66.7
Most of the time	0	0.0	1	5.6
Rarely	0	0.0	1	5.6
Never	1	20.0	4	22.2
Total	**5**	**100.0**	**18**	**100**
Reasons for not using condom always				
Didn't like to use it	1	100.0	3	50.0
Not available	0	0.0	4	66.7
Others	0	0.0	1	16.7
Total	**1**	*	**6**	*

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

Most of these respondents in the Western region had visited 1 and 2-3 FSWs during their time in India. The number of respondents in the Mid to Far Western region who reported visiting 2 or more FSWs in India during their time there was much higher than in the Western region (Annex 10).

A higher numbers of respondents from the Mid to Far Western region had visited FSWs in the past year in India than those from the Western region. While 4 respondents (80%) in the Western region reported visiting 1 FSW in India in the past year, only one-third of the respondents from the Mid to Far Western region reported visiting 1 FSW in the past year. Most respondents (67%) from the Mid to Far Western region reported visiting 2-3, or more than 3, FSWs during the past year. The mean number of FSWs visited in the past year in India by the respondents from the Mid to Far Western region was 4.2, compared to 1.4 FSWs reported by respondents from the Western region. The frequency of sex with FSWs in the past year in India was also very high in the Mid to Far Western region compared to the Western region (Annex 10).

All respondents from the Western region had sex in India in the past year. These respondents had sex in Mumbai and Delhi. The respondents from the Mid to Far Western region, however, had sex in a number of places including Mumbai, Goa, and Surat. On the question of the timing of the last act of sex with FSWs in India, most respondents from both regions had sex either 8-12 weeks before or more than 12 weeks before the survey date. Moreover, most of the respondents from both regions had met the last FSW in India at a brothel or a hotel/lodge. Very few respondents had met the last FSWs in India at other places such as in the street, at the workplace or at the FSW's place of abode (Annex 10).

3.7.2 Sexual Contact with Girlfriends and Condom Use in India

Only about 2 percent in the Western region and 3 percent in the Mid to Far Western region reported having had sex with a girlfriend in the past year. Use of condoms by the respondents with girlfriends was moderately high, and in most cases, especially the respondents from Mid to Far Western region, had suggested condom use. In the case of respondents from the Western region, however, condom use was suggested by their partner for about 4 in 10 respondents (42.9%). Consistent condom use was high among the respondents from the Western region. In the Mid to Far Western region, one-third of respondents had never used a condom while having sex with a girlfriend in the past year. Non-availability was the reason given for not using a condom by higher numbers of respondents from both regions. However, higher numbers of respondents from the Mid to Far Western region also gave other reasons such as, 'didn't like to use it and 'didn't think it was necessary/didn't think of it'. Of these respondents, only 2 respondents in the Mid to Far Western region had sex with a girlfriend once, while 2 from the Western region had sex with girlfriend 2-3 times in the month preceding the survey date (Annex - 11).

3.7.3 Sexual Contact with Other Female Partners and Condom Use in India

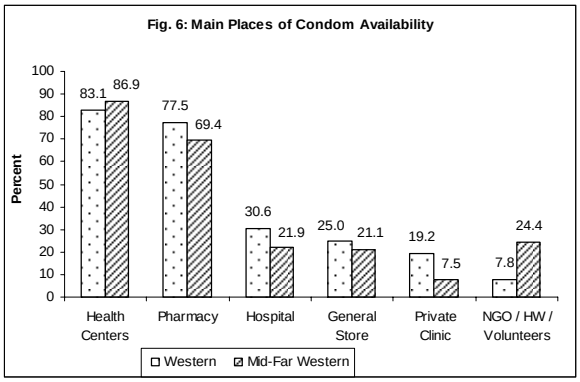
Only 2 (0.6%) of respondents in the Western and 7 (1.9%) in the Mid to Far Western region reported having had sex with other female partners in the past year in India. Most of these respondents (1/2 in Western and 5/7 in the Mid to Far Western samples) had used a condom during the last act of sex with the female partner. One in the Western region and 4 respondents in the Mid to Far Western region had themselves suggested using a condom with these partners. Most of these respondents in both the regions had also used a condom every time they had sex

with other female partners in India in the past year. Non-availability and 'didn't think it was necessary/didn't think of it' was the reason given by the respondents for not using a condom every time they had sex with other female partners in India in the past year. On the question of frequency of sex in the past 1 month, none in the Western region had sex in the past month with other female partners in India while 1 respondent each in the Mid to Far Western region respectively had sex with 1 and more than 1 in the past month in India (Annex - 12).

3.8 Availability of Condoms

Information on various aspects of condoms, such as places where condoms are available, whether the respondents obtain condoms free of cost or if they usually pay for them, the most convenient place to get condoms free of cost, and the most convenient place to buy condoms was also collected in the survey. Thus, in the process, the first question asked of the respondents was whether they usually carry condoms or not. The overall results show that the condom carrying habit among the respondents is low. Only 16 percent in the Mid to Far Western region and 7% in the Western region reported usually carrying condoms (Table 3.14).

Over 8 in 10 respondents (83.1% in the Western and 86.9% in the Mid to Far Western samples) in both regions knew that condoms are available at the health post or health centres. The great majority of the respondents (69.4% in the Western and 77.5% in the Mid to Far Western samples) in both regions were aware that condoms are also available in pharmacies. A higher proportion of these respondents were also aware that condoms are available in other places such as hospitals, general retail stores ('kirana pasal'), from NGOs/health workers/volunteers and FCHVs (Fig. 6).



On the question of whether the respondents usually obtain condoms free of cost or if they purchase them, 18 percent from the Mid to Far Western region and 7 percent from the Western region said they usually obtaining condoms free of cost. About 13 percent and 8 percent respectively from the Western and Mid to Far Western region reported usually purchasing condoms (Table 3.14).

Similarly, the great majority of respondents (87% in the Western and 75% in the Mid to Far Western samples) usually obtain free condoms from health posts/health centres. A noticeably higher proportion of respondents, especially those from the Mid to Far Western region (39.4%) usually obtain condoms free from FCHVs. The other places reported by a relatively high proportion of respondents for obtaining free condoms include NGOs/health workers/volunteers, peers/friends and hospitals. Health posts/health centres were regarded as the most convenient place for obtaining condoms free of cost by the higher percentage of respondents (84.8% in Western and 69.7% in the Mid to Far Western samples) in both regions (Table 3.14).

Over 9 in 10 respondents in both regions had purchased condoms from a pharmacy. A higher percentage of respondents (13.4% in the Western and 29.2% in the Mid to Far Western samples) had also purchased condoms from general retail stores. Similarly, more than one-quarter of the respondents had mentioned purchasing condoms at private clinics. Again, the

pharmacy was regarded as the most convenient place (92.5% in the Western and 87.5% in the Mid to Far Western samples) to purchase condoms. Overall, a smaller proportion of respondents in both regions said that the nearest place they could get condoms was up to 5 minutes or 6-10 minutes away. Most respondents (59.6% in the Western and 48.7% in the Mid to Far Western samples), however, reported that it takes about 20 plus minutes to obtain condom from the nearest place (Table 3.14).

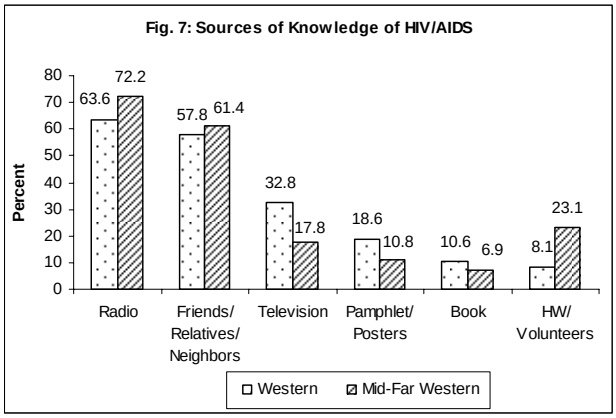
Table 3.14: Availability of Condoms as Reported by Male Labor Migrants

Condom Availability	Western		Mid-Far Western	
	N	%	N	%
Usually carry condoms				
Yes	24	6.7	59	16.4
No	336	93.3	301	83.6
Total	**360**	**100.0**	**360**	**100.0**
Places where condoms are available				
Health Post/ health Centre	299	83.1	313	86.9
Pharmacy	279	77.5	250	69.4
Hospital	110	30.6	79	21.9
General retail store (*Kirana pasal*)	90	25.0	76	21.1
Private clinic	69	19.2	27	7.5
FPAN clinic	33	9.2	22	6.1
NGO/health workers/volunteers	28	7.8	77	21.4
Paan shop	28	7.8	11	3.1
FCHV	27	7.5	121	33.6
Peer/friends	19	5.3	22	6.1
Hotel/lodge	7	1.9	0	0.0
Brothel	3	0.8	2	0.6
Others	6	1.7	4	1.1
Don't know	23	6.4	5	1.4
Total	**360**	*	**360**	*
Usually obtain condom				
Always free of cost	24	6.7	65	18.1
Purchase	45	12.5	28	7.8
Both ways	22	6.1	44	12.2
Condom never used	269	74.7	223	61.9
Total	**360**	**100.0**	**360**	**100.0**
Usually obtain free condom from				
Health post/health centre	40	87.0	82	75.2
FCHV	8	17.4	43	39.4
Peers/friends	8	17.4	9	8.3
Hospital	5	10.9	9	8.3
NGO/health workers/volunteers	4	8.7	20	18.4
FPAN clinics	0	0.0	3	2.8
Others	1	2.2	1	0.9
Total	**46**	*	**109**	*
Most convenient place to obtain free condom				
Health post/health centre	39	84.8	76	69.7
Hospital	5	10.9	6	5.5
Peers/friends	5	10.9	5	4.6
FCHV	4	8.7	44	40.4
NGO/health workers/volunteers	4	8.7	17	15.6
Others	1	2.2	0	0.0
Total	**46**	*	**109**	*
Places of purchasing condom				
Pharmacy	61	91.0	66	91.7
Private clinic	18	26.9	6	8.3
General retail store (*Kirana pasal)*	9	13.4	21	29.2
Paan Shop	2	3.0	0	0.0
Others	1	1.5	0	0.0
Total	**67**	*	**72**	*
Most convenient place to purchase condom				
Pharmacy	62	92.5	63	87.5
Private clinic	15	22.4	7	9.7
General retail store (*Kirana pasal*)	7	10.4	16	22.2
Paan shop	2	3.0	0	0.0
Total	**67**	*	**72**	*
Time needed to obtain condoms from nearest place				
Up to 5 minutes	22	6.5	46	13.0
6 – 10 minutes	43	12.8	62	17.5
11 – 15 minutes	19	5.6	26	7.3
16 – 20 minutes	52	15.4	48	13.5
21 and more minutes	201	59.6	173	48.7
Total	**337**	**100.0**	**355**	**100.0**

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

3.9 Knowledge of HIV/AIDS

Nearly all respondents (98.6%) in the Mid to Far Western region and a slightly less percentage (95.8%) in the Western region had heard about HIV/AIDS (Table 3.15). The radio remains the main source of information for HIV/AIDS in both of the study regions. Over 6 in 10 and over 7 in 10 respondents respectively in the Western and Mid to Far Western region mentioned radio as their main source of information. Community networks also appear to be important, with a high proportion of respondents in the Western region (57.8%) and the Mid to Far Western region (61.4%), mentioning friends/neighbors/relatives as their source of information on HIV/AIDS. Other sources reported by a higher proportion of respondents in both regions include television, pamphlets/posters; books; and health workers/volunteers (Fig. 7).



A relatively higher proportion of respondents in both regions also mentioned other sources of information on HIV/AIDS such as teachers/schools, health facilities, people from NGOs and outdoor media sources like billboards/signboards. The percentage of respondents quoting these sources of information on HIV/AIDS was higher in the Mid to Far Western than those in the Western region (Table 3.15).

Table 3.15: Other Sources of Knowledge of HIV/AIDS among Male Labor Migrants

Sources of Knowledge	Western		Mid-Far Western	
	N	%	N	%
Ever heard about AIDS				
Yes	345	95.8	355	98.6
No	15	4.2	5	1.4
Total	**360**	**100.0**	**360**	**100.0**
Other sources of information of HIV/AIDS				
Teacher/school	20	5.6	28	7.8
Hospital/health post	12	3.3	28	7.8
Billboard/signboard	12	3.3	15	4.2
People from NGOs	8	2.2	32	8.9
Street drama	7	1.9	13	3.6
Discussion/workshop/conference/training	5	1.4	7	1.9
Work place	3	0.8	9	2.5
Others (NRCS, advertisements)	8	2.2	15	4.1
Never heard of HIV/AIDS	15	4.2	5	1.4
Total	**360**	*****	**360**	*****

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

In the IBBS 2008, the respondents were also asked about the places where they had seen or heard information on HIV/AIDS. The overall results shows that in India, higher percentage of respondents from both regions had seen or heard about HIV/AIDS in Maharastra (23.3% in the Western and 18.6% in the Mid to Far Western samples); Delhi (22.5% in the Western and 4.2% in the Mid to Far Western samples); and Gujrat (4.4% - 8.9%). In Nepal, most respondents from the Western region had heard about it in Gulmi (36.9%); Palpa (15%); and Kapilvastu (14.2%). In the Mid to Far Western region, however, most respondents had heard or seen the information in Achham (30.6%); Surkhet (23.6%); and Kailali (17.2%) (Annex 13).

A high percentages of respondents in the Mid to Far Western region (20.8%) compared to those in the Western region (4.4%) were given the information in the past year. Among these, most of the respondents from the Western region had received such information in Maharastra (31.3%); Delhi (12.5%); and Gujrat (6.3%). Higher percentages of those from the Mid to Far Western region had received the information in Maharastra (16%). Similarly, in Nepal, most respondents from the Western region had received the information in Gulmi (18.8%) and Syngja (6.3%); while most respondents from the Mid to Far Western region had received the information in Achham (29.3%; Doti (20%); Kailali (16%); Surkhet (13.3%) and Kanchanpur (8%) (Annex 14).

3.10 Access to HIV/AIDS Awareness Messages

From the time FHI started intervention programs to bring awareness about HIV/AIDS to high-risk groups of people, various messages regarding the use of condoms for the prevention of HIV/AIDS have been 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 this information (Table 3.16).

Overall, nearly half of the respondents (48.6%) in the Western region and over two-thirds (68.1%) in the Mid to Far Western region were aware that one should, 'avoid unsafe sex and use a condom'. A higher percentage of respondents in both regions were also aware that 'HIV/AIDS is transmitted through blood' (23.9% in the Western and 30.6% in the Mid to Far Western samples) and to 'avoid using needles/syringes used by others' (23.9% in the Western and 27.2% in the Mid to Far Western samples). Comparatively, a higher proportion of respondents in the Western region (31.9%) than in the Mid to Far Western region (4.4%) mentioned, 'avoiding sex with FSWs' as a way of preventing oneself from getting HIV/AIDS. The other messages acquired through these media sources by a higher proportion of respondents in both regions include: 'avoid sex with multiple partners' (25.6% in Western and 17.5% in the Mid to Far Western samples); 'HIV/AIDS is a fatal and incurable disease' (14.2% - 18.1%); and 'HIV/AIDS is transmitted through use of knives and blades' (8.1% in Western and 20.6% in the Mid to Far Western samples) (Table 3.16).

Table 3.16: 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	175	48.6	245	68.1
Avoid sex with FSWs	115	31.9	16	4.4
Avoid sex with multiple partners	92	25.6	63	17.5
HIV/AIDS is transmitted through blood	86	23.9	110	30.6
Avoid using needle/syringe used by others	86	23.9	98	27.2
HIV/AIDS is fatal and incurable disease	51	14.2	65	18.1
HIV/AIDS is transmitted through use of knife and blade	29	8.1	74	20.6
Avoid Sex with HIV infected females	12	3.3	17	4.7
HIV/AIDS symptoms are fever, aching body, weight loss, drowsiness, ulcers etc.	10	2.8	4	1.1
HIV/AIDS is transmitted through physical contact, sharing food and kissing	8	2.2	24	6.7
HIV/AIDS is not transmitted through physical contact	8	2.2	38	10.6
Infected mother can transmit HIV/AIDS to her child	7	1.9	10	2.8
HIV/AIDS is communicable disease	5	1.4	26	7.2
Person with HIV/AIDS should not be hated	3	0.8	4	1.1
Others	10	2.8	19	5.3
Never heard of HIV/AIDS	15	4.2	5	1.4

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

3.11 Knowledge and Treatment of Sexually Transmitted Infections (STIs)

The labor migrant workers who have more than one sex partners are more at risk of acquiring sexually transmitted infections. Thus, in order to assess the extent and prevalence of STIs among the labor migrants, a series of questions were asked covering various aspects of STI infection, including whether they have had experienced the infection in the past or are currently having such a problem.

The first question asked to the respondents was related to their understanding of STIs. The overall results show that about 4 in 10 respondents (41.4%) in the Western region and slightly more than one-third (35.6%) in the Mid to Far Western region understood HIV/AIDS as one form of STI. Similarly, about one-quarter each (24.7% in the Western and 28.3% in the Mid to Far Western samples) of respondents regarded Syphilis (*Bhiringi)*/Gonorrhea as an STI.

The number of respondents who regarded some other physical symptoms as STIs was also quite high. For example, in both regions about one-half of the respondents (51.4% in the Western and 46.1% in the Mid to Far Western samples) regarded the development of an 'ulcer or sore around genital area' as one form of STI. Similarly, 'white discharge/discharge of pus/*dhatu* flow' was also regarded as an STI by about one-quarter (23.9%) in the Western and over one-third (35.6%) of the respondents in Mid to Far Western region. A relatively small proportion of respondents mentioned other symptoms such as 'pain during urination' (8.1% in the Western and 7.2% in the Mid to Far Western samples); 'burning sensation while urinating' (6.1% in the Western and 8.3% in the Mid to Far Western samples); and 'itching in genital areas' (3.3% in Western and 6.7% in the Mid to Far Western samples) as STIs (Table 3.17).

Table 3.17: Understanding of STIs and Reported STI Symptoms (Past Year)

Reported STI Symptoms and Treatment	Western		Mid-Far Western	
	N	%	N	%
Understanding of STI				
Ulcer or sore around genital area	185	51.4	166	46.1
HIV/AIDS	149	41.4	128	35.6
Syphilis (*Bhiringi)*/gonorrhea	89	24.7	102	28.3
White discharge/discharge of pus/*dhatu* flow	86	23.9	128	35.6
Pain during urination	29	8.1	26	7.2
Burning sensation while urination	22	6.1	30	8.3
Itching in genital areas	12	3.3	24	6.7
Swelling private part	5	1.4	4	1.1
Fever	2	0.6	6	1.7
Becomes thin	0	0.0	6	1.7
Others	7	1.9	9	2.5
Don't know	76	21.1	81	22.5
Total	**360**	*	**360**	*
Types of STI symptoms experienced in the past year				
Burning sensation while urination	6	1.7	16	4.4
Ulcer or sore around genital area	6	1.7	11	3.1
Pain during urination	6	1.7	11	3.1
White/pus discharge	4	1.1	7	1.9
Others	1	0.3	4	1.1
Any of the above symptoms	15	4.2	36	10.0
None of the above symptoms	345	95.8	324	90.0
Total	**360**	*	**360**	*

Overall, 9 in 10 respondents in both the Western (95.8%) and Mid to Far Western region (90%) had not suffered any STI symptoms in the past year. The 2008 IBBS results further show that the prevalence of STI symptoms in the past year was more pronounced among the respondents in the Mid to Far Western region. Less than 2 percent of respondents in the Western region

reported experiencing symptoms such as, 'burning sensation while urinating', 'ulcer or sore around genital area' and 'pain during urination'; while 3 - 4 percent of respondents in the Mid to Far Western region reported experiencing such symptoms in the past year. The percentage of respondents experiencing any of the STI symptoms in the past year was very high in the Mid to Far Western region (10%) compared to those in the Western region (4.2%) (Table 3.17).

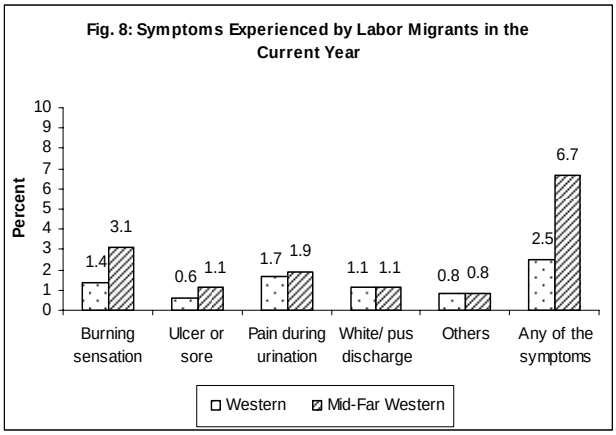
The IBBS result further shows that health services seeking behavior of the labor migrant workers is poor. Only about half of the respondents (53.3% in the Western and 47.2% in the Mid to Far Western samples) had sought/received treatment for STI symptoms in the past year. Most of the respondents in the Western region (75%) and the Mid to Far Western region (47.1%) had sought treatment in private clinics. Two each of the respondents in both regions had visited hospitals for treatment. A relatively high number of respondents in the Mid to Far Western region had also visited a pharmacy for the treatment of STI symptoms in the past year. About 63 percent in the Western and 24 percent in the Mid to Far Western region had also received counselling on STI symptoms. More than half of these respondents who developed STI symptoms in the past year in both regions were counselled on using condoms and reducing their number of sexual partners (Table 3.18).

Table 3.18: Reported Treatment of STI among Male Labor Migrants (Past Year)

Treatment of STI	Western		Mid-Far Western	
	N	%	N	%
Received treatment for any of the above symptom				
Yes	8	53.3	17	47.2
No	7	46.7	19	52.8
Total	**15**	**100.0**	**36**	**100.0**
Places of treatment of STI symptoms in the past year				
Private clinic	6	75.0	8	47.1
Hospital	2	25.0	2	11.8
Pharmacy	0	0.0	5	29.4
Others	1	12.5	2	11.8
Total	**8**	*	**17**	*
Received counselling				
Yes	5	62.5	4	23.5
No	3	37.5	13	76.5
Total	**8**	**100.0**	**17**	**100.0**
Counselling provided				
On using condom	1	20.0	2	50.0
On reducing number of sexual partners	2	40.0	1	25.0
Others	3	60.0	2	50.0
Total	**5**	*	**4**	*

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

All the respondents in the Western and the Mid to Far Western region were also asked if they had developed any of the STI symptoms in the current year. The results are presented in Figure 8.



Overall, more respondents in the Mid to Far Western region (6.7%) compared to those in the Western region (2.5%) reported experiencing one or more STI symptoms in the current year. Of these respondents, a higher percentage in the Mid to Far Western region than those in the Western region reported of experiencing symptoms such as 'burning

sensation while urinating', 'ulcer or sore around genital area', 'white/pus discharge' and 'pain during urination' in the current year (Figure 8).

Only about one-third of these respondents (33.3% in the Western and 29.2% in the Mid to Far Western samples) had sought treatment for the STI symptoms. The respondents in the Western region had sought treatment in less than a week or by 2-4 weeks after developing the STI symptoms. Of those who sought treatment in the Mid to Far Western region, more than half (57.1%) had sought treatment in less than a week while the rest had sought treatment between 1 to 4 weeks after developing the STI symptoms (Table 3.19).

In the Western region, the respondents seeking treatment had visited a hospital or private clinic for treatment. In addition to private clinics and the hospital, 29 percent of respondents in the Mid to Far Western region had visited a pharmacy seeking treatment in the current year. Of those who sought treatment, 67 percent in the Western region and 71 percent in the Mid to Far Western region had received prescriptions for medicine, and all these respondents had obtained the prescribed medicine. Most of the respondents in the Mid to Far Western region (71.4%) had spent up to NRs. 100 obtaining prescribed medicine, while the respondents in the Western region had spent more than NRs. 100 for the same (Table 3.19).

Table 3.19: Reported STI Treatment among Male Labor Migrants (Current)

STI Treatment	Western		Mid-Far Western	
	N	%	N	%
Received treatment for above symptoms				
Yes	3	33.3	7	29.2
No	6	66.7	17	70.8
Total	**9**	**100.0**	**24**	**100.0**
Treatment received				
After less than a week	1	33.3	4	57.1
After one week	1	33.3	1	14.3
After two-four weeks	1	33.3	1	14.3
After more than four weeks	0	0.0	1	14.3
Total	**3**	**100.0**	**7**	**100.0**
Place visited for treatment of STI symptoms				
Private clinic	1	33.3	4	57.1
Pharmacy	0	0.0	2	28.6
Hospital	2	66.7	1	14.3
Total	**3**	*****	**7**	*****
Received prescription for medicine				
Yes	2	66.7	5	71.4
No	1	33.3	2	28.6
Total	**3**	**100.0**	**7**	**100.0**
Obtained all the medicine prescribed				
Obtained all	2	100.0	5	100.0
Total	**2**	**100.0**	**5**	**100.0**
Took all the prescribed medicine				
Yes	2	100.0	5	100.0
Total	**2**	**100.0**	**5**	**100.0**
Amount paid for the medicine				
Up to RS. 100	0	0.0	5	71.4
RS. 101-500	3	100.0	2	28.6
Total	**3**	**100.0**	**7**	**100.0**

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

3.12 Perception on HIV Test

About half of the respondents (47.5%) in the Western region and nearly one-third of respondents (31.1%) in the Mid to Far Western region were aware of the availability of confidential HIV testing facility in the community. Of them, about 8 percent and 12 percent of respondents respectively from the Western and Mid to Far Western region had undergone an

HIV test in the past. Of the 29 respondents in the Western region, 11 respondents had undergone the test voluntarily while the rest had to undergo the test as a requirement. Similarly, more respondents (27/42) in the Mid to Far Western region had done it voluntarily, while for the rest (15/42) it was a requirement. All respondents in the Western region and all but one in the Mid to Far Western region had obtained the result themselves. One respondent in the Mid to Far Western region had not obtained the report because he claimed to have been sure of not being infected. About 41 percent of the respondents in the Western region and 60 percent in the Mid to Far Western region had undergone the test within the last 12 months. The rest of the respondents in both regions had undergone the testing 1 – 2 years or more than 2 years preceding the survey date (Table 3.20).

Table 3.20: 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	171	47.5	112	31.1
No	125	34.7	192	53.3
Don't know	64	17.8	56	15.6
Total	**360**	**100.0**	**360**	**100.0**
Ever had HIV test				
Yes	29	8.1	42	11.7
No	316	87.8	313	86.9
Don't know	15	4.2	5	1.4
Total	**360**	**100.0**	**360**	**100.0**
Voluntarily underwent the test or because it was required				
Voluntarily	11	37.9	27	64.3
Required	18	62.1	15	35.7
Total	**29**	**100.0**	**42**	**100.0**
Obtained the test result				
Yes	29	100.0	41	97.6
No	0	0.0	1	2.4
Total	**29**	**100.0**	**42**	**100.0**
Reason for not receiving the test result				
Sure of not being infected	-	-	1	100.0
Total	-	-	**1**	**100.0**
Most recent HIV test				
Within last 12 months	12	41.4	25	59.5
Between 1-2 years	3	10.3	3	7.1
Between 2-4 years	10	34.5	11	26.2
More than 4 years ago	4	13.8	3	7.1
Total	**29**	**100.0**	**42**	**100.0**

3.13 Use of Alcohol and Drugs

The use of alcohol and drugs leads to a higher chance of risky drug use and sexual behavior. In this context information on the alcohol and drug taking habits of the labor migrants was also collected in the survey. The overall results of the IBBS show that the use of alcohol among labor migrants is common. In the survey, nearly 7 in 10 labor migrants (65% in the Western and 72% in the Mid to Far Western samples) from both regions reported consuming alcohol during past month. Of these, a higher percentage of respondents reported consuming alcohol 2-3 times a week (21% in Western and 25% in the Mid to Far Western samples) and less than once a week (21% in Western and 25% in the Mid to Far Western samples) in the past month. Similarly, about 10 -11 percent of respondents from both regions reported consuming alcohol on a daily basis in the past month (Table 3.21).

Overall, a small proportion of respondents reported using drugs in the past month. By region, however, a comparatively very high percentage of respondents from the Mid to Far Western region (6.4%) reported trying drugs in the past month, while less than one percent (0.6%)

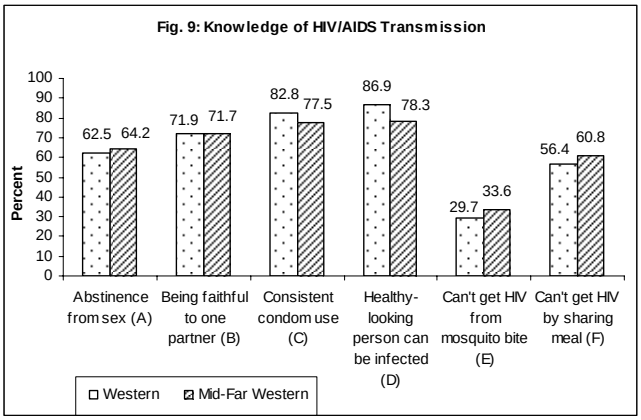
reported of the same in the Western region. The survey findings further reveal that although drug use was reported, the use of intravenous drugs was not prevalent among the respondents from both regions (Table 3.21).

Table 3.21: 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	41	11.4	36	10.0
Once a week	39	10.8	41	11.4
2-3 times a week	76	21.1	91	25.3
Less than once a week	75	20.8	91	25.3
Never	129	35.8	101	28.1
Tried any types of drugs during past one month				
Yes	2	0.6	23	6.4
No	357	99.2	337	93.6
Don't know	1	0.3	0	0.0
Ever injected drugs				
Yes	0	0.0	0	0.0
No	360	100.0	360	100.0
Consumption of alcohol during last stay in India				
Everyday	20	5.6	13	3.6
2-3 times a week	32	8.9	43	11.9
Once a week	68	18.9	77	21.4
Less than once a week	90	25.0	120	33.3
Never	150	41.7	107	29.7

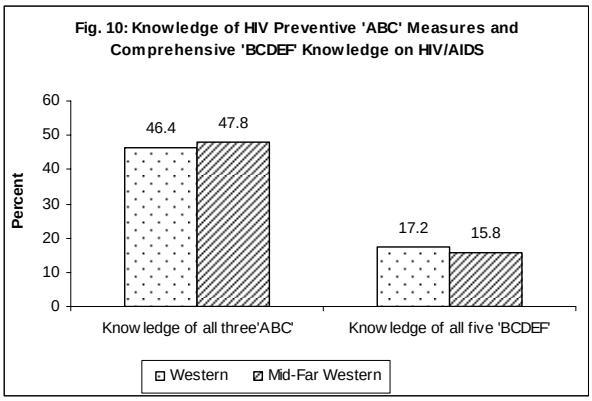
Nearly 6 in 10 from the Western region and 7 in 10 respondents in the Mid to Far Western region had consumed alcohol during their last stay in India. Among these respondents, daily consumption of alcohol was relatively low, while a higher percentage consuming alcohol once a week (18.9% in the Western and 21.4% in the Mid to Far Western samples) and in less than once a week (25% in Western and 33.3% in the Mid to Far Western samples). The survey results further indicate that some respondents did not consume alcohol in their last stay in India, although they had consumed it in the past month in Nepal (Table 3.21).

3.14 Knowledge of HIV/AIDS



The proper knowledge of HIV/AIDS among the labor migrants is presented in Table 25. Overall, high percentages of respondents in both regions knew about '**A'** (abstinence from sex); '**B'** (being faithful to 1 partner or avoiding multiple sex partners); '**C'** (consistent condom use or use of condom during every sex act); and '**D'** (a healthy-looking person can be infected). By study region, proper knowledge regarding 'consistent condom use' and that 'a healthy-looking person can be infected with HIV' was slightly higher in the Western region. Nearly 6 in 10 respondents in Mid to Far Western region also knew that 'one can not get HIV by sharing a meal with an HIV-infected person' (Figure 9).

Overall, only about half of the respondents (46.4% in Western and 47.8% in the Mid to Far Western samples) knew of all three '**ABC**'. Less than one-fifth of the respondents (17.2% in the Western and 15.8% in the Mid to Far Western samples)) knew of all five major knowledge indicators, '**BCDEF'** (Figure 10).



The migrant workers were also asked if they were aware of any person infected with HIV or who had died of AIDS. More than half of the respondents in both regions reported knowing someone infected with HIV or who had died of AIDS. A higher percentage of respondents in the Mid to Far Western region (21.7%) compared to the Western region (7.9%) reported having a close relative infected with HIV or who had died of AIDS. Similarly, about 10 percent each of the respondents in both regions had a close friend infected with HIV or who had died of AIDS. A large proportion of respondents in both regions (67.4% in Western and 79.5% in the Mid to Far Western samples) knew someone who was infected with HIV or who had died of AIDS (Table 3.22).

Over half of the respondents in both regions (greater than 90%) were aware that 'use of previously used needle/syringe' and 'blood transfusion from an infected person' can transmit the virus from one person to another. The knowledge that 'one cannot get HIV by holding an HIV-infected person's hand' and that 'a pregnant woman infected with HIV/AIDS can transmit the virus to her unborn child' was high (greater than 80%) among the respondents in both regions. A slightly lower percentage of respondents in both regions (65.6% in Western and 71.7% in the Mid to Far Western samples) however, were aware that a woman with HIV/AIDS can transmit the virus to her newborn child through breastfeeding (Table 3.22).

Table 3.22: Knowledge on HIV Infection among People they Know, and Knowledge of 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	190	52.8	184	51.1
A close relative or close friend				
Close relative	15	7.9	40	21.7
Close friend	24	12.6	20	10.9
No relation	151	79.5	124	67.4
Total	**190**	**100.0**	**184**	**100.0**
Awareness on HIV/AIDS				
A woman with HIV/AIDS can transmit the virus to her new-born child through breastfeeding	236	65.6	258	71.7
Can not get HIV by holding an HIV infected person's hand	297	82.5	289	80.3
A person can get HIV, by using previously used needle/syringe	336	93.3	336	93.3
Blood transfusion from an infected person to transmit HIV	341	94.7	339	94.2
A pregnant woman infected with HIV/AIDS can transmit the virus to her unborn child	309	85.8	296	82.2
A pregnant woman can reduce the risk of transmission of HIV to her unborn child				
Take medicine	82	26.5	83	28.0
Take advice and counseling	64	20.7	57	19.3
Abort the Child	3	1.0	2	0.7
Cannot be treated	3	1.0	1	0.3
Others	1	0.3	4	1.4
Don't know	156	50.5	149	50.3
Total	**309**	**100.0**	**296**	**100.0**

On the question of 'what action should a woman take in order to save the fetus from HIV infection?', about one-quarter each of the respondents (26.5% in the Western and 28% in the Mid to Far Western samples) believed that she should take medicine in order to save the fetus from HIV infection. Similarly, about 1 in 5 respondents from both regions believed that the woman should take advice and counseling in such circumstances. About half of the respondents had no idea what a woman should do in such a situation (Table 3.22).

3.15 Stigma and Discrimination

An attempt was also made to examine the extent of stigmatization and discrimination of HIV-infected people in the community. The respondents were asked whether they would be willing to take care of an HIV-infected relative in the household. The survey result shows that 85 percent of respondents in the Mid to Far Western region, and 78 percent in the Western region were willing to take care of a male relative with HIV in their household. The respondents also expressed the same level of willingness to take care of a female relative infected with HIV. The willingness of respondents to maintain confidentiality of a HIV positive family member, however, was relatively low in both regions. Only about one-half in the Mid to Far Western region and one-third in the Western region were willing to maintain confidentiality of an HIV-infected member in the household (Table 3.23).

Table 3.23: 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	282	78.3	306	85.0
No	76	21.1	52	14.4
Don't know	2	0.6	2	0.6
Respondent willing to take care of HIV positive female relative in the household				
Yes	281	78.1	302	83.9
No	77	21.4	56	15.6
Don't know	2	0.6	2	0.6
Respondent willing to maintain confidentiality of a HIV positive family member				
Yes	116	32.2	168	46.7
No	241	66.9	189	52.5
Don't know	3	0.8	3	0.8

CHAPTER - IV: HIV PREVALENCE

4.1 Prevalence of HIV

Information on HIV prevalence among migrant labor workers was collected in the survey. HIV infection status was derived from the 'Determine' HIV test from the blood samples collected in 3 to 5 capillary tubes by finger prick from the study participants. In the event of a first positive result, a second HIV test was performed using the 'Uni-Gold' HIV. In case of a tie in the first two test results, a third confirmatory test known as 'SD Bioline' was performed. Out of 360 each of the returnee migrants participating in the study, 5 (1.4%) in the Western region and 3 (0.8%) in the Mid to Far Western regions tested positive for HIV (Table 4.1).

Table 4.1: HIV Prevalence by Sample Sites

Sample Sites	2008		
	Total Sample	HIV Prevalence	%
Western sample (5 districts)*	360	5	1.4
Mid-Far Western sample (6 Districts)**	360	3	0.8

***** Kapilvastu, Gulmi, Syangja, Palpa and Kaski Districts
** Achham, Doti, Kailali, Kanchanpur Surkhet and Banke Districts

4.2 Relationship between Socio-Demographic Characteristics and HIV Infection

Association between HIV infection and socio-demographic and behavioral characteristics of labor migrants was also examined in the study. In the Western sample, HIV infection has no significant association with any of the five variables presented in Table 4.2 at a 5 percent significant level because all the p values were greater than 0.5 (Table 4.2).

Table 4.2: 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	139	0	0.0	> .05	122	0	0.0	> .05
25 years and Above	221	5	2.3		238	3	1.3	
Marital status								
Ever married	286	5	1.7	> .05	323	2	0.6	> .05
Never married	74	0	0.0		37	1	2.7	
Literacy								
Illiterate/No schooling	57	1	1.8	> .05	82	0	0.0	> .05
Formal school	303	4	1.3		278	3	1.1	
Ever had sex with FSW in India								
Yes	35	1	2.9	> .05	78	2	2.6	> .05
No/Never had sex with female	325	4	1.2		282	1	0.4	
Total	**360**	**5**	**1.4**		**360**	**3**	**0.8**	
Visited Sites*								
Maharastra state (Mumbai)	133	3	2.3	> .05	123	3	2.4	> .05
Other States	85	4	4.7		125	2	1.6	

* Labor migrants had visited more than one state

No-one below the age of 24 years was found to be HIV-positive in the sample from both study sites. However, the survey results indicate high risks for those who are older - about 2.3 percent of respondents in the Western region and 1.3 percent from the Mid to Far Western region who were above 24 years were found to be HIV positive. Similarly, another high risk group appears to be those who visit FSWs in India. HIV prevalence was 2.9 percent and 2.6 percent respectively among respondents from the Western and Mid to Far Western region who ever visited FSWs in India. Moreover, the returnee migrants in the Mid to Far Western region who go to the state of Maharastra (where Mumbai is situated) may be at greater risk of becoming infected with HIV. The HIV prevalence rate among those returnee migrants who went to Maharastra was more than 2 percent in both samples (Table 4.2).

CHAPTER - V: EXPOSURE TO HIV/AIDS/STI PROGRAMS

A very small proportion of respondents in the Western region (1.9%) and a relatively higher proportion in the Mid to Far Western region (15%) had met, discussed, or interacted with peer educators (PE) or outreach educators (OE) in the last 12 month period. The respondents mentioned an array of organizations that were represented by the PE/OEs they had met or discussed HIV/AIDS issues with. Of these organizations, many respondents mentioned the Nepal Red Cross Society (NRCS). Only 1 respondent in Western and 2 in the Mid to Far Western region had visited a DIC in the last 12 month period. The organizations running these DICs were: Sathi Nepal, Navakiran Plus and NRCS (Table 5.1).

Table 5.1: Exposure and Knowledge on HIV/AIDS/STI Programs among Male Labor Migrants

Exposure and Knowledge on HIV/AIDS/STI Programs	2008			
	Western		Mid-Far Western	
	N=360	%	N=360	%
Met or discussed or interacted with Peer Educators (PE) or Outreach Educators (OE) in the Last 12 months				
Yes	7	1.9	54	15.0
No	353	98.1	306	85.0
Total	**360**	**100.0**	**360**	**100.0**
Organizations Represented by OE/PEs				
NRCS	3	42.9	23	42.6
Government	2	28.6	0	0.0
Sathi Nepal	2	28.6	1	1.9
OCWAC Nepal	0	0.0	10	18.5
Digo Bikash	0	0.0	5	9.3
Gangotri	0	0.0	4	7.4
C.D.F.	0	0.0	4	7.4
Hasti AIDS	0	0.0	2	3.7
S.A.C. Nepal	0	0.0	2	3.7
N-SARC	0	0.0	1	1.9
Others	1	14.3	4	7.4
Don't Know	1	14.3	1	1.9
Total	**7**	*****	**54**	*****
DIC Visit in the Last 12 months				
Yes	1	0.3	2	0.6
No	359	99.7	358	99.4
Total	**360**	**100.0**	**360**	**100.0**
Name of Organizations that Run DIC/s Visited by Them				
Sathi Nepal	1	100.0	0	0.0
NRCS	0	0.0	1	50.0
Nawakiran Plus	0	0.0	1	50.0
Total	**1**	*****	**2**	*****

Similarly, 1.7 percent from the Western and 4.2 percent from the Mid to Far Western region had visited an STI clinic in the past 12 month period. Most of the respondents from both regions had visited private health facilities such as private clinic, nursing home/hospital or pharmacy. Five respondents in the Mid to Far Western region had visited a government hospital or health post. One respondent each from the Western and Mid to Far Western region had visited AMDA Nepal and NRCS. One respondent in Western region and 10 in the Mid to Far Western region had visited a VCT centre in the last 12 month period. These respondents had visited VCT centres in both Nepal and India (Table 5.2).

Table 5.2: Visits to the VCT Centres and clinics by Male Labor Migrants

	2008			
	Western		Mid-Far Western	
Visited any STI Clinic in the Last 12 months				
Yes	6	1.7	15	4.2
No	354	98.3	345	95.8
Total	**360**	**100.0**	**360**	**100.0**
Name of Organizations that Run STI Clinic Visited by Them				
Personal Source (Pvt. Clinic, Pharmacy, Medical College)	5	83.3	9	60.0
AMDA	1	16.7	0	0.0
Hospital/Health Post	0	0.0	5	33.3
NRCS	0	0.0	1	6.7
Total	**6**	*	**15**	*
Visited VCT Centre in the Last 12 months				
Yes	1	0.3	10	2.8
No	359	99.7	350	97.2
Total	**360**	**100.0**	**360**	**100.0**
Name of the Organization that run the VCTs Visited by Them				
Tata Institute of Society	1	100.0	0	0.0
Hasti AIDS	0	0.0	3	30.0
NRCS	0	0.0	2	20.0
C. D. F.	0	0.0	1	10.0
OCWAC Nepal	0	0.0	1	10.0
NawaKiran Plus	0	0.0	1	10.0
Reliance Bharat	0	0.0	1	10.0
Hospital	0	0.0	1	10.0
Total	**1**	*	**10**	*

Results further shows that very small numbers of respondents in both regions (4 in Western and 19 in the Mid to Far Western regions) had ever participated in an HIV/AIDS awareness raising program or community event in the last 12 months. The respondents in the Western region had participated in HIV/AIDS-related training, Condom Day celebrations, HIV/AIDS-related workshops and condom use demonstrations. In the Mid to Far Western region, most of the respondents had participated in street dramas, group discussions, and AIDS Day celebrations. NRCS and OCWAC were mentioned by most respondents as the organizations that conducted these activities (Table 5.3).

Table 5.3: Participation of Male Labor Migrants in Awareness Raising Program

	2008			
	Western		Mid-Far Western	
Ever Participated in HIV/AIDS Awareness Raising Program or Community Events in the Last 12 Months				
Yes	4	1.1	19	5.3
No	356	98.9	341	94.7
Total	**360**	**100.0**	**360**	**100.0**
Activities Participated in				
HIV/AIDS related training	2	50.0	2	10.5
Condom Day	1	25.0	1	5.3
HIV/AIDS related Workshops	1	25.0	1	5.3
Condom use demonstrations	1	25.0	1	5.3
Street drama	0	0.0	9	47.4
Group discussions	0	0.0	8	42.1
AIDS Day	0	0.0	5	26.3
Others	0	0.0	1	5.3
Total	**4**	*	**19**	*
Name of the Organizations that Organized Such Activities				
NRCS	3	75.0	10	52.6
OCWAC Nepal	0	0.0	1	5.3
Others	1	25.0	9	47.4
Don't Know	1	25.0	1	5.3
Total	**4**	*	**19**	*

No-one from the Western region and the great majority (96.4%) of respondents from the Mid to Far Western region had never met CHBC workers in their house in the last 12 month period. The organizations represented by OEs/PEs who had met the respondents from the Mid to Far Western region in their house include: NRCS, OCWAC Nepal and Gangotri (Table 5.4).

Table 5.4: Interaction of Male Labor Migrants with CHBC Health Workers

Interaction of Male Labor Migrants	2008			
	Western		Mid-Far Western	
Ever Met CHBC Health Workers in the house in the Last 12 months				
Yes	0	0.0	13	3.6
No	360	100.0	347	96.4
Total	**360**	**100.0**	**360**	**100.0**
Organizations Represented by OE/PEs				
NRCS	-	-	4	30.8
OCWAC Nepal	-	-	3	23.1
Gangotri	-	-	3	23.1
Others	-	-	2	15.4
Don't Know	-	-	1	7.7
Total	**-**	**-**	**13**	*****

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

CHAPTER - VI: COMPARATIVE ANALYSIS OF 2006 AND 2008 IBBS RESULTS

The 2008 study on labor migrant workers included the same questionnaire that was used in the 2006 study. This chapter presents a comparative analysis of selected information on labor migrants such as socio-demographic characteristics, migration history, sexual behavior, and use of condoms.

6.1 Socio-demographic Characteristics

By age, comparatively older labor migrants were represented in the 2008 study. In 2006, just over half of the respondents were aged 25 years or more in both regions, while over 60 percent of respondents were represented in this age group in 2008. The median age of the respondents from both regions in 2008 was higher by about 2 years. Similarly, the percentage of illiterate respondents from both regions was slightly higher in 2008. Consequently, the percentage of respondents from both regions who had attained Grades 6 – 9 has declined in 2008. As in the 2006 round, in the 2008 round a higher percentage of labor migrants were from the Brahmin, Chhetri/Thakuri, Dalit (Damai, Sarki, Kami), and Tharu ethnic/caste groups. In the 2008 round, the percentages of labor migrants from the Chhetri/Thakuri and Tharu ethnic/caste groups had slightly increased while the share of labor migrants from the Terai caste groups had declined (Table 6.1).

Table 6.1: Socio-Demographic Characteristics of Respondents, 2006 and 2008

Characteristics	2006				2008			
	Western		Mid-Far Western		Western		Mid-Far Western	
Age of Respondents								
Below 25 years	167	46.3	164	45.5	139	38.7	122	33.8
25 years or above	193	53.7	196	54.4	221	61.4	238	66.1
Range	-	18-49 years	-	18-48 years	-	18-49 years	-	18-49 years
Mean/Median Age:	-	27.8/25.0	-	27.7/26.0	-	29.6/27.0	-	29.2/28.0
Total	360	100.0	360	100.0	360	100.0	360	100.0
Education								
Illiterate	27	7.5	51	14.2	38	10.6	67	18.6
Literate, no schooling	17	4.7	10		19	5.3	15	4.2
Grade 1 – 5	132	36.7	122	33.9	140	38.9	131	36.4
Grade 6 – 9	156	43.3	148	41.1	112	31.1	128	35.6
SLC and Above	28	7.8	29	8.1	51	14.2	19	5.3
Ethnic/Caste Group								
Brahmin	85	23.6	49	13.6	80	22.2	28	7.8
Damai/Sarki/Kami	73	20.3	104	28.9	82	22.8	102	28.3
Magar	51	14.2	30	8.3	55	15.3	17	4.7
Chhetri/Thakuri	48	13.3	119	33.1	52	14.4	150	41.7
Terai Caste	41	11.4	12	3.3	25	7.0	7	2.0
Musalman	21	5.8	3	0.8	14	3.9	4	1.1
Tharu	5	1.4	37	10.3	13	3.6	44	12.2
Others (Dhobi, Sunwar, Sundi, Rajbhar, Gaderi/Pal, Newar, Tamang etc)	23	10.1	4	1.7	39	10.8	8	2.4
Marital Status								
Married	259	71.9	303	84.2	281	78.1	317	88.1
Divorced/Separated/widow	8	2.2	11	3.1	5	1.4	6	1.6
Never Married	93	25.8	46	12.8	74	20.6	37	10.3
Currently Living With								
With Wife	257	71.4	303	84.2	275	76.4	316	87.8
With Parents	94	26.1	54	15.0	75	20.8	40	11.1
With Others (children, alone, relatives)	9	2.5	3	0.9	6	2.3	4	1.1
No Response	0	0.0	0	0.0	4	1.1	0	0.0

In 2008, the share of married labor migrants from the Western and Mid to Far Western regions had slightly increased. The proportions of both widowed/separated and the never married groups of respondents from both regions had declined. The great majority of respondents were currently living with their wife (76.4% in Western and 87.8 in the Mid to Far Western samples). Their share has slightly increased while those living with their parents had declined in 2008 (Table 6.1).

6.2 Migration History

In the 2008 round too, the great majority of labor migrants (89% in Western and in 81% the Mid to Far Western samples) reported that they had first migrated when they were below 25 years of age. The proportion of respondents from the Mid to Far Western region who had first migrated before they were 25 years, however, had slightly declined in 2008. Similarly, as in the 2006 round, over two-thirds of the labor migrants had stayed in India for 2 years or longer. Coincidentally, their share in the total sample population (78% in Western and 66% in the Mid to Far Western samples) remained unchanged in the 2008 round as well (Table 6.2).

Table 6.2: Male Labor Migrant's Age at First Migration and Duration of Stay in India, 2006 and 2008

Characteristics	2006				2008			
	Western		MidFar Western		Western		Mid-Far Western	
Age at First Migration								
Below 25 years	319	88.6	310	86.2	319	88.6	290	80.5
Above 25 years	41	11.5	50	14	41	11.3	70	19.5
Range Age	--	7 - 44 years	--	10 - 40 years	--	9 - 43 years	--	7 - 46 years
Mean/Median	-	18.6/18.0	-	19.8/19.0	-	18.7/18.0	-	20.1/18.0
Duration of Stay in India								
Less than 12 months	33	9.2	66	18.4	38	10.6	70	19.5
13 – 24 months	43	11.9	60	16.7	41	11.4	53	14.7
25 and above months	284	78.9	234	65.0	281	78.1	237	65.8
Total	**360**	**100.0**	**360**	**100.0**	**360**	**100.0**	**360**	**100.0**

6.3 Sexual Experience

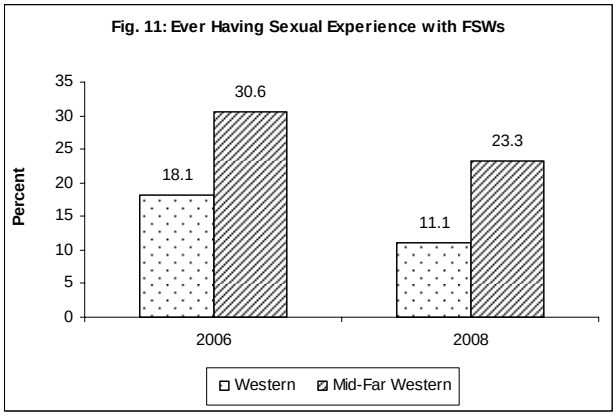
The great majority of labor migrants (87% in the Western and 96% in the Mid to Far Western samples) in both rounds reported ever having had sex with a female. In 2008 however, the proportion of respondent ever having sex with a female had slightly declined, particularly among those from the Western region. Comparatively, a lower proportion of labor migrants from both regions in the 2008 round reported their first sexual encounter as having occurred below the age of 19 years. A slightly higher proportion of respondents from both the Western and Mid to Far Western regions in the 2008 round reported that they had their first sexual encounter at 20 years or more. The reported age at first marriage in both regions was similar in the 2006 and 2008. The median age at first marriage of labor migrants from both regions were the same in both rounds (Table 6.3).

Table 6.3: Sexual Behavior of Male Labor Migrants, 2006 and 2008

	2006				2008			
	Western		Mid-Far -Western		Western		Mid-Far –Western	
Ever had sex with a female	330	91.7	347	96.4	313	86.9	345	95.8
Total	267	100.0	314	100.0	286	100.0	323	100.0
Age at First Sex								
Less than 19 years	209	63.4	260	74.9	171	54.7	234	67.8
20 – 24	94	28.5	78	22.5	111	35.5	93	27.0
25 years and above	27	8.2	9	2.6	31	9.9	16	4.6
Never had sex with Female	30	8.3	13	3.6	47	13.1	15	4.2
Range	-	Oct-35	-	28-Oct	-	Dec-32	-	12 – 29
Mean/Median	-	19.0/18.0	-	17.9/18.0	-	19.4/19.0	-	18.4/18.0
Age at First Marriage								
Below 15 years	8	3.0	12	3.8	19	6.6	11	3.4
15-19	104	39.0	171	54.5	114	39.9	171	52.9
Above 20 years	155	58.1	131	41.7	153	53.5	141	43.6
Range	-	11 - 35	-	10 - 34	-	6 - 35	-	9 - 37
Mean/Median	-	20.7/20.0	-	19.3/19.0	-	20.1/20.0	-	19.5/19.0
Total	**360**	**100**	**360**	**100**	**360**	**100**	**360**	**100**

6.4 Sexual Behavior

The 2008 result shows an encouraging scenario in terms of labor migrant's sexual behavior. Comparatively, lower proportions of respondents from the Western (11.1%) and Mid to Far Western (23.3%) regions in the 2008 round reported ever having had sex with a female sex worker (Fig. 11).



The results in terms of HIV-preventive behavior were not so encouraging. The number of sexual encounters with female sex workers in India was reported as low. The use of a condom in their last sex act in India with a sex worker, however, was also low in 2008 compared to the 2006 round. Similarly, the proportion of labor migrants from both regions who had ever had sex with a female sex worker in Nepal had declined in the 2008 round. As was the case with condom use with FSWs in India, the reported use of condoms in the last sex act with a female sex worker in Nepal was also low in 2008 (Table 6.4).

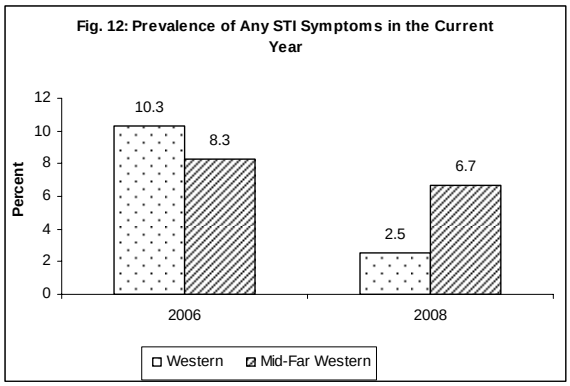
Table 6.4: Sexual Encounter of Male Labor Migrants with FSWs in Nepal, 2006 and 2008

Description	2006				2008			
	Western		Mid- Far -Western		Western		Mid- Far – Western	
Ever Had Sex with a Sex Worker in India	62	17.2	97	26.9	35	9.7	78	21.7
Use of Condom During the Last Sex with FSWs in India *	7	11.3	22	22.7	4	11.4	12	16.7
Ever had sex with FSWs in Nepal	13	3.6	29	8.1	9	2.5	23	6.4
Use of Condom During the Last Sex with FSWs in Nepal **	8	61.5	8	27.6	4	44.4	2	8.7
Total	**360**	**-**	**360**	**-**	**360**	**-**	**360**	**-**

* Among those who ever had sex with FSWs in India
** Among those who ever had sex with FSWs in Nepal

6.5 Prevalence of STI Symptoms

The results of both 2006 and 2008 showed different type of STI symptoms prevalent among the labor migrants. Some of these reported symptoms include: 'burning sensation while urinating', 'ulcer or sore around the genital area', 'white/pus discharge' and 'pain during urination'. The 2008 IBBS results also show the prevalence of these symptoms among the labor migrants. The reported prevalence of any of the STI symptoms, however, was low in both the Western and Mid to Far Western regions in 2008 compared to 2006 (Fig. 12).



6.6 Proper Knowledge on Protection from HIV Infection

The results of 2008 round shows a slight decline among the respondents in the Western region regarding the knowledge on abstinence **('A')** as one of the ways of protecting oneself from HIV infection, while the proportion of respondents having this knowledge has slightly increased in the Mid to Far Western region. The knowledge regarding monogamous sexual relations **('B')** has remained the same in both rounds in the Western region as well as in the Mid to Far Western region (70%). Knowledge on consistent use of condoms as protection against HIV infection has slightly increased, from 78.9% to 82.8% in the Western region, while it has remained the same in the Mid to Far Western region between the two periods. Similarly, in the Western region, knowledge that 'a healthy looking person can be affected with HIV' **(D)** has increased by 10 percentage points in 2008 (Table 6.5).

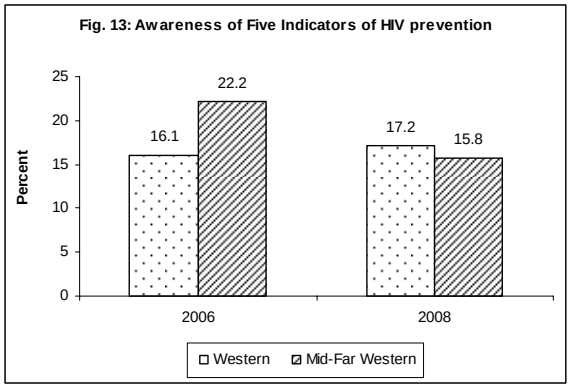
Table 6.5: Percentage of Male Labor Migrants with Proper Knowledge of HIV/AIDS, 2006 and 2008

Proper Knowledge of HIV/AIDS	2006				2008			
	Western		Mid -Far Western		Western		Mid- Far Western	
	N=360	%	N=360	%	N=360	%	N=360	%
A Can protect themselves through abstinence from sexual contact	238	66.1	220	61.1	225	62.5	231	64.2
B Can protect themselves through monogamous sexual relations	257	71.4	256	71.1	259	71.9	258	71.7
C Can protect themselves through condom Use every time during sex	284	78.9	280	77.8	298	82.8	279	77.5
D A healthy-looking person can be infected with HIV	277	76.9	286	79.4	313	86.9	282	78.3
E A person can not get the HIV virus from mosquito bite	94	26.1	113	31.4	107	29.7	121	33.6
F Can not get HIV by sharing a meal with an HIV infected person	180	50.0	220	61.1	203	56.4	219	60.8
Knowledge of all the three –**ABC**	176	48.9	161	44.7	167	46.4	172	47.8

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

As in the 2006, the percentage of respondents having knowledge that 'a person can not get HIV virus from mosquito bite' **('E')** remained low (29.7% in Western and 33.6% in the Mid to Far Western samples) in the 2008 round as well. A very small increase is observed in 2008 regarding this knowledge in both regions. Some change, though not very significant, is observed regarding the knowledge that 'a person can not get HIV by sharing a meal with an HIV infected person **('F').** Knowledge of all three indicators **('ABC')** has slightly decreased in the Western region while it has increased in the Mid to Far Western region between the two rounds**.**

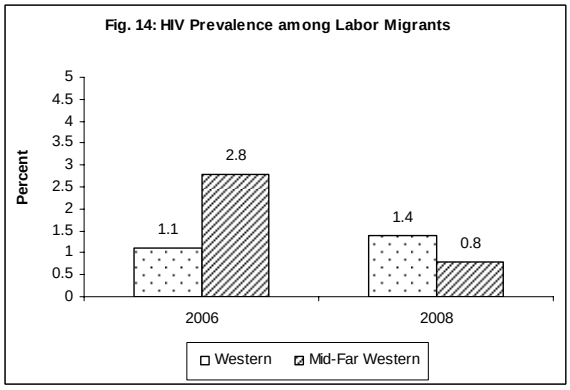
Similarly, the awareness of all five major knowledge indicators **('BCDEF')** has remained low in both regions in 2008. In the Western region, the knowledge of all five indicators had increased by about 1 percent. In the Mid to Far Western region, however, the knowledge had declined by about 7 percentage points (Fig. 13).



The overall comparison thus shows that there has not been much improvement in the proper knowledge regarding the protection against HIV infection among the labor migrants in both regions.

6.7 HIV Prevalence

The 2008 study result shows a slight increase in the HIV prevalence among the labor migrants in the Western region. The prevalence, however, has declined in the Mid to Far Western region in the same period (Fig. 14).



As in the 2006 round in the Western sample, no significant association of HIV infection with any of the five variables presented in Table 6.6 was found in 2008. In this region in the 2006 round, significant association was observed between HIV and place visited by the respondents in India. Similarly, unlike in the 2006 round, significant association at a 5 percent level between HIV and the age of the respondent (less than 24 years) from the Mid to Far Western region was not found. However, the results of both rounds indicate high risks for those who are older in age, who visit FSWs in India, and who go to Maharastra State of India (Table 6.6).

Table 6.6: Relationship between Socio-Demographic Characteristics and HIV Infection

Characteristics	2006								2008							
	Western				Mid/Far Western				Western				Mid/Far Western			
	Total	HIV +	%	p value	Total	HIV+	%	p value	Total	HIV+	%	p value	Total	HIV+	%	p value
Age																
Below 25 years	167	1	0.6	>.05	164	1	0.6	<.05	139	0	0.0	> .05	122	0	0.0	> .05
25 years and Above	193	3	1.6		196	9	4.6		221	5	2.3		238	3	1.3	
Marital status																
Ever married	267	3	1.1	>.05	314	10	3.2	>.05	286	5	1.7	> .05	323	2	0.6	> .05
Never married	93	1	1.1		46	0	0.0		74	0	0.0		37	1	2.7	
Literacy																
Illiterate/No schooling	44	1	2.3	>.05	61	2	3.3	>.05	57	1	1.8	> .05	82	0	0.0	> .05
Formal school	316	3	0.9		299	8	2.7		303	4	1.3		278	3	1.1	
Ever had sex with FSW in India																
Yes	62	2	3.2	> .05	97	8	8.2	< .01	35	1	2.9	> .05	78	2	2.6	> .05
No/Never had sex with female	298	2	0.7		263	2	0.8		325	4	1.2		282	1	0.4	
Total	**360**	**4**	**1.1**		**360**	**10**	2.8		**360**	**5**	**1.4**		**360**	**3**	**0.8**	
Visited Sites*																
Maharastra state (Mumbai)	142	4	2.8	> .05	156	8	5.1	< .05	133	3	2.3	> .05	123	3	2.4	> .05
Other States	257	4	1.6		208	3	1.4		85	4	4.7		125	2	1.6	

* Labor migrants had visited more than one state.

CHAPTER - VII: CONCLUSIONS AND RECOMMENDATIONS

7.1 Conclusions

Socio-demographic Characteristics

- The proportion of migrants in the age groups 18-19 and 20-24 years was slightly higher in the Western region, while the proportion of migrants in the age groups of 25-29 and 30-34 years was higher in the Mid to Far Western region. Overall, the median age of the respondents in Mid to Far Western region was higher by 1 year (28 years) than in the Western region (27 years).

- The proportion of illiterate migrants was noticeably higher (18.6%) in the Mid to Far Western region compared to the same in the Western region (10.6%). Not much difference was observed in the education attainment among the respondents from the two regions.

- Nearly all major caste/ethnic groups were represented from both regions in the 2008 IBBS. Comparatively, the representation of the Dalit population (22.8% in Western and 28.3% in the Mid to Far Western samples) and the Tharu population (3.6% in Western and 12.2% in the Mid to Far Western samples) was high in the Mid to Far Western region.

- Nearly 8 in every 10 respondents in the Western region and nearly 9 in every 10 respondents in the Mid to Far Western region were currently married. About 21 percent of the respondents in the Western region reported never having been married while the proportion of the same was just half (10.3%) in the Mid to Far Western region. The great majority of the respondents (76.4% in the Western and 87.8% in the Mid to Far Western region) were currently living with their wife.

Migration History

- The place of destination in India for the majority of labor migrants from the Western region was Maharastra (36.9%) and Delhi (43.9%). The main concentration of labor migrants from the Mid to Far Western region was Maharastra (34.2%) and Gujarat (23.1%) states in India. A higher percentage of respondents from this region had also gone to other states in India, including, Uttaranchal Pradesh (20.3%), and Himanchal Pradesh (17.8%).

- Most labor migrants migrate to India at a very young age. Nearly 70 percent in the Western region and about 60 percent respondents from the Mid to Far Western region had first migrated to India when they were still in their teens. The median age at first migration in both regions was 18 years.

- Mostly, the labor migrants stay with friends or relatives while they live and work in India. More than a half (54.2%) and another quarter (28.9%) of the respondents from the Western region had lived with relatives and friends respectively in their last stay in India. Similar living arrangements in India were reported by the respondents from Mid to Far Western region as well.

- The income of the majority of respondents from both regions, irrespective of their place of destination, ranged between NRs. 1 to 5 thousand (53.3% in Western and 61.1% in the Mid to Far Western samples) and NRs. 5 to 10 thousand (34.7% in Western and 40.8% in the Mid to Far Western samples) per month.

- The labor migrants seldom visit different district/places in Nepal for work. Only about 4% each of the respondents from the two regions had visited other districts in Nepal for work.

Marriage and Sexual Behavior

- The great majority of the labor migrants had first got married by the age of 24 years. In the Western region, 4 out of 10 labor migrants reported first getting married at the ages of 15-19 and again, 4 out of 10 reported first getting married at 20-24 years. In the Mid to Far Western region, however, slightly more than half and more than one-third respectively had got married at the ages of 15-19 and 20-24 years.

- Over 8 in 10 respondents in the Western region and over 9 in 10 in the Mid to Far Western region reported ever having had sex with a female. For the great majority (greater than 85%) of respondents in both regions, their first sexual encounter was when they were 15-19 or 20-24 years. The median age of the respondents at their first sexual encounter was 1 year lower (19 and 18 years respectively in the Western and Mid to Far Western regions) than their age at marriage.

- The numbers of female sex workers visited in Nepal by the respondents in the Western region was reported to be low compared to those in the Mid to Far Western region. The mean number of female sex workers visited in Nepal by the respondents was 2.1 in the Western region while the same was 5.3 in the Mid to Far Western region.

- A large percentage of the currently married respondents, 76 percent in the Western and 88 percent in the Mid to Far Western region, reported having had sex with their wife in the past 1 year. The use of condoms during the last sex act with labor migrants' wives was low. Only 11 percent and 15 percent of respondents respectively in the Western region and the Mid to Far Western region reported using a condom during the last sex act with their wife. The great majority of respondents in the Western region (77.4%) and in the Mid to Far Western region (63.5%) had never used a condom with their wife in the same period. Over half of the respondents in the Western region and the Mid to Far Western region (55.8% in Western and 56.4% in the Mid to Far Western samples) reported not having used a condom because they 'didn't think it was necessary/didn't think of it'.

- Sexual relationships with girlfriends were not very common among the labor migrants. Of all the respondents, 10% percent in the Western region and about 7 percent in the Mid to Far Western region have had sex with a girlfriend in the past 1 year. Comparatively low percentages of respondents in the Western region (41.7%) compared to the Mid to Far Western region (64%) reported having used a condom in the last act of sex with their girlfriend. Consistent use of condoms with girlfriends was low among the respondents, as less than half (41.7% in Western and 48% in the Mid

to Far Western samples) in both regions reported using a condom every time they had sex in the past year.

- Small numbers of labor migrants in the Western (2.8%) and the Mid to Far Western region (3.1%) had had sex with other female partners in the past year. Only 20 percent of respondents in the Western region compared to about half (54.5%) in the Mid to Far Western region had used condoms with the other female sex partners in the past year.

- 'Non-availability', 'didn't like to use it', and 'didn't think it was necessary/didn't think of it' were the reasons given by higher numbers of respondents for not using a condom every time they had sex with other female sex partners.

Sexual Contact with Female Sex Workers in India

- The numbers of respondents having sexual contact with female sex workers in India was high. Nearly 10 percent in the Western region and 22 percent of respondents in the Mid to Far Western region reported ever having sex with female sex workers in India. The mean number of FSWs visited in the past year in India by the respondents from the Mid to Far Western region was 4.2 FSWs and for respondents from the Western region the number was 1.4 FSWs.

- All respondents from both regions had sex either 8-12 weeks or more than 12 weeks before the survey date. Moreover, most of the respondents from both regions had met the last FSW in India at a brothel or a hotel/lodge. Most of these respondents (80% in Western and 67% in the Mid to Far Western samples) had used a condom in the last sex act with a FSW.

- Sex with girlfriends was not very common among the labor migrants as only about 2 percent in the Western region and 3 percent in the Mid to Far Western region reported having had sex with a girlfriend in the past year. Use of condoms by the respondents with girlfriends was moderately high.

Availability of Condoms

- Of all respondents in the sample, over 8 in 10 respondents in both regions knew that condoms are available at health posts or health centres. The great majority of the respondents (77.5% in Western and 69.4% in the Mid to Far Western samples) in both regions were aware that condoms were also available in pharmacies.

- The great majority of the respondents (87% in Western and 75% in the Mid to Far Western samples) in both regions usually obtained free condoms from health posts/health centres. A noticeably high proportion of respondents, especially those from the Mid to Far Western region (17.4% in Western and 39.4% in the Mid to Far Western samples) usually obtained free condoms from FCHVs.

Knowledge of HIV/AIDS

- Nearly all respondents (98.6%) in the Mid to Far Western region and slightly less percentage (95.8%) in the Western region had heard about HIV/AIDS. The radio remains the main source of information (63.6% in Western and 72.2%in the Mid to Far Western samples) for HIV/AIDS in both of the study regions.

- Community networks also appear to be an important source of information for HIV/AIDS, as a high proportion of respondents in Western (57.8%) and Mid to Far Western region (61.4%) mentioned friends/neighbors/relatives as the source of information on HIV/AIDS.

- Nearly half of the respondents (48.6%) in the Western region and over two-thirds (68.1%) in the Mid to Far Western region were aware that one should 'avoid unsafe sex and use a condom'. A higher percentage of respondents were also aware that 'HIV/AIDS is transmitted through blood' (23.9% in Western and 30.6% in the Mid to Far Western samples), and that one should 'avoid using a needle/syringe used by others' (23.9% in Western and 27.2% in the Mid to Far Western samples).

Knowledge and Treatment of Sexually Transmitted Infections (STIs)

- About 4 in 10 respondents (41.4%) in the Western region and slightly more than one-third (35.6%) in the Mid to Far Western region understood HIV/AIDS as one form of STI. Similarly, about one-quarter each (24.7% in Western and 28.3% in the Mid to Far Western samples) from both regions regarded Syphilis (*Bhiringi)/*Gonorrhea as an STI.

- About 9 in 10 respondents in both the Western (95.8%) and Mid to Far Western region (90%) had not suffered from any of the symptoms of STIs in the past year. The prevalence of STI symptoms in the past year was more pronounced among the respondents in the Mid to Far Western region.

- The health services seeking behavior of the labor migrants was poor. Only about half of the respondents of those who had developed any of the symptoms of STIs (53.3% in Western and 47.2% in the Mid to Far Western samples) in both regions had sought/received treatment for STI symptoms in the past year. Most of the respondents in the Western (6/8) and in the Mid to Far Western region (8/17) had sought treatment in private clinics.

- More respondents in Mid to Far Western region (6.7%) compared to those in the Western region (2.5%) reported experiencing one or more STI symptoms in the current year.

- About half of the respondents (47.5%) in the Western region and nearly one-third (31.1%) in the Mid to Far Western region were aware of the availability of confidential HIV testing facilities in the community. Of these, about 8 percent and 12 percent of respondents from the Western region and the Mid to Far Western region respectively had undergone HIV testing in the past.

Use of Alcohol and Drugs

- Use of alcohol among the labor migrants is common. In the survey, nearly 7 in 10 labor migrants (64% in Western and 72% in the Mid to Far Western samples) from both regions reported consuming alcohol during past 1 month. Of these, a higher percentages of respondents reported consuming alcohol 2-3 times a week (21% in Western and 25% in the Mid to Far Western samples) and less than once a week (21% in Western and 25% in the Mid to Far Western samples) in the past month in both regions. A small proportions of respondents reported having used drugs in the past month.

Proper Knowledge of HIV/AIDS

- Proper knowledge regarding 'consistent condom use' (82.8% in Western and 77.5% in the Mid to Far Western samples) and that a 'healthy-looking person can be infected with HIV' (86.9% in Western and 78.3% in the Mid to Far Western samples) was slightly higher in the Western region. Similarly, over half of respondents in the Western region and 60 percent of respondents in the Mid to Far Western region knew that 'one cannot get HIV by sharing a meal with an HIV-infected person'. Only about half of the respondents (46.4% in Western and 47.8% in the Mid to Far Western samples) in both regions knew of all three '**ABCs**'. Moreover, less than one-fifth of the respondents (17.2% in Western and 15.8% in the Mid to Far Western samples) in both regions knew of all five major indicators '**BCDEF'**.

- More than half of the respondents in both regions knew someone infected with HIV or who had died of AIDS. Higher percentages of respondents in the Mid to Far Western region (21.7%) compared to the Western region (7.9%) reported having a close relative infected with HIV or who had died of AIDS. About 10 percent each of the respondents in both regions had a close friend infected with HIV or who had died of AIDS. A large proportion of respondents in both regions (79.5% in Western and 67.4% in the Mid to Far Western samples) knew someone who was infected with HIV or who had died of AIDS.

- A large proportion of respondents in both regions (greater than 90%) were aware that 'use of a previously used needle/syringe' and 'blood transfusion from an infected person' can transmit the HIV virus from one person to another. The knowledge that 'one cannot get HIV by holding an HIV-infected person's hand' and 'a pregnant woman infected with HIV/AIDS can transmit the virus to her unborn child' was high (greater than 80%) among the respondents in both regions.

- Eighty-five percent of the respondents in Mid to Far Western region and 78 percent in the Western region were willing to take care of a male relative with HIV in their household. The respondents also expressed the same level of willingness to take care of a female relative infected with HIV. The willingness of respondents to maintain confidentiality of an HIV-positive family member, however, was relatively low (32.2% in Western and 46.7% in the Mid to Far Western samples) in both regions.

HIV Prevalence

- The blood samples were drawn from 360 returnee migrants from each of the two regions participating in the study. Of these, 5 (1.4%) in the Western region and 3 (0.8%) in the Mid to Far Western region were tested positive for HIV. In the Mid to Far Western sample, *sexual exposure to female sex workers in India had significant association with HIV infection* to at least a 5 percent significance level.

- The survey results also indicated high risks for those who are older: those above 24 years of age, who visit FSWs in India, and those who go to Maharastra State may be at a greater risk of HIV infection.

Exposure to HIV/AIDS/STI Programs

- A very small proportion of respondents in the Western region (1.9%) and a relatively higher proportion in the Mid to Far Western region (15%) had met, discussed, or interacted with peer educators (PEs) or outreach educators (OEs) in the last 12 month period.

- A small percentages of respondents (1.7% in Western and 4.2% in the Mid to Far Western samples) from the Western and Mid to Far Western region had visited an STI clinic in the past 12 months. Most of these respondents from both regions had visited private health facilities such as private clinics, nursing homes/hospitals or pharmacies.

- A very small number of respondents in both regions (4 in the Western region and 19 in the Mid to Far Western region) had ever participated in HIV/AIDS awareness-raising programs or community events in the last 12 months.

- No-one from the Western region and the great majority (96.4%) of respondents from the Mid to Far Western region had never met CHBC workers in their house in the last 12 month period.

Comparative Analysis of 2006 and 2008 IBBS results

- Labor migrants were comparatively older in the 2008 round of the IBBS. In 2006, just over half of the respondents were aged 25 years or higher in both regions while over 60 percent of respondents were represented in this age group in the 2008 IBBS. The median age of the respondents from both regions in 2008 was higher by about 2 years.

- The percentage of illiterate respondents from both regions was slightly higher (7.5% in Western and 14.2% in the Mid to Far Western samples in 2006) than in 2008 (10.6% in Western and 18.6% in the Mid to Far Western samples). Higher percentages of labor migrants were from the Dalit (Damai, Sarki, Kami), Chhetri/Thakuri, Brahmin, and Tharu ethnic/caste groups in the 2008 round as well.

- In the 2008 round, the share of married labor migrants from the Western and Mid to Far Western regions had increased slightly (from 71.9% in Western and 84.2% in the Mid to Far Western samples in 2006 to 78.1% in Western and 88.1% in the Mid to Far Western samples in 2008). The great majority (76.4% in Western and 88% in Mid to Far Western samples) of these respondents were currently living with their wives.

- In 2008, the proportion of respondents ever having had sex with a female had declined slightly, particularly among those from the Western region. Comparatively, a lower proportion of labor migrants from both regions in the 2008 round reported having their first sexual encounter below the age of 19 years. The median age at first marriage of labor migrants from both regions was the same (19 years in Western and 20 years in the Mid to Far Western samples) in both rounds.

- A lower proportion of respondents from the Western region (11.1%) compared to those in the Mid to Far Western (23.3%) region in the 2008 round reported ever having sex with a female sex worker. The proportion of labor migrants from both regions who ever had sex with a female sex worker in Nepal had declined in the 2008 round (from 3.6% in Western and 8.1% in the Mid to Far Western samples in 2006 to 2.5% in Western and 6.4% in the Mid to Far Western samples in 2008). Reported sexual encounters with a female sex worker in India and the use of condoms (4/35 in Western and 12/78 in the Mid to Far Western samples) in their last sex act was low in the 2008 round of the IBBS. The reported use of condoms in last sex act with a female sex worker in Nepal in 2008 IBBS was also low (4/9 in Western and 2/23 in the Mid to Far Western samples).

- A slight increase was seen among the respondents in the Western region (from 66.1% in 2006 to 62.5% in 2008) and in the Mid to Far Western region (from 61.1% in 2006 to 64.2% in 2008) regarding the knowledge on abstinence **('A')** as one of the ways of protecting oneself from HIV infection.

- The knowledge regarding monogamous sexual relations **('B')** had remained at same level (70%) in both rounds of the IBBS in the Western region as well as in the Mid to Far Western region.

- Knowledge on the consistent use of condoms **('C')** to protect oneself from HIV infection had slightly increased (from 78.9% to 82.8%) in the Western region while it remained same (78%) in the Mid to Far Western region between the two periods.

- In the Western region, knowledge that 'a healthy looking person can be affected with HIV' **('D')** had increased by 10 percentage points in 2008.

- The percentage of respondents who knew that 'a person cannot get the HIV virus from a mosquito bite' **('E')** remained low (29.7% in Western and 33.6% in the Mid to Far Western samples) in the 2008 round as well. Nevertheless, a small increase was observed in 2008 regarding this knowledge in both regions.

- Some changes, though not very significant, were observed regarding the knowledge that 'a person cannot get HIV by sharing a meal with an HIV-infected person **('F')**. Knowledge of all three indicators (**'ABC'**) had slightly declined in the Western region while it had increased in the Mid to Far Western region between the two rounds of IBBS. Similarly, in the 2008 round, the knowledge of all five major indicators (**'BCDEF'**) had remained low in both regions (17.2% in Western and15.8% in the Mid to Far Western samples).

7.2 Recommendations

1. Sex with girlfriends, other females, and with sex workers is prevalent among the labor migrants. In the 2008 round, a high percentage of labor migrants reported having sex with sex workers in India. This is a high-risk behavior in the context of the high prevalence of HIV among the female sex workers in India and Nepal. The labor migrants should therefore be educated on the high risk they are putting themselves and their family at. Thus, the community-focused HIV prevention programs should address this issue by implementing behavior change communication through inter-personal communication and mass media.

2. The consistent use of condoms is very low among the respondents of both regions. High percentages of them had not consistently used condoms when they have had sex with sex workers. The labor migrants also do not use condom with their wives. Most of them stated that they 'didn't think it was necessary/didn't think of it' as the reason for not using condoms. Such behavior not only exposes the labor migrant but also his wife to HIV infection. In this context, the program should implement an intensive education program that focuses not only the labor migrants but on their wives as well.

3. Community networks also appear to be an important information source for HIV/AIDS, as a high proportion of respondents in both regions mentioned friends/neighbors/ relatives as the source of information on HIV/AIDS. Community networks and groups should be mobilized in the migrant communities to impart information on various aspects of HIV, including ways of protection such as abstaining from sex while away from home, consistent use of condoms with wives and other sex partners, undergoing voluntary HIV testing and so on.

4. Proper knowledge of modes of transmission of HIV and means of prevention was still low among the labor migrants. For example, only about half of the respondents in both regions knew of all three '**ABCs'** and less than one-fifth of the respondents knew of all five major indicators '**BCDEF'** of HIV/AIDS. The program should address this aspect as well.

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

ANNEXES

ANNEX – 1

Indicators for Monitoring and Evaluation Framework for HIV

Prevention 1: HIV-related risk and transmission among Male Labor Migrants	**Result (N=360)**
Impact/Outcome Targets	
Percentage of migrant workers that are HIV infected (West)	1.40%
Percentage of migrant workers that are HIV infected (Far West)	0.80%
Percentage of Migrant workers that report the use of condom at last sex with FSWs (West)	66.70%
Percentage of Migrant workers that report the use of condom at last sex with FSWs (Far West)	50.0%
Percentage of Migrant workers that report the consistent condom use over the last 12 months (West)	28.65%
Percentage of Migrant workers that report the consistent condom use over the last 12 months (Far West)	5.30%
Percentage of male migrants who report commercial sex in the last year (In India) (West)	1.40%
Percentage of male migrants who report commercial sex in the last year (In India) (Far west)	5.00%
Average number of commercial sex partners in the last year (reported by male migrants) (In India) (West)	Mean 1.4
Average number of commercial sex partners in the last year (reported by male migrants) (In India) (Far west)	Mean 4.22
Percentage of migrants who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (West)	17.20%
Percentage of migrants who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (Far West)	15.80%
Output/Coverage Targets	
Percentage of Migrants reached with targeted HIV prevention (eg. BCC with OE/PE or DIC or STI Clinics or VCT or community events / trainings or drug treatment or rehabilitation) in (West)	4.40%
Percentage of Migrants reached with targeted HIV prevention (eg. BCC with OE/PE or DIC or STI Clinics or VCT or community events / trainings or drug treatment or rehabilitation) in (Far West)	21.90%
Percentage of Migrants reached with HIV prevention program (Knows where to receive HIV test result and received condom) in (West)	5.60%
Percentage of Migrants reached with HIV prevention program (Knows where to receive HIV test result and received condom) in (Far West)	8.30%
Percentage of Migrants that have received an HIV test in the last 12 months and who know their results in (West)	3.34%
Percentage of Migrants that have received an HIV test in the last 12 months and who know their results in (Far west)	6.70%

ANNEX - 2

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

Districts	Total NP/VDCs	NP/VDCs Covered	Estimated Returnee Migrants
Western			
Gulmi	79	79	9193
Kapilvastu	78	78	4619
Palpa	66	66	3100
Syangja	62	62	1919
Kaski	45	43	273
Total	**330**	**328**	**19104**
Mid to Far western			
Achham	75	75	13354
Doti	51	51	3361
Surkhet	51	51	9189
Banke	47	46	2542
Kailali	44	44	6091
Kanchanpur	20	20	2659
Total	**288**	**287**	**37196**

ANNEX - 3

Region/District Wise Number 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	Gulmi	14	632	168
	Kapilvastu	7	1243	84
	Palpa	5	230	60
	Syangja	3	148	36
	Kaski	1	34	12
Total		**30**	**2287**	**360**
Mid/Far-Western	Achham	10	1424	120
	Surkhet	8	1730	96
	Kailali	5	845	60
	Doti	3	430	36
	Kanchanpur	2	689	24
	Banke	2	574	24
Total		**30**	**5692**	**360**

ANNEX - 4

CONFIDENTIAL

National Centre for AIDS and STD Control (NCASC)
Ministry of Health and Population (MOPH), Government of Nepal

INTEGRATED BIOGICAL AND BEHAVIOUAL SURVEY (IBBS)
AMONG MALE LABOR MIGRANTS IN WESTERN TO FAR-WESTERN NEPAL -2008

Namaste! My name is ……., I am here from New ERA to collect data for a research study. This study is being conducted by New ERA and SACTS with technical assistance from Family Health International (FHI) and USAID- Nepal for the National Centre for AIDS and STD Control (NCASC), Ministry of Health and Population. As explained in the consent taking process, during this data collection, I will ask you some questions that will be about sexual behavior, use and promotion of condoms, STI/HIV/AIDS, drugs and migration pattern. I believe that you will provide correct information only. We will also draw a few drops of blood for HIV testing. If you have any STI symptoms, we will 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 blood sample. It will take about 60 minutes to complete the interview and blood sample collection.

You are free to quit the survey any time you want to. You do not have to answer questions that you do not want to answer. 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: 2065/____/_____

Definition of Respondent

"Men aged between 18 to 49 years who have gone to India for work for at least three months and have returned home within the last three years".

Name of interviewer: _____ Code No. of Interviewer: ☐☐☐☐☐

Date of Interview: 2065/____/____

Checked by the supervisor: Signature:_____ Date: 2065/_____/_____

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

1. Yes 2. No **(**Continue Interview**)**

↓

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

1.0 GENERAL INFORMATION

No.	Questions and Filters	Coding Categories	Skip To
101	Respondent ID No.	☐☐☐☐☐☐	
102	Interview Starting Time Interview Completion Time	Hr ☐☐ Min. ☐☐ Hr ☐☐ Min ☐☐	
103	Where were you born?	District_____ VDC/Municipality_____ Ward No. .....☐☐ Village/Tole_____	
104	Where do you live now? **(Name of Current Place of Residence)**	Districts: _____ VDC/Municipality: _____ Ward No. .....☐☐ Village/Tole: _____	

2.0 PERSONAL INFORMATION

201	How old are you?	Age .....☐☐ ***(write the completed years)***	
202	What is your caste? **(Write code no. as per Ethnicity/Caste Manual)**	Ethnicity/Caste_____ (Specify) Code No.....☐☐	
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 .....☐☐ ***(write the completed grade)***	
204	What is your present marital status?	Married.....1 Divorced/permanently separated .....2 Widower.....3 Never married 4	
205	How old were you when you were first married?	Age .....☐☐ ***(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 _____ 96 (Specify)	
207	How many dependents are there in your family?	Number .....☐☐	

3.0 WORK AND MIGRATION

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 Abroad	Date of Returned Back to Nepal		Months Spent in Nepal	Type of Work 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 ..... ☐☐ *(write the completed years)*	
303	Last time when you were abroad, how much did you earn per month in your last job?	Rupees ... ☐☐☐☐☐ *(If it is IC convert it into NC)*	
304	When did you last come back to Nepal? **(If less than a month, write '00')**	Months ago..... ☐☐ Don't know 98	
305	Last time when you were abroad, how often did you have drinks containing alcohol?	Every day .....1 2-3 times a week .....2 At least once a week .....3 Less than once a week .....4 Never.....5	
306	Last time when you were abroad, with whom did you live?	Alone.....1 With wife .....2 With other woman .....3 With friends .....4 With relative.....5 Others _____ 96 (Specify)	
307	Will you be going abroad again for work?	Yes .....1 No.....2 Don't know 98	
308	After your return from abroad have you ever lived in any other place in Nepal for work? **(Other place means different from currently living place where the respondent has stayed overnight)**	Yes .....1 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.

When did you go		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 have had sexual intercourse with a woman? **(If answer is 'No' Probe)**	Yes .....1 No.....2 →	525
402	How old were you at your first sexual intercourse? **(In completed years)**	Year's old .....☐☐ Don't know/can't recall 98	
403	Have you ever had sex with a sex worker? **(If answer is 'No' Probe)**	Yes .....1 No.....2 →	501

Sexual Behavior with Female Sex Workers in Nepal

404	Did you ever have had sex with a female sex worker in Nepal? **(If answer is 'No' Probe)**	Yes .....1 No.....2 →	412
405	In Nepal, about how many female sex workers did you have sex with in your lifetime?	Number .....☐☐	
406	In Nepal, did you have sex with a female sex worker in the past year?	Yes .....1 No.....2 →	412
407	During past one year, how many female sex workers did you have sexual intercourse with in Nepal?	Number .....☐☐	
408	How many times did you have sex with female sex worker in the past 12 months in Nepal?	Times.....☐☐	
409	When was the last time you had sex with a female sex worker in Nepal? **(Write '00' if the answer is less than a week)**	Weeks ago.....☐☐	

Q. N.	Questions and Filters	Coding Categories	Skip to
410	Where did you meet the female sex worker with whom you had your last sexual intercourse in Nepal?	Lodge/Hotel ..... 1 Eating-place (Restaurant) .....2 Bhatti (Liquor shop)..... 3 On the street..... 4 Forest..... 5 Workplace ..... 6 Others _____ 96 (Specify)	
411	How many rupees and/or other items did you pay that sex worker at that time? **(Ask the money spent for sexual intercourse only)**	Cash (NRs.)_____ ☐☐☐☐ Gift equivalent to _ ☐☐☐☐ Total _____ ☐☐☐☐☐ Others _____ 96 (Specify)	

Sexual Behavior with Female Sex Workers when living abroad

Q. N.	Questions and Filters	Coding Categories	Skip to
412	Did you ever have sex with female sex workers abroad? **(If answer is 'No' Probe)**	Yes .....1 No.....2 →	501
413	With about how many female sex workers have you had sex with so far when you were abroad?	Number ..... ☐☐	
414	Did you have sex with a female sex worker when abroad in the past year?	Yes .....1 No.....2 →	501
415	During the past one year how many female sex workers did you have sexual intercourse abroad?	Number ..... ☐☐	
416	During the past one year how many times did you have sex with female sex workers abroad?	Times ..... ☐☐	
417	In which places did you have sex with female sex workers during the past one year of your stay abroad?	Name of Country City/ Nearby City _____ _____ _____ _____ _____ _____	
418	When was the last time you had sex with a sex worker when you were abroad? **(Write '00' if answer is less than a week)**	Weeks ago ..... ☐☐	
419	Where did you meet that last sex worker for sexual intercourse?	Lodge/Hotel..... 1 Eating-place (Restaurant) .....2 *Bhatti* (Liquor shop)..... 3 On the street..... 4 Forest..... 5 Brothel..... 6 Workplace ..... 7 Others _____ 96 (Specify)	

Q. N.	Questions and Filters	Coding Categories	Skip to
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 (NRs.)_____ ☐☐☐☐ Gift equivalent to _ ☐☐☐☐ Total_____ ☐☐☐☐☐ ***(Mention Nepali currency)*** Others _____ 96 (Specify)	
421	During your stay abroad, did you usually go to sex workers 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?	Yes .....1 No.....2	→ 505
502	How many times did you have sexual intercourse with your wife over the last one month? **(Write '00' if there was no sexual intercourse in last 30 days)**	Times ..... ☐☐ Don't know 98	
503	Did you use condom in your last sexual intercourse with your wife?	Yes .....1 No.....2	→ 503.2
503.1	Who suggested condom use that time?	Myself .....1 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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	
504	Over the last one year, how often did you use condom while having sex with your wife?	All of the time.....1 Most of the time.....2 Some of the time.....3 Rarely .....4 Never 5	→ 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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	

Condom Use with Female Sex Worker in Nepal

Note: If the answer is 'No' in Q. 403 or 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?	Yes .....1 No.....2 →	505.2
505.1	Who suggested condom use that time?	Myself .....1 My Partner .....2 Don't know 98	506
505.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know..... 98	
506	Over the last 1 year, how often did you use condom while visiting sex workers in Nepal?	All of the time.....1 → Most of the time .....2 Some of the time .....3 Rarely .....4 Never.....5	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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know..... 98	

Condom Use with Girl Friend/ Lover in Nepal

507	During the past 1 year did you have sexual intercourse with your girl friend in Nepal?	Yes .....1 No.....2 →	511
508	Over the last 1 month, 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 times .....☐☐ Don't know..... 98	
509	Did you use a condom in your last sexual intercourse with your girl friend in Nepal?	Yes .....1 No.....2 →	509.2
509.1	Who suggested condom use that time?	Myself .....1 My Partner .....2 Don't know 98	510

Q. N.	Questions and Filters	Coding Categories	Skip to
509.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) 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 time .....2 Some of the time .....3 Rarely .....4 Never.....5	→511
510.1	Why you did not use condom always? **(Multiple answers. Do not read the possible answers)**	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	

Condom Use with Other Female Friend in Nepal

511	Over the past one-year did you have sexual intercourse with your other female friends in Nepal?	Yes .....1 No.....2	→ 515
512	Over the last 1 month, 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 .....☐☐ Don't know..... 98	
513	Did you use condom in your last sexual intercourse with your other female friends in Nepal?	Yes .....1 No.....2	→ 513.2
513.1	Who suggested condom use that time?	Myself .....1 My Partner .....2 Don't know..... 98	→ 514
513.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
514	Over the last one year, how often did you use condom with your other female friend in Nepal?	All of the time.....1 Most of the time .....2 Some of the time .....3 Rarely .....4 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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	

Condom Use with Female Sex Worker During Abroad Stay

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

515	Did you use a condom in your last sexual intercourse with a sex worker when abroad?	Yes .....1 No.....2	→ 515.2
515.1	Who suggested condom use that time?	Myself .....1 My Partner .....2 Don't know 98	516
515.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	
516	Over the last 1 year, how often did you use condom while visiting sex workers abroad?	All of the time.....1 Most of the time .....2 Some of the time .....3 Rarely .....4 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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	

Condom Use with Girl Friend During Abroad Stay

Q. N.	Questions and Filters	Coding Categories	Skip to
517	Over the past 1-year did you have sexual intercourse with your girl friend abroad?	Yes .....1 No.....2	→ 521
518	Over the last 1 month, how many times did you have sexual intercourse with your girl friend abroad? **(Write '00' if there is no sexual intercourse with girl friend in last 30 days)**	Number of time .....☐☐ Don't know 98	
519	Did you use a condom in your last sexual intercourse with your girl friend abroad?	Yes .....1 No.....2	→ 519.2
519.1	Who suggested condom use that time?	Myself .....1 My Partner .....2 Don't know 98	520
519.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	
520	Over the last 1 year, how often did you use condom while having sex with your girl friend abroad?	All of the time.....1 Most of the time .....2 Some of the time .....3 Rarely .....4 Never.....5	→ 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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	

Condom Use with Other female Friend During Abroad Stay

521	During the past one-year did you have sexual intercourse with other female friends abroad?	Yes .....1 No.....2	→ 525
522	Over the last 1 month, how many times did you have sexual intercourse with your other female friends abroad? **(If there is none sexual intercourse with other female friend in last 30 days write '00')**	Number of time .....☐☐ Don't know 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
523	Did you use condom in your last sexual intercourse with your other female friends abroad?	Yes .....1 No.....2	→ 523.2
523.1	Who suggested condom use that time?	Myself .....1 My Partner .....2 Don't know 98	524
523.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____96 (Specify) Don't know 98	
524	Over the last 1 year, how often did you use condom with your other female friend abroad?	All of the time.....1 Most of the time .....2 Some of the time .....3 Rarely .....4 Never.....5	→ 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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____96 (Specify) Don't know 98	

Condom Use with Male Partner in Nepal

525	During the past one-year did you have anal sex with a male partner in Nepal?	Yes .....1 No.....2	→ 529
526	Over the last 1 month, 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 .....☐☐ Don't know..... 98	
527	Did you use a condom in your last anal sex with your male partners in Nepal?	Yes .....1 No.....2	→ 527.2
527.1	Who suggested condom use at that time?	Myself .....1 My Partner .....2 Don't know 98	528
527.2	Why didn't you use condom at that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____96 (Specify) Don't know 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
528	Over the last 1 year, how often did you use condom while having anal sex with male partner in Nepal?	All of the time .....1 Most of the time .....2 Some of the time .....3 Rarely.....4 Never 5	→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 objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____96 (Specify) Don't know 98	

Condom Use with Male Partner During Abroad Stay

529	During the past one-year did you have anal sex with male partner when you were abroad?	Yes .....1 No.....2	→533
530	Over the last 1 month, how many times did you have anal sex with male partner abroad? **(Write'00' if there is no anal sex with male partner in last 30 days)**	Number of time .....☐☐ Don't know 98	
531	Did you use condom in your last anal sex with male partners when you were abroad?	Yes .....1 No.....2	→531.2
531.1	Who suggested condom use that time?	Myself .....1 My Partner .....2 Don't know 98	→532
531.2	Why didn't you use condom that time?	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____ 96 (Specify) Don't know 98	
532	Over the last 1 year, how often did you use condom with male partner/s abroad?	All of the time.....1 Most of the time .....2 Some of the time .....3 Rarely .....4 Never.....5	→533

Q. N.	Questions and Filters	Coding Categories	Skip to
532.1	Why you did not use condom always? **(Multiple answers. Do not read the possible answers)**	Not available.....1 Too expensive.....2 Partner objected .....3 I didn't like to use it.....4 Didn't think it was necessary..5 Didn't think of it.....6 Others _____96 (Specify) Don't know 98	
533	With whom did you have the last sexual intercourse?	FSW .....1 Wife.....2 Other female friend.....3 Lover/female friend .....4 Male friend.....5 No sexual intercourse in last 12 months .....6 Never had sexual intercourse 7	535
533.1	Did you use condom at that time? **(Check with Q no. 503, 505 509, 513, 515, 519 523, 527, 531)**	Yes .....1 No.....2	
534	Where did you have the last sexual intercourse?	Nepal .....1 Abroad.....2	

Condom Accessibility

535	Do you usually carry condoms with you?	Yes .....1 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 Pharmacy .....2 General retail store (*Kirana Pasal*).....3 Private Clinic .....4 Paan shop.....5 Hospital .....6 FPAN Clinic.....7 Peer/Friends.....8 Health Workers/Volunteers....9 Hotel /Lodge..... 10 Brothel..... 11 NGO ..... 12 FCHVs..... 13 Others _____96 (Specify) 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…….. ☐☐	
537	Do you usually obtain condoms free of cost or pay for it or obtain both ways?	I get it free of cost .....1 I buy.....2 → 538 Both .....3 Never used condom .....4 → 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 Clinic .....3 Peer/Friends.....4 During Community Program .5 Health Workers/Volunteers....6 NGO .....7 FCHVs.....8 Others _____96 (Specify)	
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 Center ....1 Hospital .....2 FPAN Clinic .....3 Peer/Friends.....4 During Community Programme .....5 Health Workers/Volunteers....6 NGO .....7 FCHVs.....8 Others _____ 96 (Specify)	
	(Note: If response is '1' in 537, Go to Q. 539)		
538	From where do you often buy condoms? **(Multiple answers. Do not read the possible answers)**	Pharmacy .....1 General retail store *(Kirana Pasal)*.....2 Private clinic .....3 Paan Shop .....4 Others _____ 96 (Specify)	
538.1	Which would be the most convenient places for you to buy condom? **(Multiple answers. Do not read the possible answers)**	Pharmacy .....1 General retail store *(Kirana Pasal*) .....2 Private clinic .....3 Paan Shop .....4 Others _____ 96 (Specify)	
539	In the past one year did you obtain condom from any sources (e.g. peer educator, drop in center, sexual health center)? **(Multiple answers. Do not read the possible answers)**	Yes, free of cost .....1 Yes, on cash payment .....2 No.....3	

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?	Yes .....1 No.....2 →	701
602	Where have you seen or heard messages regarding HIV/AIDS? **Name district and/or city and country any others?**	Country City/village District/State In Nepal _____ _____ _____ _____ _____ _____ Abroad _____ _____ _____ _____ _____ _____	
603	What messages have you heard? **(Probe this about any others)**	**List Messages** 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	
604	What are the sources of these information on HIV/AIDS?	**List sources of information** 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	
605	Has any person tried to educate you about HIV or STDs in the past year?	Yes .....1 No.....2 Don't know..... 98	607
606	In which district or city did those people educate you?	**Country City/village District/State** In Nepal ____ _____ _____ _____ _____ _____ Abroad ____ _____ _____ _____ _____ _____	

Knowledge, Perception and Attitudes on HIV/AIDS

607	Do you know anyone who is infected with HIV or who has died of AIDS?	Yes .....1 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 relative .....1 Yes, a close fried.....2 No.....3	
609	Can people protect themselves from HIV by having one uninfected faithful sex partner?	Yes .....1 No.....2 Don't know..... 98	
610	Can people protect themselves from HIV, virus causing AIDS, by using condom correctly in each sexual contacts?	Yes .....1 No.....2 Don't know..... 98	
611	Do you think a healthy-looking person can be infected with HIV?	Yes .....1 No.....2 Don't know..... 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
612	Can a person get the HIV virus from mosquito bite?	Yes .....1 No.....2 Don't know..... 98	
613	Can a person get HIV by sharing a meal with an HIV infected person?	Yes .....1 No.....2 Don't know..... 98	
614	Can a pregnant woman infected with HIV/AIDS transmit the virus to her unborn child?	Yes .....1 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 Medication .....1 Others _____ 96 (Specify) Don't know..... 98	
616	Can a woman with HIV/AIDS transmit the virus to her newborn child through breastfeeding?	Yes .....1 No.....2 Don't know..... 98	
617	Can people protect themselves from HIV virus by abstaining from sexual intercourse?	Yes .....1 No.....2 Don't know..... 98	
618	Can a person get HIV by holding on with HIV infected person's hand?	Yes .....1 No.....2 Don't know..... 98	
619	Can a person get HIV by using previously used needle/syringe?	Yes .....1 No.....2 Don't know..... 98	
620	Can blood transfusion from HIV infected person transmit HIV to others?	Yes .....1 No.....2 Don't know..... 98	
621	Is it possible in your community for someone to have a confidential HIV test?	Yes .....1 No.....2 Don't know..... 98	
621.1	If you have to go for HIV testing, do you know where can you go for it?	Yes .....1 No.....2	
622	**I don't want to know the result**, but have you ever had an HIV test?	Yes .....1 No.....2	→ 701
623	Did you voluntarily undergo the HIV test or was it required?	Voluntarily .....1 Required.....2 No Response 99	
624	**Please do not tell me the result,** but did you find out the result of your test?	Yes .....1 No.....2	→ 625.1
625	Why did you not receive the test result?	Sure of not being infected.....1 Afraid of result.....2 Felt unnecessary.....3 Forgot it .....4 Others _____ 96 (Specify)	
625.1	In the past one year did you go for HIV testing?	Yes .....1 No.....2	→ 626

Q. N.	Questions and Filters	Coding Categories	Skip to
625.2	**I don't want to know the result**, but did you receive the test result?	Yes .....1 No.....2	
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)

701	Which diseases do you understand by STI? **(Multiple answers. Do not read the possible answers)**	White Discharge/Discharge of Pus/*Dhatu* flow .....1 Pain during urination .....2 Burning Sensation while Urinating .....3 Ulcer or sore around genital area.4 Syphilis (*Bhiringi)* .....5 HIV/AIDS .....6 Others _____ 96 (Specify) 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?	Yes .....1 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 ..... ☐☐		
704	Where did you go for the treatment? **(Multiple answers. Do not read the possible answers)**	Private Clinic .....1 N-SARC Clinic .....2 FPAN Clinic.....3 Health Post/ Health Center.....4 Hospital .....5 Pharmacy.....6 Self Treatment (Specify)_____7 Others _____ 96 (Specify)		
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) _____			

Q. N.	Questions and Filters	Coding Categories	Skip to
706	Did you receive a prescription for medicine?	Yes .....1 No.....2 Home treatment.....3	 →709 →709
707	Did you obtain all the medicine prescribed?	Yes I obtained all of it .....1 I obtained some but not all....2 I did not obtain the medicine 3	 709
708	Did you take all of the medicine prescribed?	Yes .....1 No.....2	→709
708.1	If not, why did you not take all of the medicine prescribed?	Forgot to take .....1 Felt cured .....2 Medicine did not help .....3 Others _____96 (Specify)	
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)

712	Where did you go for the treatment? **(Multiple answers. Do not read the possible answers)**	Private Clinic .....1 N-SARC .....2 FPAN Clinic .....3 Health Post/ Health Center.....4 Hospital .....5 Pharmacy .....6 Self Treatment (Specify)____7 Others _____96 (Specify)	→801
713	Did anyone from the place you visit for treatment counsel you about how to avoid the problem?	Yes .....1 No.....2	→801

Q. N.	Questions and Filters	Coding Categories	Skip to
714	What did she/he tell you?	Told me to use condom .....1 Told me to reduce number of sexual partners .....2 Others (Specify) _____ 96	

8.0 USE OF DRUGS AND INJECTION

801	During the last 1 month how often did you have drinks containing alcohol?	Everyday .....1 2-3 times a week .....2 At least once a week .....3 Less than once a week .....4 Never.....5 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?	Yes .....1 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)**	Yes .....1 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)**	Yes .....1 No.....2 Don't know..... 98	901
805	Are you currently injecting drugs?	Yes .....1 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?	Yes .....1 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 Time .....1 Almost Every Time.....2 Sometimes .....3 Never.....4 Don't Know..... 98	
808	Usually how do you get/did you get syringe/ needle?	My friend/relative gave it to me after his use .....1 Unknown person gave it to me.....2 I picked it up from a public place which was left there by others .....3 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 purchased .....6 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?	Yes .....1 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?	Yes .....1 No.....2 Don't know 98	
903	If a member of your family become ill with HIV, would you want it to remain secret?	Yes .....1 No.....2 Don't know 98	

9.0 KNOWLEDGE AND PARTIICIPATION IN STI and HIV/AIDS PROGRAMS

1001	Have you met, discussed, or interacted with peer educators (PE) or community mobilizer (CM) in the last 12 months?	Yes .....1 No.....2 No response..... 99	} 1003
1002	Do you know from which organization were they? **(Multiple answers: DO NOT READ the possible answers)**	Government.....1 FHI .....2 NSARC .....3 NRCS .....4 INF/Paluwa .....5 Siddhartha Club .....6 Others (Specify) _____96 Don't know 98	
1003	Have you visited or been to any drop in center (DIC) in the last 1 year?	Yes .....1 No.....2	→ 1005
1004	Do you know which organizations were running those DICs ? **(Multiple answers: DO NOT READ the possible answers)**	NSARC .....1 NRCS .....2 INF/Paluwa .....3 Siddhartha Club .....4 Others (Specify) _____96 Don't know 98	
1005	Have you visited any STI clinic in the last 1 year?	Yes .....1 No.....2	→ 1007
1006	Do you know which organizations run those STI clinics? **(Multiple answers: DO NOT READ the possible answers)**	AMDA Nepal.....1 NSARC .....2 NRCS .....3 INF/Paluwa .....4 Siddhartha Club .....5 Others (Specify) _____96 Don't know 98	
1007	Have you visited any voluntary counseling and testing (VCT) centers in the last 12 months?	Yes .....1 No.....2	→ 1009
1008	Do you know which organizations run those VCT centers? **(Multiple answers: DO NOT READ the possible answers)**	NSARC .....1 NRCS .....2 INF/Paluwa .....3 Siddhartha Club .....4 SACTS.....5 Others (Specify) _____96 Don't know 98	

Q. N.	Questions and Filters	Coding Categories	Skip to
1009	Have you ever participated in HIV/AIDS awareness raising program or community events in the last 1 year?	Yes .....1 No.....2 →	1012
1010	Which activities have you participated in? **(Multiple answers: DO NOT READ the possible answers)**	Street drama .....1 AIDS Day .....2 Condom Day .....3 Video Shows.....4 Group discussions .....5 Talk programs .....6 HIV/AIDS related training ..7 HIV/AIDS related Workshops8 Condom use demonstrations.9 Others (Specify) _____96	
1011	Do you know which organizations organized those activities? **(Multiple answers: DO NOT READ the possible answers given below)**	NSARC…….....1 NRCS .....2 INF/Paluwa .....3 Siddhartha Club .....4 SACTS .....5 Others (Specify) _____96 Don't know 98	
1012	In the last 1 year have any CHBC health workers visited your house?	Yes .....1 No.....2	**End the interview**
1013	Do you know which organizations were they from? **(Multiple answers: DO NOT READ the possible answers given below)**	NSARC…….....1 NRCS .....2 INF/Paluwa .....3 Siddhartha Club .....4 SACTS .....5 Others (Specify) _____96 Don't know 98	

Interview Completion Time	Hr ☐☐ Min. ☐☐

ANNEX - 5

Confidential

INTEGRATED BIOLOGICAL AND BEHAVIORAL SURVEILLANCE SURVEY (IBBS) AMONG MALE LABOR MIGRANTS IN SELECTED SITES OF NEPAL – 2008

Clinical/Lab Checklist for Male Labor Migrants

Respondent ID Number: | | | | | | |

Name of Clinician: _____ Date: 2065/_____/_____

Name of Lab Technician: _____

(A) Clinical Information

Weight: _____ Kg.

B.P. : _____mm of Hg.

Pulse : _____

Temperature : _____º F

(B) Specimen collection

	Yes	No
Pre test counselled	1	2
Blood collected for HIV and Syphilis	1	2
Date and place for post-test results given	1	2
Condom given	1	2
Vitamins given	1	2
Gift 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 gonorrhea and chlamydia**)

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

1. Yes 2. NO

(If yes, Refer)

ANNEX - 6

Family Health International (FHI), Nepal
Oral Informed Consent Form for Male Labor Migrants

Title: Integrated Biological and behavioural Surveillance Survey among Male Labor Migrants in 11 Districts in the Western to Far Western Regions of Nepal

Sponsor: ASHA Project- FHI/Nepal and USAID/Nepal

Principal Investigator/s: Jacqueline McPherson, MPH, FHI/Nepal
Laxmi Bilas Acharya, PhD, FHI/Nepal

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lacharya@fhi.org.np

Introduction

We are asking you to take part in research study to collect information on knowledge of human immunodeficiency virus (HIV)/ sexually transmitted infections (STIs), HIV/STI related risk behaviours, STI treatment practices and also to measure the prevalence of HIV among populations like you. We want to be sure that you understand the purpose of the research and your responsibilities before you decide to participate in the study. This discussion is the process needed before the study occurs. You will not be asked to sign on this form, you can only tell us that you have understood it. One person will explain you about the study and another person will witness the consent taking process. Both consent taker and the witness will sign the form. Please ask us to explain any words or information that you may not understand.

Information about the Research and Your Role

Study participants will be selected using a random process. You are in the pool of possible candidates, but the final selection would be based on your choice. In total 720 males like you who migrate to India for labor related work from 11 districts in the Western to Far Western regions will be selected for interview. Once you agree to participate in the study we will interview you using a structured questionnaire and then ask you to provide blood sample for HIV test. We will draw few drops of blood by finger prick. We will provide free syndromic treatment if you currently have any symptoms of STI. You will be informed about the dates and place from where you can collect the results of HIV and STI tests. Test results will be provided with counselling by a qualified counsellor.

You will have to spend about 60 minutes with us if you decide to participate in this research. We would like to inform that this is a research study and not health care provision service.

Possible Risks

The risk of participating in this study is the minor discomfort during blood drawing. Providing blood sample does not put you at any other risk. Some of the questions we ask might make you feel awkward or uncomfortable to answer them. You are free not to answer such questions and also to stop participating in the research at any time you want to do so. You might feel some mental stress after getting your test results. But you will get counselling before and after the test for HIV through a

qualified counselor. They will provide information and address for seeking assistance for any mental stress you have.

Possible Benefits
You will be provided with free treatment, if currently you have any STI symptoms. You will be given lab test results and made aware of how STI/HIV is transmitted and how it can be prevented and controlled. We will refer you for treatment for HIV but will not provide this treatment for you. Follow up treatment costs will not be paid by the research team. You will also be provided with information on safe sex. The information we obtain from this research will help to plan strategies to control and prevent further spread of HIV/AIDS and other sexually transmitted infections.

After the sample collection, you can hear your test results of HIV right here. A qualified counsellor with pre and post test counselling will give test result. Study ID card will be issued to you before the interview. Test results can only be obtained by presenting the study ID card with your code number on it. If you do not have the ID card, we cannot give you the results because we will not be have your name written anywhere.

If You Decide Not to Be in the Research
You are free to decide whether or not to take part in this research. Your decision will not affect in any way in the health services you are seeking now and you would normally receive from the study centre.

Confidentiality
We will protect information collected about you and your taking part in this study to the best of our ability. We will not use your name in any reports. A court of law could order medical records shown to other people, but that is unlikely. We will not ask you to put your name or sign on this form, but only ask you to agree verbally (with spoken words).

Payment
We will not pay you for your participation but you will be given, condom and reading materials about STI/HIV/AIDS 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 health services you normally receive from the study clinic.

If you have a questions about the study
If you have any questions about the research, call:
Jacqueline McPherson, ASHA project- FHI/Nepal, Baluwatar, Kathmandu, Phone: 01-4437173; **OR**
Siddhartha Man Tuladhar, New ERA, Kalopool, Kathmandu, Phone: 01-4413603; **OR**
Laxmi Bilas Acharya, ASHA project- FHI/Nepal, Baluwatar, Kathmandu, Phone: 01-4437173

We will not be able to provide any assistance or service to you after the study.

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 ***Jacqueline McPherson***, Family Health International (FHI), Baluwatar, Kathmandu, Phone: 01-4437173 **and/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

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 - 7

Participation in Post Test Counselling

Region	Date	Expected Client	Client Counselled		Client with HIV+	Client with HIV-
			N	%		
Western	03 July, 2008 – 27 Aug, 2008	360	354	98.3	5	349
Mid-Far Western	06 July, 2008 - 11 Sept, 2008	360	351	97.5	2	349
Total		**720**	**705**	**97.9**	**7**	**698**

ANNEX - 8

Sexual Act of Male Labor Migrants with FSW in Nepal

	Western		Mid-Far Western	
	N	**%**	**N**	**%**
Number of FSWs visited in the past year in Nepal				
1	3	75.0	1	50.0
2-3	0	0.0	0	0.0
4-5	1	25.0	0	0.0
>5	0	0.0	1	50.0
Range	-	**1 - 4**	-	**1 - 10**
Mean	-	**1.7**	-	**5.5**
Total	**4**	**100.0**	**2**	**100.0**
Frequency of Sex with FSWs in Nepal in the Past Year				
1	1	25.0	0	0.0
2-3	1	25.0	0	0.0
4-5	1	25.0	1	50.0
> 5	1	25.0	1	50.0
Range	-	**1 – 20**	-	**5 – 15**
Mean	**-**	**7.0**	**-**	**10.0**
Total	**4**	**100.0**	**2**	**100.0**
Last time sex with FSW in Nepal				
Less than a week	1	25.0	1	50.0
1 - 2 weeks ago	1	25.0	1	50.0
More than 12 weeks ago	2	50.0	0	0.0
Total	**4**	**100.0**	**2**	**100.0**
Place met last sex worker in Nepal				
Hotel/lodge	4	100.0	2	100.0
Total	**4**	**100.0**	**2**	**100.0**

ANNEX - 9

Sexual Behaviour of Male Labor Migrants and Condom Use by them with FSW in Nepal

Sexual Behaviour and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had sex with FSW in the past year				
Yes	4	1.1	2	0.6
No	5	1.4	21	5.8
Never had sex with sex worker in Nepal	31	8.6	61	16.9
Never had sex with sex worker	273	75.8	261	72.5
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100.0**
Use of condom during the last sex with FSW				
Yes	3	75.0	1	50.0
No	1	25.0	1	50.0
Total	**4**	**100.0**	**2**	**100.0**
Suggested to use condom during last sex				
Myself	2	66.7	1	100.0
My partner	1	33.3	0	0.0
Total	**3**	**100.0**	**1**	**100.0**
Consistent use of condom in the past year with FSW				
Every time	3	75.0	1	50.0
Sometimes	0	0.0	1	50.0
Rarely	1	25.0	0	0.0
Total	**4**	**100.0**	**2**	**100.0**
Reason for not using condom always				
Not available	1	100.0	0	0.0
Partner objected	0	0.0	1	100.0
Total	**1**	*****	**1**	*****

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

ANNEX - 10

Sexual Act of Male Labor Migrants with FSW in India

Sexual Behaviour	Western		Mid-Far Western	
	N	%	N	%
No. of FSWs visited in past year in India				
1	4	80.0	6	33.3
2-3	1	20.0	6	33.3
> 3	0	0.0	6	33.3
Range	-	**1 - 3**	-	**1 - 20**
Mean	-	**1.4**	-	**4.2**
Total	**5**	**100.0**	**18**	**100.0**
Frequency of sex with FSWs in the past year in India				
1	1	20.0	3	16.7
2-3	2	40.0	6	33.3
> 3	2	40.0	9	50.0
Range	-	**1 - 20**	-	**1 - 50**
Mean	-	**7.6**	-	**18.6**
Total	**5**	**100.0**	**18**	**100**
Place of sex in the past year in India				
Delhi	3	60.0	0	0.0
Mumbai	2	40.0	1	5.6
Goa	0	0.0	2	11.1
Surat	0	0.0	2	11.1
Other places**	0	0.0	16	88.9
Total	**5**	*	**18**	*
Last time sex with FSW in India				
3-4 weeks ago	0	0.0	1	5.6
5-7 weeks ago	0	0.0	1	5.6
8-12 weeks ago	2	40.0	4	22.2
More than 12 weeks ago	3	60.0	12	66.7
Total	**5**	**100.0**	**18**	**100**
Place where you met last SW in India				
Brothel	2	40.0	8	44.4
Hotel/lodge	1	20.0	5	27.8
Street	1	20.0	1	5.6
Work place	0	0.0	2	11.1
FSW's place	0	0.0	2	11.1
Others	1	20.0	0	0.0
Total	**5**	**100.0**	**18**	**100**

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

** Rampur, Kananplace,Danu, Sakinaki, Jaypur, Indranagaar, Banaras, Sonapur, Andheri, Lucknau, Puna, Gujarat, Ludhiyana, Hariyana, Bareli, Hyderabad

ANNEX - 11

Sexual Behaviour of Male Labor Migrants and Condom use by them with Girl Friend/s in India

Sexual Behaviour and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had sex with girl friend in the past year				
Yes	8	2.2	12	3.3
No	305	84.7	333	92.5
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100**
Use of condom during last sex with girl friend				
Yes	7	87.5	7	58.3
No	1	12.5	5	41.7
Total	**8**	**100.0**	**12**	**100**
Person to suggest the use of condom during last sex				
Myself	4	57.1	6	85.7
My partner	3	42.9	1	14.3
Total	**7**	**100.0**	**7**	**100**
Consistent use of condom with girl friend in the past year				
Every time	7	87.5	5	41.7
Most of the time	0	0.0	1	8.3
Sometimes	1	12.5	1	8.3
Rarely	0	0.0	1	8.3
Never	0	0.0	4	33.3
Total	**8**	**100.0**	**12**	**100**
Reason for not using condom always				
Not available	1	100.0	3	42.9
Didn't like to use it	0	0.0	3	42.9
Didn't think it was necessary/didn't think of it	0	0.0	4	57.1
Partner objected	0	0.0	1	14.3
Total	**1**	*****	**7**	*****
Frequency of sex with girl friend in the past one month				
0	6	75.0	10	83.3
1	0	0.0	2	16.7
2-3	2	25.0	0	0.0
Range	**-**	**0-2**	**-**	**0 – 1**
Mean	**-**	**0.5**	**-**	**0.2**
Total	**8**	**100.0**	**12**	**100.0**

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

ANNEX - 12

Sexual Behaviour of Male Labor Migrants and Condom Use by them with other Female Partner in India

Sexual Behaviour and Condom Use	Western		Mid-Far Western	
	N	%	N	%
Had sex with other female partner in the past year				
Yes	2	0.6	7	1.9
No	311	86.4	338	93.9
Never had sex with female	47	13.1	15	4.2
Total	**360**	**100.0**	**360**	**100.0**
Use of condom during the last sex with other female partner				
Yes	1	50.0	5	71.4
No	1	50.0	2	28.6
Total	**2**	**100.0**	**7**	**100.0**
Person to suggest use of condom during last sex				
Myself	1	100.0	4	80.0
My partner	0	0.0	1	20.0
Total	**1**	**100.0**	**5**	**100.0**
Consistent Use of Condom with Other Female in the Past Year				
Every time	1	50.0	5	71.4
Sometimes	1	50.0	1	14.3
Never	0	0.0	1	14.3
Total	**2**	**100.0**	**7**	**100.0**
Reason for not using condom always				
Not available	1	100.0	1	50.0
Didn't think it was necessary/didn't think of it	0	0.0	1	50.0
Total	**1**	*****	**2**	*****
Frequency of sex with other female in the past one month				
0	2	100.0	5	71.4
1	0	0.0	1	14.3
> 1	0	0.0	1	14.3
Range	**-**	**0 - 0**	**-**	**0 - 2**
Mean	**-**	**0.0**	**-**	**0.4**
Total	**2**	**100.0**	**7**	**100.0**

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

ANNEX - 13

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				
Maharastra	84	23.3	67	18.6
Delhi	81	22.5	15	4.2
Hariyana	17	4.7	8	2.2
Uttar Pradesh (U.P.)	17	4.7	11	3.1
Hariyana	17	4.7	8	2.2
Gujarat	16	4.4	32	8.9
Punjab	12	3.3	7	1.9
Aandra Pradesh	4	1.1	4	1.1
Rajasthan	3	0.8	5	1.4
Tamilnadu	2	0.6	4	1.1
Karnataka	2	0.6	2	0.6
Madhya Pradesh	1	0.3	6	1.7
Himanchal Pradesh	1	0.3	15	4.2
Uttaranchal Pradesh	0	0.0	14	3.9
Goa	0	0.0	2	0.6
Others (Asam, Nagaland Kerala, Jammu Kashmir, Bihar, Jharkhand)	9	2.5	8	2.2
Nepal				
Gulmi	133	36.9	0	0.0
Palpa	54	15.0	0	0.0
Kapilvastu	51	14.2	0	0.0
Syangja	30	8.3	0	0.0
Kaski	13	3.6	0	0.0
Rupandehi	11	3.1	1	0.3
Kathmandu	3	0.8	3	0.8
Achham	0	0.0	110	30.6
Banke	0	0.0	29	8.1
Surkhet	0	0.0	85	23.6
Kailali	0	0.0	62	17.2
Kanchanpur	0	0.0	20	5.6
Doti	0	0.0	29	8.1
Others (Jhapa, Sunsari, Baglung, Pyuthan, Rukum, Dang)	3	0.8	3	0.8
Never heard HIV/AIDS	15	4.2	5	1.4

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

ANNEX - 14

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	16	4.4	75	20.8
No	329	91.4	280	77.8
Never heard of HIV/AIDS	15	4.2	5	1.4
Total	**360**	**100.0**	**360**	**100.0**
Place of information provided				
India				
Maharastra	5	31.3	12	16.0
Delhi	2	12.5	1	1.3
Gujrat	1	6.3	2	2.7
Mahdya Pardesh	0	0.0	1	1.3
Punjab	0	0.0	1	1.3
Other places	2	12.5	3	4.0
Nepal				
Gulmi	3	18.8	0	0.0
Syangja	1	6.3	0	0.0
Palpa	1	6.3	0	0.0
Achham	0	0.0	22	29.3
Doti	0	0.0	15	20.0
Kailali	0	0.0	12	16.0
Kanchanpur	0	0.0	6	8.0
Surkhet	0	0.0	10	13.3
Other places	1	6.3	0	0.0
Total	**16**	*****	**75**	*****