IBBS Report 2010

INTEGRATED BIOLOGICAL AND BEHAVIORAL SURVEILLANCE SURVEY AMONG MALE LABOR MIGRANTS

Round III

Mid and Far-Western Regions of Nepal

Submitted to:

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The entire responsibility of everything that may went wrong, for all the heartburn that this report may cause, is solely ours. For this we sincerely apologize.

SSO Research Team

FORWORD

I am very pleased to know that Success Search Option (SSO) carried out IBBS study in far west and mid west districts of Nepal during the last summer under Global Fund Round 7 financial support managed by Save the Children Nepal. I was regularly informed that according to their commitment shown in the research proposal submitted; SSO under supervision of the technical officers/research officers of NCASC and Save the Children Nepal; did excellent work to meet the best quality of research in spite of unfavorable rainy season during field work. On behalf of National Center, I would like to congratulate SSO for successfully completing the research project of IBBS in Far-West and Mid-West of Nepal. I really appreciate the hard work and sincerity of the technical people associated with SSO for providing us with quality data in regards to HIV/AIDS information particularly biological as well as behavior related information, which are extremely important in developing programs and strategy and designing interventions. We all agree that dedicated young and energetic people can contribute to the national response in terms of HIV/AIDS and STI not only in the national level but also in the international level. Moreover, any country in the world needs adequate resources for the significant outcomes from any social welfare program or health related program including HIV/AIDS and STI program and those most important resources are: 1) Financial resources; 2) Human resources; 3) Material resources; and 4) Information resources. And I am confident that such study is going to give us good quality information resource which will be very useful for designing scientific intervention. In this regards, I must also appreciate the contribution of all the technical experts who provided technical guidance and assistance to SSO during planning phase as well as in the implementation phase of this research project.

Thank you all.

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ABBREVIATIONS

AIDS— Acquired Immune-Deficiency Syndrome

CI— Confidence Interval

DACC— District AIDS Coordinating Committee

DIC— Drop-in Centre

FCHV— Female Community Health Volunteer

FSW— Female Sex Worker

H_o— Null Hypothesis

H₁— Alternative Hypothesis

HIV— Human Immune-Deficiency Virus

IBBS— Integrated Biological and Behavioral Surveillance Survey

ID No— Identification Number
IUD— Injecting Drug User

MARP— Most at Risk Population

MLM— Male Labor Migrant

MoHP— Ministry of Health and Population

MSM— Men Sex with Men

NCASC— National Centre for AIDS and STD Control

OE— Outreach Educators

PE— Peer Educators

PPS— Probability Proportional to Size

PSU— Primary Sampling Unit
Std. D— Standard Deviation

SSO— Success Search Option (P) Ltd—the Research Organization

SPSS— Statistical Program for Social Studies

STI— Sexual Transmitted Infection

ToR— Terms of Reference

VCT— Volunteer Testing and Counseling
VDC— Village Development Committee

EXECUTIVE SUMMARY

The HIV epidemic remains a major global public health challenge, with a total of 33.4 million people living with HIV worldwide. In 2008 alone, 2.7 million people were newly infected with HIV¹. Nepal's HIV and AIDS epidemic is concentrated amongst most-at-risk populations (MARP). The possibility of transmission of HIV infection from these high-risk groups to the general population is a serious health concern. However a high proportion of risky migration in the Far West might possibly add a new dimension to the epidemic.

Nepal's vulnerability to HIV has increased due to various contributing factors, including poverty coupled with the lack of employment opportunities, lack of proper education, large-scale migration, ten years of conflict etc. Country's political and socio-economic factors are held responsible for inducing large-scale migration abroad, particularly to India. Separated from their spouses and adrift from social bindings, many of these migrants exercise unsafe sexual practices. 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.

This is the third round of the Integrated Bio-Behavioral Surveillance Survey (IBBS) conducted in 2010 to collect behavioral data from labor migrants in the mid and far western districts of Nepal. This round was conducted in order to obtain updated estimates of the prevalence of HIV among the labor migrants, and also aimed to assess the changes that have taken place in the migration trends and the sexual behavior of the labor migrants in the mid and far western region of Nepal.

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 **Methodology** of this study is descriptive and analytical, which helps the researcher find out the pinpointing of problematic areas leading to the raising of the epidemic of the HIV. This study comprises interview and surveillance (close observation of behavior) as well as biological test. So that more specific information can be obtained to measure the prevalence of HIV epidemics.

In this study baseline information on the migrant population and their mobility pattern was taken from the district profile. A rapid listing of the migrants and their status was carried out at the VDC level. 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 study population for this cross-sectional 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".

Two stage cluster sampling was followed to draw the sample of 550 labor migrants of six mid and Far Western Districts. The first stage was the development of the sampling frame and selection of the clusters. The second stage was recruiting the respondents from the selected clusters.

 $^{^1}$ Towards Universal Access Scaling up Priority HIV/AIDS Interventions in the Health Sector Progress Report 2010; WHO/UNAID/USAID

Labor migrants were aggregated to arrive at a total number. After estimating their number in different locations, these locations were divided into clusters. A VDC with at least 30 labor migrants were defined as a cluster. Thirty clusters were selected from the six study districts using the probability proportional to size (pps) method. A systematic random sampling technique was adopted to identify target populations in the assigned districts. The selection process were help to ensure that sampling were both random and representational.

The respondents were recruited by random selection from the sampling frame by following a two-stage sampling scheme. The two stages are: (a) Selection of primary sampling units (psu's) or clusters from the Districts and (b) Selection of households and the respondents from within the selected clusters. Estimates of aggregate statistics were made in the current survey on the basis of total population and the sample size used on the basis of total male population.

The total **3787** households were listed and drawn **550** sample by systematic random sampling method for the study. Only one eligible respondent were recruited for the interview from a household. A total of 550 labor migrants were included for the quantitative survey. These were selected from each study district.

Analysis of Data: The sample was taken on the bases of total population and the migrant population of the sampled clusters in each district. However, this distribution was found largely disproportionate to the population of migrant males. So that; prior to analysis; a correction to the disproportionate sampling has been made by using 'Post-Stratification Weight' method. These 'weights' for the districts may be obtained by computing sample size in proportion to the estimated migrant population and dividing them by the sample size actually used.

Prior to analysis, study reached a consensus on which survey questions to include as potential predictors of influencing factors. Descriptive information (numbers and percentages) for each of the variables were calculated. In addition, p-values and 95% confidence intervals were calculated. A probability level of <0.05 was used to determine statistical significance. Interpreting statistical significance: the statistical significance p<0.05 means 'significant as judged by a test with a level 5%'. It summarizes the information bearing on Ho and H1 from the sample drawn. p<0.05 simply refers to the probability of obtaining results at least as extreme as those obtained if Ho is true. When p>0.05%, the observed difference could well be due to play of chance and Ho is not rejected. It has not 'proved' that there is no difference. Result is presented in the form of confidence intervals (CI). The CI conveys much more information; it has to do with measurement, rather than trying to answer oversimplified question 'is there a difference or not?'

Key Findings

Application of 'Post-Stratification Weight' Method for Analysis of the Data

Prior to analysis; 'Post-stratification Weight' method was applied for the analysis of the study population and result are ready to generalized to the district population. These 'District Weights' for the districts may be obtained by computing sample size in proportion to the estimated migrant population and dividing them by the sample size actually used.

The result by applying District Weight' that are as follows:-

- District Weight 0.5838 for Banke
- District Weight 0.63810 for Surkhet
- District Weight 3.8737 for Achham
- District Weight 2.0251 for Doti

- District Weight 0.57020 for Kailali
- District Weight 0.2808 for Kanchanpur

Finding from General Characteristics of the Respondents

- The respondents' ages ranged from 18 and 49 years. The Mean of the respondent's age is 30.18 years; Standard Deviation of sample means is 8.244 and 95% Confidence Interval of lower range is 29.48 and upper range is 30.88.
- The mean age of first marriage of the respondents is 19.42 years; with minimum age of marriage is only 10 years.
- The mean age of first migration is 19.9 years, which ranged from 11 years to 47 years of age.
- The respondents spends time in abroad are varied. The minimum years spend in abroad ranged from 3 months to 21 years (251 months). Mean of spend age in abroad is about three year (35.96 months).

Migration Destination

The most popular destinations; Mumbai and Delhi; covers more than 30 percentage of migration destination of the respondents. Ratnagiri remains the third popular destination among the labor migrants of the regions. The other popular destinations in India for labor migrants are Puna (4.9%); UP (3.6%); Gujrat (2.9%) etc. About 22% of other states are less than one percentage of Migration Destination.

Type of Work

The highest 52 percentages of respondents are worked in India as laborers. The second highest 46 percentages of respondents worked as watchman. The other types of work reported as lower percentage.

Finding from Behavioral Factors of the Respondents

Sexual Behavior of the Respondents

The highest percentages of respondents who had have sex with girl friend/female is 95 percentages. Among them, 41.7% of them had have sex with commercial sex workers. Similarly, 32.8 percentages of the respondents have sexual intercourse in abroad, which was three times higher than in Nepal.

The almost all percent (100%) of the age group of 25 to 49 years of the respondents have sexual contact with female. The age below 20 years have sexual contact with female seems lower percentages in comparisons with higher age groups. Similarly the respondents having sexual intercourse with commercial sex workers are higher percentages in the age group of 35–49.

Condon Use

The survey findings show that condom used during sexual intercourse with wife is found lower in percentages (18.3%). Similarly, consistence use of condom during sexual intercourse with girl friend is also lower in percentages 10.5%. Furthermore the percentages of using condom become lower (only 9%) during last sexual intercourse with girl friends. Similarly the result shows that consistence use of condom in last year is also found low in percentages (17.7% only). Consistent use of condom during sexual encounter with female partner and FSW is found slightly higher in percentages which are 10.5% vs.

never used 6.3% with female partner and 11.6 vs. never used 4.6 respectively. In contrast the result show that of using condom with MSM (boyfriend) is lower in percentage.

Finding from STI Examination, Diagnosis and Treatment

Symptomatic Treatment of STI

During survey period, the respondents were treated on survey site. The result shows that more than 58 percentages of the respondents did not have any sign and symptoms of STI. On the basis of their examination, 14.8 % found urethral discharge followed by ulcer around genital area (13.2%). Similarly 5.6% of them were diagnosed enlargement of inguinal lymph nodes. Among them the result shows that 4.3% found HIV reactive during the survey period. Other problems are in minority.

Finding from 2x2 cross tabulation analysis of behavior factors on HIV Reactive

• Sexual Encounter with FSW vs. HIV Reactive: The analysis found that an incidence of HIV reactive is different between those having and not having sexual intercourse with FSW. Less than 10 percentages of those are being affected HIV among those who are having of Sexual Intercourse with FSW. One percentage of those are being affected HIV among those who are not having of Sexual Intercourse with FSW. That differentiate in proportion of those having reactive or non reactive between safer and exposed.

Different observed seen statistically significant by 'Pearson Chi-Squire Test': Pearson Chi-Square= 19.340, p -Value=< .001

• Sexual Encounter with FSW vs. HIV /STI Infection: The analysis on 2x2 table found that an incidence of HIV/STI infected are not much different between those having and not having sexual intercourse with FSW. 42.4 percentages of those are being affected by STI/HIV among those who are having of Sexual Intercourse with FSW. Similar percentages (41.3%) of those are being affected STI/HIV among those who are not having of Sexual Intercourse with FSW. There if no differentiate in proportion of those having infected or not infected between safer and exposed.

Pearson Chi-Squire test result shows that statistically not significant. P value = >5

• Sexual Encounter with FSW vs. age category: Respondent having sexual intercourse with FSW are different between those above the age 25 years. 47.4 percentages of those are having sexual intercourse among those who are above the age of 25 years. There is significantly differentiated in proportion of those having sexual intercourse or not having sexual intercourse between this age categories.

Different observed seen statistically significant by 'Pearson Chi-Squire Test' Pearson Chi-Square= 8.418, p -Value=< .005

Age factor played a significant role on incidence of HIV Reactive. The analysis result shows that incidence of HIV Reactive are much different between those above the age 25 years. 6 percentages of those are being affected by HIV among those who are above the age of 25 years. There is significantly differentiated in proportion of those having infected between age categories.

CHAPTER I: INTRODUCTION

1 BACKGROUND AND INTRODUCTION

The National HIV/AIDS Action Plan of the National Center for AIDS and STD Control (NCASC), Ministry of Health and Population (MoHP) have adopted Second Generation Surveillance System to collect strategic information for understanding the scale of the epidemic and for monitoring and evaluation of the impact of ongoing national responses to combat the HIV epidemic in the country. Nepal's national program targets the country-identified most-atrisk populations- IDUs, MSM, FSWs and MSWs, clients of FSW and seasonal male labor migrants and wives of migrants. The main thrust of the program is need-based and tailored to the specific characteristics of the population group. Primary prevention is given a high priority.

Under the USAID-funded, Save the Children/Nepal worked in the leadership of the NCASC to support the Second Generation Surveillance System. Under this system, Save the Children/Nepal worked with Success Search Option (P) Ltd, local research agency and Intrepid Nepal, local laboratory conducted the integrated Biological and Behavioral Surveillance Survey (IBBS) among Most at Risk Population (MARP).

Nepal's HIV and AIDS epidemic is concentrated amongst MARP. However a high proportion of risky migration in the Far West might possibly add a new dimension to the epidemic. It is not a uniform epidemic but a mix of multiple types of epidemics in various regions/zones and districts. These groups include IDUs, FSWs and their clients, and MSM. Migrant males, uniformed service and transport workers have also been identified as at risk groups in the NAP. However, the data demonstrate that in the case of migrants this is true only when they are clients of sex workers both in country and abroad. According to the 2007 national estimates of HIV infection, about 70,000 people are estimated to be infected with HIV in Nepal, most of whom are unaware of their infection. As of December 2009, there are only 14,320 HIV positive persons reported.²

Coverage data indicate wide variations among the groups between the 2008 and 2009 reporting period. Generally, there is increasing trend of coverage among MARPs except for clients of sex workers, where some decrease from the last reporting period was observed. Knowledge among migrants appears to be the lowest: 15.8% in the Far Western region and 17.2% in the Western region (IBBS 2008). By mid-November 2008, a cumulative total of 12,746 cases of HIV infection had been reported to the NCASC. Among them, 45 percent were clients of FSWs or patients suffering from 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 subpopulations are affected.

² UNGASS Country Progress Report Nepal 2010 http://data.unaids.org/pub/Report/2010/nepal_2010_country_progress_report_en.pdf
³ Ibid

Nepal is experiencing a concentrated epidemic of HIV with prevalence at, or over, 5 percent in certain high-risk groups, such as 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. Similarly socio-economic and political factors are held responsible for inducing large-scale migration abroad, particularly to India. Separated from their spouses and adrift from social bindings, many of these migrants exercise unsafe sexual practices. 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.

This is the third round of the Integrated Bio-Behavioral Survey (IBBS) conducted in 2010 to collect behavioral data from labor migrants in the mid and far western districts of Nepal. This round was conducted in order to obtain updated estimates of the prevalence of HIV among the labor migrants, and also aimed to assess the changes that have taken place in the migration trends and the sexual behavior of the labor migrants in the mid and far western region of Nepal.

1.1 Objective of the IBBS 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.

To fulfill the above objective, the following are the specific objectives:

- 1.1.1 To collect information on various factors (personal, social and demographic characteristics) of MLM
- 1.1.2 To assess the level of knowledge on HIV/AIDS and STI
- 1.1.3 To assess the bio-behavior and risk related factor and their effect on HIV/STI exposure
- 1.1.4 To find out the interactive effect of various factors on STI infection and HIV exposure

1.2 Hypotheses

The hypotheses are theorizing that the personal factors (age, marital status, educational level), behavioral (friend circle, sexual partners, visit of sex workers, safe sex practice etc.) and other factors (knowledge and awareness on HIV/AIDS, participation on awareness campaign, access to health facility, resources, facilities at work place, etc.), influences on risk of HIV exposure.

⁴ IBBS Survey among Male Labor Migrants in 11 Districts in Western and Mid to Far-Western Regions of Nepal Round II -2008

CHAPTER II: METHODOLOGY

2 RESEARCH DESIGN

Having obtained a population of the study districts, a preliminary field visit was conducted to understand the field situation in the six study-districts (*Banke, Surkhet Achham*; *Doti, Kailali, and Kanchanpur*) in the mid and far-western region of Nepal and to list the number of labor migrant. Maps were developed to list the areas where labor migrant live in the six study districts. The locations was identified by meeting with local authorities and local stakeholders; VDC chairman, secretary, district public health officers, health workers, FCHVs, women's groups, teachers, community leaders, represents from NGOs/INGOs, and families of migrants. The identified locations were divided into different clusters.

The methodology of this study is descriptive and analytical. Descriptive study helps the researcher find out the pinpointing of problematic areas leading to the raising of the epidemic of the HIV. This study comprises interview and surveillance (close observation of behavior) as well as biological test. So that more specific information can be obtained to measure the prevalence of HIV epidemics.

2.1 Source of Data

Baseline information on the migrant population and their mobility pattern was available from the district profile as well as from first and second round of the IBBS study. In this study, too, concerned stakeholders at the district and VDC level and local GOs as well as 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 29376 in the six mid and far western districts.

The primary source of data was collected through direct structured interview from each individual respondent.

2.2 Study Population

Six districts in *Mid and Far-Western region of Nepal;* Banke, Surkhet, Achham; Doti, Kailali, and Kanchanpur are selected for the study. The study population for this cross-sectional 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".

2.3 Sample Size

A participant in the study was defined as, "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". All participants were screened for eligibility.

Two stage cluster sampling was followed to draw the sample of 550 labor migrants of six mid and Far Western Districts of Nepal. The first stage was the development of the sampling frame and selection of the clusters. The second stage was recruiting the respondents from the selected clusters.

2.4 Identification and Recruitment Process

Before the fieldwork, each study team was visited different local organizations. Meetings was held with the staff of government agencies at the district level/preferably district health office. While visiting the sites, researchers were building rapport with local stakeholders.

Participants were briefed about the purposes, objectives and methodology of the study. After respondents agreed to continue, informed consent was obtained. The informed consent form was administered by the interviewer. Both the interviewer and the witness were required to sign and date the informed consent form, after that the interviewer administered the questionnaire in a private room with the participant. All the participants/respondents were referring to Lab for pre-test counseling on HIV/AIDS and STIs and were asked if they are currently suffering from any STI symptoms. They were examined physically for any evidence of STI symptoms and they were counseled accordingly and free medicine for symptomatic treatment were given by trained health personnel in accordance with the National Guidelines on Case management of Sexually Transmitted Infections, 2009.

Labor migrants were aggregated to arrive at a total number. After estimating their number in different locations, these locations were divided into clusters. A VDC with at least 40 labor migrants were defined as a cluster. Thirty clusters were selected from the six study districts using the probability proportional to size (pps) method. At each location, information on population size was collected by direct and indirect counting. A systematic random sampling technique was adopted to identify target populations in the assigned districts. The selection process were help to ensure that sampling were both random and representational.

2.4.1 Sampling (Recruitment) of the Respondents

• Sampling Frame:

All the 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 in the study area *Banke*, *Surkhet Achham*,; *Doti, Kailali, and Kanchanpur* districts were constitute the sampling frame or the study population. The estimated number of male labor migrants/sample frame/study population was **29376** in the six mid and far western districts.

• Sample Size:

Following the terms of reference (ToR), a total of 550 labor migrants were included for the quantitative survey. These were selected from each study district. Estimates of

aggregate statistics were made in the current SSO survey on the basis of total population and the sample size used on the basis of total male population.

• Sampling Method:

The respondents were recruited by random selection from the sampling frame by following a two-stage sampling scheme. The two stages are:

- (i) Selection of primary sampling units (psu's) or clusters from the Districts—The 'clusters' in this study were the VDC in the Districts. For each District, the clusters were listed/constructed with each unit has a sufficient number of households/respondents to sample from. A VDC-level statistics on number of households and estimates of number of the labor migrants eligible for the study were collected which were required for determining the number of VDC required in a cluster. 30 clusters out of total 288 clusters VDC from six study districts were selected with PPS (probability proportionate to size) sampling. A village development committee (VDC) with at least 30 returnee labor migrants in the village was defined as a cluster.
- (ii) Selection of households and the respondents from within the selected clusters—From each selected cluster, 18–19 households with the 'labor migrants were selected by systematic random sampling method/interval method. For the purpose of selection, the field teams were obtained or prepare a list of household in the cluster and select from that list required number of households. The total 3787 households were listed and drawn 550 sample by systematic random sampling method for the study. Only one eligible respondent were recruited for the interview from a household.

2.5 Research Instrument

A quantitative survey method is identified as being the best research approach for meeting the scope of the study. The content and the design of the questionnaires was basically guided by the model questionnaire modules as based on the tools used in first and second round of IBBS among labor migrants conducted in 2006 and 2008, with some modifications were made wherever required. However, the questionnaires were further adapted to local conditions by seeking comments from the different stakeholder and technical experts. These questionnaires was first developed in English and then translated into Nepali.

Household was list household members and enumerate to identify the target labor migrants for the individual interview. The basic information was collected. Besides, the household questionnaire also includes question relating to 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 etc.

The information that was solicited from the structures questionnaire which was as follows:

- Critically evaluate the current situation of MARP in particular labor migrants in mid and far western region of Nepal.
- Find out the causal relationship
- Recommendation would be made on the basis of the findings.

The study was conducted in collaboration with a selected Laboratory–Intrepid Nepal. SSO was responsible for designing the sampling and research methodology; preparing and administering

the questionnaire; Analysis of the data, Report preparation, Dissemination and managing overall research study.

SSO followed quantitative methods by taking in-depth interview for data collection after having informed consent from respondents.

2.5.1 Individual Interview with Structural Questionnaire

SSO conducted the IBBS among MARP. The in-depth interview was conducted with structured questionnaire with some open-ended questions to obtain information about social and cultural norms, values and beliefs and experiences regarding behavior of HIV/AIDS activities that would allow respondent to answer with their own words. In-depth interview were conducted to collect the quality of data for the research process.

2.5.2 Quantitative Method

The information was collected from target groups through quantitative method. The instruments were designed with objective of deriving information on Integrated Biological and Behavioral Surveillance (knowledge, attitude and practice) among MARP. A structured questionnaire was developed to generate information from target groups. After obtaining informed consent, a questionnaire on participants' socio-demographic and HIV-risk behavior information was administered by trained interviewers.

2.6 Management of Data

Microsoft Excel, SPSS (Version 17), PSPP (version 15) and Minitab (Version 15) were used for statistical computations. Simple statistical tools like arithmetic mean, median, percentage, Cross tabulation, correlation and z-test analysis were used. The analysis was supported with diagrammatic representations like tables, histogram, box plot, interaction plot, etc.

All closed-ended (or quantitative) responses were entered directly from the questionnaires into Microsoft Excel Program. Prior to data analysis; most of the survey questions were re-coded.

2.7 Analysis of Data

The sample was taken on the bases of total population and the migrant population of the sampled clusters in each district. However, this distribution was found largely disproportionate to the population of *migrant* males. So that; prior to analysis; a correction to the disproportionate sampling has been made by using 'Post-Stratification District Weight' method. These 'District Weights' for the districts may be obtained by computing sample size in proportion to the estimated migrant population (the estimated number of male labor migrants/sample frame/study population were found **29376** in the six districts in the current SSO survey) and dividing them by the sample size actually used.

Prior to analysis, study reached a consensus on which survey questions to include as potential predictors of influencing factors. Descriptive information (numbers and percentages) for each of the variables were calculated. In addition, p-values and 95% confidence intervals were calculated. A probability level of <0.05 was used to determine statistical significance. Interpreting statistical significance: the statistical significance p<0.05 means 'significant as judged by a test with a level

5%'. It summarizes the information bearing on H_0 and H_1 from the sample drawn. p<0.05 simply refers to the probability of obtaining results at least as extreme as those obtained if H_0 is true. When p>0.05%, the observed difference could well be due to play of chance and H_0 is not rejected. It has not 'proved' that there is no difference. Result is presented in the form of confidence intervals (CI). The CI conveys much more information; it has to do with measurement, rather than trying to answer oversimplified question 'is there a difference or not?'

Demographic Distribution of the Respondents of Survey Districts Sampling Characteristics						
Study District	Total Male Population	Estimated Migrant %	Estimated Migrants	Sample Size (Actual)	Sample Size (Needed)	District Weight
Banke	198231	1.73	3430	110	64	0.5838
Surkhet	142817	1.77	2522	74	47	0.6381
Achham	108998	10.44	11379	55	213	3.8737
Doti	103521	5.75	5949	55	113	2.0251
Kailali	312311	1.42	4447	146	83	0.5702
Kanchanpur	191910	0.86	1650	110	31	0.2808
TOTAL	1057788		29376	550	550	

Table shows for each district, the total male population (National Census, 2001 AD) and the estimated percentage of male migrants and the resulting estimated total for the migrants. The estimates were made in the current SSO survey on the basis of total population and the migrant population of the sampled clusters in each district. The next column shows the sample size used on the basis of total male population. This was used actually in the survey. However, this distribution was found largely disproportionate to the population of *migrant* males.

A correction to the disproportionate sampling has been made by using 'District Weights' shown in the last column of the table for statistical estimations in the analysis. These weights for the districts may be obtained by computing sample size in proportion to the estimated migrant population (also shown in the table) and dividing them by the sample size actually used.

CHAPTER III: RESULTS OF GENERAL ANALYSIS

3 GENERAL CHARACTERISTICS (FACTORS) OF THE RESPONDENTS

3.1 Socio-Demographic Characteristics

This present study was conducted to investigate the effect of personal factor on HIV/STI risk behavior and effect of these factors on HIV/STI exposure. As well as respondents' safe sexual behavior on availability of exposure of awareness program, knowledge and practice on condom use, use of service centre/facilities, relationship with sexual partner and availability of service nearby residence, etc are measured by various methods. Personal characteristics of the respondents must be taken into account, which give a series of information for reaching to the logical end of the study. Personal characteristics have its impact on overall nature of the respondents.

At flexibility, it determines all other characteristics of the respondents. The personal characteristics of respondents for this study are accounted as personal factors: age, marital status, educational status, and year of migration. These are the major factors that eventually, impact in all other attitudinal and bio-behavior of the respondents. This part provides information of the age group, marital status and educational status of the respondents, which directly and indirectly effect in the HIV risk behavior of the respondents. The table 1 shows that there are total of 550 sample size of MLM, distributed among the different district of mid and far western regions of Nepal.

As per convenient for further analysis of the data, each variable is taken mean, standard deviation, standard error and confidence interval (95% CI), which helps to convert numerical data into logical sequence. Analysis taking place on each personal variable; such as age, marital status and educational status and knowledge of HIV, safe practice, behavior, exposure on awareness campaign, facilities; by frequency distribution, which are shown in the table below.

3.1.1 Demographic Distribution of Respondents

At each location, information on population size was collected by district profile. Based on male population, male labor migrants were estimated. After estimating labor migrant's number in different locations, 30 clusters were selected by using the probability proportional to size (pps) method. A systematic random sampling technique was adopted to identify target populations in the clusters. The selection process were help to ensure that sampling were both random and representational.

Table 1: Demographic Distribution of the Respondents of Survey Districts Sampling Characteristics

Districts	Estimated Migrants	Frequency	Percent	District Weight
Banke	3430	64	11.7	0.5838
Surkhet	2522	47	8.6	0.6381
Achham	11379	213	38.7	3.8737
Doti	5949	111	20.3	2.0251
Kailali	4447	83	15.0	0.5702
Kanchanpur	1650	31	5.7	0.2808
Total	29376	550	100.0	

The total male populations of the six study districts are 1057788 and estimated male migrant populations are 29376. The actual sample was taken on the basis of male population of the study districts are 550

Prior to analyses; 'Post-stratification Weight' method was applied for the analyses of the study population and result are ready to generalized to the district population. These 'District' Weights' for the districts may be obtained by computing sample size in proportion to the estimated migrant population and dividing them by the sample size actually used. The result by applying 'District Weight' that are shown in the last column of the Table 1.

Table 2: Demographic Distribution of the Respondents by Birth District

Number of Respondents by Birth District	Frequency	Percent
Achham	214	38.9
Doti	116	21
Kailali	75	13.7
Banke	58	10.5
Surkhet	44	8.1
Kanchanpur	30	5.4
Salyan	2	0.3
Jumla	2	0.5
Dang	1	0.2
Bardiya	1	0.1
Dailekh	1	0.1
Jajarkot	1	0.1
Kalikot	1	0.1
Mugu	1	0.2
Bajura	1	0.1
Bajhang	1	0.3
Dadeldhura	1	0.3
Total	550	100.0

Above Table 2 shows that about 97.6 percentages of the respondents were born in the same district where interviewed. Rests 2.3 percentages were born in the different districts.

3.1.2 Distribution of the Respondents by Age Factor

30.55 Mean 8.333 StDev Percent age

Figure 1: Normal Distribution of Age of the Respondents

Above graphic presentation on Histogram show the normal distribution of age of the Respondents. Caption shows that Mean age and Standard Deviation.

Table 3: Age Category of the Respondents

Range of Age	Frequency	Percent
18–19 Yrs	37	6.7
20–24 Yrs	115	20.8
25–29 Yrs	150	27.3
30–34 Yrs	82	14.9
35–49 Yrs	166	30.3
Total	550	100.0

As shown in Table 3, highest percentages of the respondent's age are between 35 years to 49 years and second highest percentages are between 25 years to 29 years of age group.

3.1.3 Distribution of the Respondents by Marital Status

Marital Status of the respondent has been shown in Table 4. The 86.7% of respondents have married and 10.3% of respondents are unmarried, 1.8% of respondents are divorced/separated and 1.2% of respondents are widower.

Table 4: Basic Statistics on Marital Status

Marital Status	Frequency	Percent
Married	477	86.7
Divorced/Separated	10	1.8
Widower	6	1.2
Unmarried	57	10.3
Total	550	100.0

Table 5: Age Category by Marital Status

			Marital Status							
Age Category	Mar	ried	Divorced/	Separated	Wide	ower	Unm	arried	Total Percent	
	No.	%	No.	%	No.	%	No.	%		
18–19 Yrs	15	2.73	0	0.00	0	0.00	21	3.82	6.55	
20–24 Yrs	76	13.82	9	1.64	0	0.00	30	5.45	20.91	
25–29 Yrs	144	26.18	1	0.18	0	0.00	5	0.91	27.27	
30–34 Yrs	82	14.91	0	0.00	0	0.00	0	0.00	14.91	
35–49 Yrs	160	29.09	1	0.18	6	1.09	0	0.00	30.36	
Total*	477	86.73	11	2.00	6	1.09	56	10.18	100.00	

^{*}a Number of valid cases are different from the total count in the cross-tabulation table because the cell counts have been rounded

The result presented in the Table 5, highest percentage (29.09%) of married respondent are between the age of 35 to 49 years, followed by the age group 25–29 years (26.18%). Almost above 30 years are married where as ages below 25 years are found highest number (13.45%) of respondents are unmarried.

3.1.4 Distribution of the Respondents by Educational Level

The education levels of the respondents are also varied from Literate to higher level. The higher percentages 32.2% of the respondents are having 1–5 grades, and second highest percentages 25.4% of the respondents are having 6–9 grade. 11.6 percentages of the respondents are having SLC and above grade. 19.2 percentages of the respondents are found illiterate.

Table 6: Educational Level of the Respondents

Educational Status of the Respondents									
Illiterate	te Literate Grade 1–5 Grade 6–9 SLC and above Total								
106	64	177	140	64	550				
19.2	11.6%	32.2%	25.4%	11.6%	100%				

Table 7: Age Category by Educational Level

		Educational Category											
Age Category	Illite	erate	Lite	erate	Grade 1–5		Grade 6–9		sLC an above		_9		Total Percentages
	No.	%	No.	%	No.	%	No.	0/0	No.	%			
18–19 Yrs	1	0.18	1	0.18	15	2.73	16	2.91	4	0.73	6%		
20–24 Yrs	20	3.64	11	2.00	37	6.73	38	6.91	10	1.82	21%		
25–29 Yrs	20	3.64	19	3.45	50	9.09	34	6.18	26	4.73	27%		
30–34 Yrs	18	3.27	19	3.45	23	4.18	18	3.27	5	0.91	15%		
35–49 Yrs	47	8.55	14	2.55	52	9.45	34	6.18	19	3.45	30%		
Total*	106	19.27	64	11.64	177	32.18	140	25.45	64	11.64	100%		

^{*}a Number of valid cases are different from the total count in the cross-tabulation table because the cell counts have been rounded

The result presented in the Table 7 is cross-tabulation analysis about educational categories of the respondent by age categories. The respondent's ages 25 to 29 years having grade 1–5 and SLC and above are higher in percentages similar as the age group of 35 to 39 years.

3.1.5 Distribution of the Respondents by Ethnic Group

The various caste/ethnic groups were represented on the IBBS study. The higher proportions of those from Chhetri 37.4%; Kami 17.3%; Tharu 14.7%; Magar 5%; Brahmin 4.1%; Sarki 3.1%; Muslim 1.9%; Lohar 1.1%; etc are represented in the study. And less than one percentage of other ethnic groups was represented.

Table 8: Ethnic Group of the Respondents

	Ethnic Group/Caste	Frequency	Percent	E	thnic Group/Caste	Frequency	Percent
1	Chhetri	205	37.4	14	Sunuwar	3	0.5
2	Kami	95	17.3	15	Paswan/Pasi	2	0.3
3	Tharu	81	14.7	16	Brahman (Terai)	2	0.3
4	Damai/Dholi	51	9.3	17	Yadav	1	0.1
5	Magar	27	5	18	Gurung	1	0.2
6	Brahman (Hill)	22	4.1	19	Teli	1	0.2
7	Sarki	17	3.1	20	Sanyashi	1	0.2
8	Muslim	10	1.9	21	Sunar	1	0.2
9	Lohar	6	1.1	22	Hajam/Thakur	1	0.1
10	Thakuri	4	0.7	23	Dhobi	1	0.1
11	Chamar/Harijan/Ram	3	0.6	24	Rajbansi	0	0.1
12	Koiri	3	0.5	25	Majhi	0	0.1
13	Kurmi	3	0.5	26	Others	8	1.5
		•	Total .	550	•		

3.2 Migration Characteristics of the Respondents

The data presented in this section represents characteristics and history of male labor migrants.

3.2.1 Distribution of the Respondents by Migration Characteristics

Table 9: Migration Characteristics of the Respondents

Characteristics	N	Minimu m m Range		Mean	Std. Deviation	95% Confidence Interval of the Difference		
		Range	in Kange		Deviation	Lower	Upper	
Age of the Migrants	550	18	49	30.18	8.24414	29.48	30.88	
Age at first Marriage	466	10	34	19.42	3.227	19.12	19.72	
Age at first Migration	550	11	47	19.90	6.0852	19.38	20.42	
Age at first intercourse	512	10	34	18.62	3.06963	18.35	18.89	
Months spent aboard	550	3	251	35.96	37.92	32.73	39.19	
Months spent Nepal	550	1	129	17.74	17.97	16.21	19.27	

Distribution of score of ages shows in Table 9, which the respondents' ages ranged from 18 and 49 years. The Mean of the respondent's age is 30.18 years; Standard Deviation of sample means is 8.244 and 95% Confidence Interval of lower range is 29.48 and upper range is

30.88. The mean age of first marriage of the respondents is 19.42 years; with minimum age of marriage is only 10 years. And the mean age of first migration is 19.9 years, which ranged from 11 years to 47 years of age. The minimum age of first intercourse is 10 years. The respondents spends time in abroad are varied. The minimum years spend in abroad ranged from 3 months to 21 years (251 months). Mean of spend age in abroad is about three year (35.96 months).

3.2.2 District-wise Age at First Abroad by Respondents

The graphic on Box Plot show the distribution of district-wise age at first abroad in the study districts. In the graphic; the upper vertical line represents maximum age of the migrants, and lower minimum as respectively. Upper line of the box represents 3rd Quartile and lower 1st quartile and medium line is 2nd quartile represents Median age of first age of migration of the respondents.

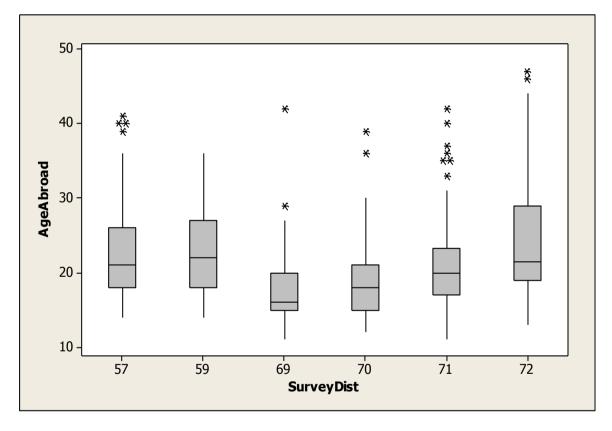


Figure 2: Age at First Migration of the Respondents

From Achham (Dist. Code 69) and Doti (Dist. Code 70) Districts, most of respondents are migrated at younger ages. 25% of them migrated under the age of below 18 yrs and 50% of them migrated under the age of 22 yrs. The median age of migration of Achham District is about 16 yrs and about 19 yrs in Doti District.

3.2.3 Past History of Migration of the Respondents

The study results show that the higher percentages of the respondents mostly stay with friends and relatives respectively while they live and work in India. While returned from

India, most of the respondents did not work in Nepal. More than half labor migrants are planning to go back for the work

Table 10: Past History of Migration

History	Frequency	Percent
Stay with	•	
Alone	96	17.5
With wife	46	8.3
With friends	248	45.1
Relatives	154	28.0
Others	6	1.1
Ever lived in Nepalese cities for	work	
Yes	17	3.1
No	526	95.7
Don't Know	6	1.2
Type of work in Nepal	-	
No	527	95.8
Labor	23	4.2
Total	550	100.0
Going aboard again	-	
Yes	336	61.0
No	175	31.8
Don't Know	40	7.2

3.2.4 Destination of Migration of the Respondents

The data presented in this section represents the migration destination and type of work in abroad.

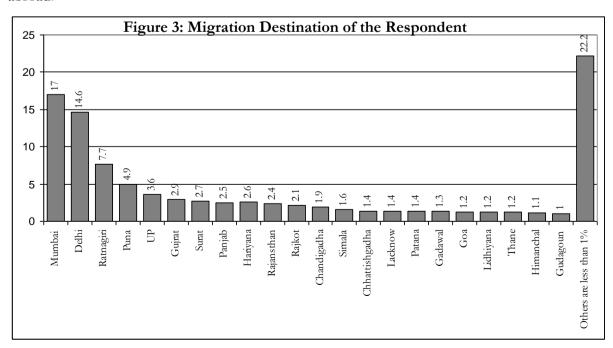


Table 11: Migration Destination of the Respondents

	Destination of Migration	Frequency	Percent
1	Mumbai	93	17
2	Delhi	80	14.6
3	Ratnagiri	42	7.7
4	Puna	27	4.9
5	UP	20	3.6
6	Gujrat	16	2.9
7	Surat	15	2.7
8	Panjab	14	2.5
9	Hariyana	14	2.6
10	Rajansthan	13	2.4
11	Rajkot	12	2.1
12	Chandigadha	11	1.9
13	Simala	9	1.6
14	Chhattishgadha	8	1.4
15	Lacknow	8	1.4
16	Patana	8	1.4
17	Gadawal	7	1.3
18	Goa	7	1.2
19	Lidhiyana	7	1.2
20	Thane	7	1.2
21	Himanchal	6	1.1
22	Gudagoun	5	1.0
23	Others are less than 1%	138	22.2%
	Total	550	100

The date reported that the respondent's destinations of migration are in various states of India. The most popular destinations; Mumbai and Delhi; covers more than 30 percentage of migration destination of the respondents. Ratnagiri remains the third popular destination among the labor migrants of the regions. The other popular destinations in India for labor migrants are Puna (4.9%); UP (3.6%); Gujrat (2.9%) etc. About 22% of other state are less than one percentage of Migration Destination.

3.2.5 Type of Work in abroad the Respondents

The Table 12, showed that the highest 52 percentages of respondents who had worked in India as laborers. The second highest 46 percentages of respondents worked as watchman. The other types of work reported as lower percentage.

Table 12: Type of Work in Abroad

Type of Work in Abroad	Frequency	Percent
Labor	286	52.0
Watchman	253	46.0
Cook	6	1.0
Business	2	.3
Waiter	1	.2
Supervisor	1	.2
Helper	1	.1
Mechanic	1	.1
Total	550	100.0

3.3 Sexual Behavior of the Respondents

This section presents the general findings of the study regarding sexual behavior. To find out the sexual behavior of the respondents, a series of questions were asked related to their sexual behavior, such as categorical age at first sexual encounter with female and sexual contact/relationships with female sex workers both in India and Nepal.

3.3.1 Distribution of the Respondents by Sexual Behavioral Pattern

Table 13: Frequency Distribution of Sexual Behavior of Respondent

Sexual Behavioral	Frequency	Percent	
Sexual Intercourse with Female			
Yes	523	95.	
No	27	5.0	
Sexual Intercourse with FSW			
Not applicable	27	5.0	
Yes	229	41.7	
No	293	53.3	
Sexual intercourse with FSW in N	lepal		
Not applicable	323	58.8	
Yes	65	11.8	
No	162	29.4	
Sexual intercourse with FSW in al	ooard		
Not applicable	321	58.3	
Yes	181	32.8	
No	49	8.8	
Total	550	100.0	

The study showed that the highest percentages of respondents who had have sex of female is 95 percentages. Among them, 41.7% of them had have sex with commercial sex workers. Similarly, 32.8 percentages of the respondents have sexual intercourse in abroad, which was three times higher than in Nepal.

3.3.2 Sexual Behavioral of the Respondents by Categorical Age

Table 14: Sexual Contact by Age Category

	S	Sexua	Intercours	e with Fema	ale			
Age Category	3	Yes		No			Total Number	
	Number	Pe	rcentage	Number	Percenta	ge		
18–19 Yrs	23		4	13	2		36	
20–24 Yrs	102		19	14	3		116	
25–29 Yrs	150		27	0	0		150	
30–34 Yrs	82		15	0	0		82	
35–49 Yrs	166		30	0	0		166	
Total	523		95	27	5		550	
	Sexual	Inter	course with	Female Sex	Worker			
Age Category	Not Applic	cable	Y	es	No		Total Number	
	Number	%	Number	0/0	Number	%		
18–19 Yrs	13	2	6	1	17	3	36	
20–24 Yrs	14	3	34	6	67	12	115	
25–29 Yrs	0	0	68	12	83	15	151	
30–34 Yrs	0	0	41	7	41	7	82	
35–49 Yrs	0	0	82	15	85	15	167	
Total	27	5	230	42	293	53	550	

The Table 14 shows the further details of sexual contact with female by categorical age. The almost 100% of the age group of 25–49 years of the respondents have sexual contact with female. The age below 20 years have sexual contact with female seems lower percentage in comparisons with higher age group. Similarly the respondents having sexual intercourse with commercial sex workers are higher percentages in the age group of 35–49 yrs.

3.3.3 Meeting Place for Commercial Sex

Table 15: Meeting Place with FSW

	in N	epal	in Ab	road
Meeting Place	Frequency	Percent	Frequency	Percent
Not applicable	518	94.2	484	88.0
Hotel/Lodge	17	3.1	7	1.3
Eating place (Restaurant)	0	0	1	.2
On the street	1	.2	2	.4
Forest	7	1.3	1	.2
Massage Centre	0	0	38	6.9
Workplace	4	.7	14	2.5
Others	3	.5	3	.5
Total	550	100.0	550	100.0

The Table 15 shows the further details of sexual contact with female by categorical age in different places. In this result, the respondents are 'not applicable' category includes those who never had sex, plus who do not have sex with FSW is 5 percentages.

3.4 Sexual Practice of the Respondents

This section presents the general findings of the study regarding safe sexual practice. To find out the safe sexual practice of the respondents, a series of questions were asked related to their safe sexual practice, such as use of condom during sexual encounter with wife, females/girl friends, commercial sex workers and any other male partner both in India and Nepal.

3.4.1 Distribution of the Respondents by Safe Sexual Practice

Table 16: Safe Sex Practice of the Respondents

		Safe Sexu	al Practices		
in Nepal	Frequency	Percent	in India	Frequency	Percent
Use condom during last i	ntercourse w	ith wife	Consistent use of condom	with female	n the last y
NA	70	12.8	NA	458	83.2
Yes	100	18.3	Every time	44	8.0
No	379	68.9	Most of the time	5	0.9
Total	550	100.0	Sometimes	3	0.6
Consistent use of condon	n with wife in	last year	Rarely	6	1.0
NA	70	12.8	Never	34	6.3
Every time	18	3.3	Total	550	100.0
Most of the time	15	2.8	Use of condom with girl fr	iend in the la	st sex
Sometimes	81	14.7	NA	458	83.2
Rarely	66	12.0	Yes	49	9.0
Never	299	54.4	No	43	7.8
Total	550	100.0	Total	550	100.0
Sex-intercourse with Fen	nale during pa	ıst year	Sex-intercourse with girl fr	iends during	past year
NA	35	6.4	NA	32	5.8
Yes	122	22.2	Yes	65	11.7
No	393	71.5	No	453	82.5
Total	550	100.0	Total	550	100.0
Use of condom during th	e last sex witl	n Female	Consistent use of condom	with FSW in	last year
NA	443	80.6	NA	460	83.7
Yes	49	8.9	Every time	51	9.3
No	58	10.5	Most of the time	5	0.9
Total	550	100.0	Sometimes	5	0.9
Consistent use of condon	n with female	in last yr	Rarely	3	0.5
NA	428	77.8	Never	26	4.6
Every time	35	6.4	Total	550	100.0
Most of the time	26	4.7	Use of condom during last	sex with FS	$\overline{\mathbf{w}}$

Sometimes	17	3.1	NA	376	68.4
Rarely	19	3.5	Yes	97	17.7
Never	25	4.5	No	76	13.9
Total	550	100.0	Total	550	100.0
Use of condom during the last sex with FSW			Sexual intercourse w/boyfriends during past year		
NA	485	88.2	Yes	5	0.9
Yes	30	5.5	No	545	99.1
No	35	6.3	Total	550	100.0
Total	550	100.0			
Consistent use of condom with FSW in last year			Use of condom with boy friend in the last sex		
NA	512	93.1	NA	546	99.3
Every time	17	3.0	Yes	1	0.2
Most of the time	4	.7	No	3	0.5
Sometimes	5	1.0	Total	550	100.0
Rarely	5	.9	Use condom at last intercourse with boyfriend		
Never	7	1.3	NA	538	97.8
Total	550	100.0	Every time	4	0.7
Use of condom during last sex w/ boyfriend			Never	8	1.5
NA	549	99.9	Consistent use of condom w/boyfriend in last yr		
No	1	0.1	NA	538	97.8
Total	550	100.0	Yes	4	0.7
Consistent use of condom w/ boyfriend in last yr		No	8	1.5	
NA	549	99.9	Total	550	100.0
Rarely	1	0.1			
Total	550	100.0			

The survey findings show that condom used during sexual intercourse with wife is found lower in percentages (18.3%). Similarly, in abroad, consistence use of condom during sexual intercourse in last year with girl friend is also lower in percentages 10.5% only. Furthermore the percentages of using condom become lower (only 9%) during last sexual intercourse with girl friends. Likewise, use of condom during last sexual intercourse with female in Nepal is found only 8.9 percentages. Similarly the result shows that consistence use of condom in last year is also found low in percentages (17.7% only).

In comparison with above categories, consistent use of condom during sexual encounter with female partner and FSW is found slightly higher in percentages which is 10.5% vs. never used 6.3% with female partner and 11.6 vs. never used 4.6 respectively. In contrast the result show that of using condom with MSM (boyfriend) is lower in percentage.

3.5 Level of Knowledge on HIV/AIDS

This section presents the general findings of the study regarding knowledge and awareness of HIV/AIDS. To find out the knowledge of the respondents, a series of questions were asked related to message of HIV/AIDS, source of information and participation on awareness program etc.

3.5.1 Knowledge of the Respondents regarding HIV/AIDS

Table 17: Knowledge of HIV/AIDS

Messages	Frequency	Percent
Never Heard	98	17.7
HIV is incurable disease	28	5.1
HIV/AIDS is transmitted through unsafe sex	142	25.9
HIV is sexually transmitted disease	1	.2
Avoid HIV through use of condom	99	18.1
HIV is transmitted through previously used syringe/blade	25	4.5
HIV is not transmitted through use of condom	9	1.6
Use condom during sexual intercourse	121	22.1
HIV is communicable disease, transmitted by HIV infected persons	5	.9
Obtain safe sex	10	1.9
Don't use previously used knife, blade, syringe	0	.1
Love to HIV infected Persons	11	2.0
Total	550	100.0

The result shows that the respondents who heard about HIV are higher in percentages (82.3%). About 26 percentages of the respondents know that HIV/AIDS is transmitted through unsafe sex. About 18 percentages of respondents are aware that HIV transmission can be avoided by using condom. Likewise 22 percentages of respondents used condom during sexual intercourse. About 4.5 percentages of respondents knows that HIV is transmitted through previously used syringe/blade. About 17.7 percentages of respondents responded that they never heard about HIV.

3.5.2 Awareness of the Respondents regarding HIV test

The Table shows that level of awareness of the respondents on HIV and felt need of blood test. About 9 percentages of the respondents have had HIV test among them 6.4% of them did voluntarily test. Almost respondents find out the test result.

Table 18: Awareness and Practice of HIV test

Practice on Safe Sex		Frequency	Percent
Ever had an HIV test	NA	119	21.6
	Yes	49	8.9

	No	382	69.5
	Total	550	100.0
	NA	501	91.1
	Within last 12 months	27	4.9
Most recent HIV test	Between 1–2 years	9	1.6
Most recent HIV test	Between 2–4 years	10	1.8
	More than 4 years ago	3	0.5
	Total	550	100.0
	NA	501	91.1
IIIV 44141	Voluntarily	35	6.4
HIV test voluntarily or required	Required	14	2.5
	Total	550	100.0
	NA	501	91.1
Eind and the month of the tHIW to a	Yes	46	8.4
Find out the result of that HIV test	No	3	.5
	Total	550	100.0

3.6 STI Treatment of the Respondents

This section presents the general findings of the study regarding STI status of the respondents. To find out the STI status of the respondents, a series of questions were asked related to their sign and symptoms of diseases, their treatment pattern, place of treatment etc. At the same time, physical examinations were done such as genital inspection, examination, palpitation, milking etc. On the basis of history and examination, diagnosis was made and provided treatment (medication) to the respondents at the survey site.

3.6.1 Previous History of STI Treatment of the Respondents

Table 19: Previous Treatment of STI

History of	Frequency	Percent	
	NA	523	95.1
	Private Clinic	16	2.9
	Health Post/Health Centre	2	0.4
Location of treatment	Hospital	6	1.1
	Pharmacy	2	.4
	Others	1	.2
	Total	550	100.0
	NA	523	95.1
Waiting to go for treatment	Less than 1 week	12	2.2
	After 1 week	1	0.2

	After 2–4 weeks	8	1.5
	After more than 4 weeks	6	1.1
	Total	550	100.0
	NA	523	95.1
	White discharge/discharge of pus	6	1.1
	Pain during urination	4	0.7
Treatment of symptoms	Burning sensation while urination	4	0.7
	Ulcer or sore around genital area	9	1.6
	No	4	0.7
	Total	550	100.0
	NA	523	95.1
Receive prescription for	Yes	16	2.9
medicine	No	11	2.0
	Total	550	100.0

The result shows in the Table 19, more than 95 percentages of the respondents did not have history of STI treatment. Rest of them they unusually preferred for the treatment centre is Private Clinic (2.9%) and they all received prescription for medication. They wait for treatment time is for less than one week (2.2%).

3.6.2 Symptomatic Treatment of STI

Table 20: Diagnosis and Treatment of STI on Field Site

Examination, Diagnosis and Treatment of STI Cases	Frequency	Percent
No symptoms/sign	321	58.3
Burning/pain during micturation	15	2.7
Urethral discharge	82	14.8
Ulcer and sore around genital area	73	13.2
Enlargement of inguinal Lymph nodes	31	5.6
HIV reactive	24	4.3
Ulcer & sore around genital area (VDRL)	6	1.1
Total	550	100.0

During survey period, the respondents were treated on survey site. The result shows in the Table 20, more than 58 percentages of the respondents did not have any sign and symptoms of STI. On the basis of their examination, 14.8 % found urethral discharge followed by ulcer around genital area (13.2%). Similarly 5.6% of them were diagnosed enlargement of inguinal lymph nodes. Among them the result shows that 4.3% found HIV reactive during the survey period. Other problems are in minority.

3.6.3 Diagnosis and Treatment of STI on Field Site by Age Category

Table 21: Symptomatic Treatment of STI on Field Site by Age Category

Diagnosis and Treatment of STI on Field Site by Age Category									
STI Symptoms/sign	18–19 Yrs	20–24 Yrs	25–29 Yrs	30–34 Yrs	35-49 Yrs	Total Number	Total Percentage		
No symptoms/sign	7.8%	21.8%	28.0%	13.4%	29.0%	321	100.0%		
Burning/pain during micturation	7.1%	14.3%	35.7%	7.1%	35.7%	14	100.0%		
Urethral discharge	4.9%	29.6%	24.7%	14.8%	25.9%	81	100.0%		
Ulcer and sore around genital area	6.8%	17.8%	21.9%	15.1%	38.4%	73	100.0%		
Enlargement of inguinal lymph nodes	6.7%	16.7%	43.3%	10.0%	23.3%	30	100.0%		
HIV reactive	.0%	.0%	16.7%	50.0%	33.3%	24	100.0%		
VDRL	.0%	.0%	16.7%	.0%	83.3%	6	100.0%		
Total Number	37	114	149	82	167	550			
Total Percentages	6.7%	20.8%	27.1%	14.9%	30.4%		100.0%		

The result shows in the Table 21, different diseases were treated in different age category. But in the case of HIV, the ages 30–34 years group are more vulnerable and second more vulnerable age group are 35–49 years. The age group of 25–29 years seem also exposed to HIV. Below 25 year are not affect by HIV during study period. Other diseases are disproportionate among all age categories.

3.6.4 Drugs and Alcohol Consumed by the Respondents

Table 22: Drug and Alcohol Used by the Respondents

Use of Drug and Alc	Frequency	Percent	
	Everyday	31	5.7
	2-3 times a week	138	25.1
Drink Alcohol	At least once a week	114	20.8
	Less than once a week	115	20.9
	Never	149	27.2
	Don't know	2	.3
Used drugs in the past 30 days	Yes	36	6.6
Osed drugs in the past 30 days	No	514	93.4
Even wood injecting days	Yes	6	1.1
Ever used injecting drugs	No	541	98.3

	Don't Know	3	.6
	0	544	98.9
Used Injecting drugs in the last 12 months	Yes	1	.2
	No	5	.9
Currently using injecting drug	0	549	99.8
Currently using injecting urug	No	1	.2
Last time, used syringe that had previously been used by someone	No	550	100.0
Past one month, used syringe that had	No	550	100.0
previously been used by someone	Total	550	100.0

The result shows in the Table 22, more than 72% of the respondents drink alcohol. about 25% of them drink 2–3 times a week, about 20% of them consumed at least once a week. 5.7% of them consumed daily. Similarly, 6.6% of the respondents also used to take drugs as well as used to take injecting drugs. The result shows that among injecting drugs user they are conscious, they do not utilize used syringes.

CHAPTER IV: RESULTS OF HIV PREVALENCE AND CONTRIBUTIN FACTORS

4 EFFECT OF DIFFERENT BEHAVIOR FACTORS ON HIV/STI REACTIVE

This chapter presents the findings of the study regarding effect of behavior factors on exposure on HIV and STI among the respondents. To find out the prevalence of HIV/STI of the respondents, detail history were taken regarding STI, observe sign and symptom of STI, performed genital examination, and blood test were also done in the survey site. At the same time, symptomatic treatment was provided at the site.

4.1 Effect of Behavior Factors on HIV Reactive

The effect of behavior factor on HIV reactive covered in this study. That has been divided into two categories. Average scores for behavior factor on exposure on HIV/STI for each of the two categories of these factors were estimated and compared statistically.

4.1.1 Sexual Intercourse with FSW vs. HIV/Syphilis Reactive

Table 23: Sexual Intercourse with FSW vs. HIV/Syphilis Reactive

				HIV/Syphi	lis Reactive		
Sexual Intercourse with FSW			Non Reactive	HIV Reactive	Syphilis Reactive	Both HIV & Syphilis Reactive	Total
		Count	27	0	0	0	27
	NA	% within Sexual Intercourse with FSW	100.0%	.0%	.0%	.0%	4.9%
	Yes	Count	207	13	1	8	229
Sexual Intercourse		% within Sexual Intercourse with FSW	90.4%	5.7%	.4%	3.5%	41.6%
	No	Count	286	3	5	0	294
		% within Sexual Intercourse with FSW	97.3%	1.0%	1.7%	.0%	53.5%
•		Count: Total of Columns	520	16	6	8	550
	Total	Total % of Sexual intercourse with FSW	94.5%	2.9%	1.1%	1.5%	100.0%

Table 23 display the result from—cross tabulation—sexual encounter with FSW vs. HIV reactive. That shows the respondents who have had sexual intercourse with female sex workers responses as "Yes", they are in 41.6 percentage. Among them 90.4 percent of respondents have found non reactive, 5.7 percentages found HIV reactive, 3.5 percentages found both HIV and syphilis reactive and 0.4 percentages have found syphilis reactive.

The respondents who did not have sexual intercourse with female sex workers responses as "No", they are in 53.5 percentages. Among them 97.3 percent of respondents have found non reactive, but 1 percentages found HIV reactive and 1.7 percentages have found syphilis reactive.

The respondents who never had have sex in their life are in "NA" category, they are 27 respondents, all of them have found non reactive.

In total, 94.5 percentages of the respondents are in non reactive category, 9.2 percentages of the respondents are in Reactive category (HIV Positive including syphilis infected), 1.1 of the respondents percentages are in syphilis infected.

Table 24: Sexual Intercourse vs. HIV Reactive

				HIV Reactive		
Sexual Intercourse with FSW			Reactive	Non Reactive	Total	
	Yes	Count	21	209	230	
		% within Sexual intercourse with FSW	9.1%	90.9%	100.0%	
Sexual Intercourse		Count	3	290	293	
	No	% within Sexual intercourse with FSW	1.0%	99.0%	100.0%	
Total	Count		24	499	523	
	% wit	hin Sexual intercourse with FSW	4.6%	95.4%	100.0%	

(Not Applicable' categories of Respondents are excluded in this analysis)

Above Table 24 show that further analysis on 2x2 table—incidence of HIV reactive are different between those having and not having sexual intercourse with FSW. Less than 10 percentages of those are being affected HIV among those who are having of Sexual Intercourse with FSW. One percentage of those are being affected HIV among those who are not having of Sexual Intercourse with FSW. That differentiate in proportion of those having reactive or non reactive between safer and exposed.

Different observed seen statistically significant by *Pearson Chi-Squire Test'* shown as below:

Pearson Chi-Square= 19.340, p -Value=< .001

4.1.2 Sexual Intercourse with FSW and HIV/STI Reactive

Table 25: Sexual Intercourse with FSW vs. HIV/STI Infections

	xual course	STI Symptoms/Sign								
with FSW				Urethral Ulcer/Sore Discharg around		Enlarge ment of Inguinal Lymph Nodes HIV + Syphilis Reactive		Syphilis Reactiv e VDRL	Total	
	Count	17	1	6	2	2	0	0	27	
NA	0/0	60.7%	3.6%	21.4%	7.1%	7.1%	.0%	.0%	5.1%	
Yes	Count	132	4	32	31	8	21	1	229	
165	%	57.6%	1.7%	14.0%	13.5%	3.5%	9.2%	.4%	41.6%	
No	Count	172	11	43	39	21	3	5	294	
No	0/0	58.5%	3.7%	14.6%	13.3%	7.1%	1.0%	1.7%	53.4%	
Total	Count	321	16	81	72	31	24	6	550	
Total	%	58.3%	2.9%	14.7%	13.1%	5.6%	4.4%	1.1%	100.0%	

Table 25 display the result from—cross tabulation—sexual encounter with FSW vs. HIV/STI Infection. That shows the respondents who have had sexual intercourse with female sex workers responses as **"Yes"**, they are in 41.6 percentage. Among them 57.6 percentages of respondents found no signs and symptoms of STI reactive, Urethral discharge 14%, Ulcer around genital area 13.5%, both HIV and Syphilis reactive 9.2%, burning during Micturation 1.7% and VDRL (syphilis) 0.4%.

The respondents who did not have sexual intercourse with female sex workers responses as "No", they are in 53.4 percentages. Among them 58.5 percentages of respondents found no signs and symptoms of STI reactive, Urethral discharge 14.6%, Ulcer around genital area 13.3%, both HIV and Syphilis reactive 1%, burning during Micturation 3.7% and VDRL (syphilis) 1.7%.

The respondents who never had have sex in their life are in "NA" category, they are 27 respondents. Among them 60.7 percentages of respondents found no signs and symptoms of STI reactive, Urethral discharge 21.4%, Ulcer around genital area 7.1%, burning during Micturation 3.6%.

In totality, 58.3 percentages of the respondents are in no sigh and symptom category, 14.7 percentages of the respondents having sign and symptom of Urethral discharge, Ulcer

around genital area 13.1%, both HIV and Syphilis reactive 4.4%, burning during Micturation 2.9% and VDRL (syphilis) 1.1%.

Table 26: Sexual Intercourse with FSW vs. HIV/STI Infected or None Infected

Sexual Intercourse with FSW			Not Infected	Infected	Total
	Yes	Count	132	97	229
		% within Sexual intercourse with FSW	57.6%	42.4%	100.0%
Sexual Intercourse	No	Count	172	121	293
		% within Sexual intercourse with FSW	58.7%	41.3%	100.0%
Total		Count	304	218	522
		% within Sexual intercourse with FSW	58.2%	41.8%	100.0%

(Not Applicable' categories of Respondents are excluded in this analysis)

Above Table 26 show that further analysis on 2x2 table—incidence of HIV/STI infected are not much different between those having and not having sexual intercourse with FSW. 42.4 percentages of those are being affected by STI/HIV among those who are having of Sexual Intercourse with FSW. Similar percentages (41.3%) of those are being affected STI/HIV among those who are not having of Sexual Intercourse with FSW. There if no differentiate in proportion of those having infected or not infected between safer and exposed.

Chi-squire test result shows that not significant. P value = >5

4.1.3 Cross Table Analysis on Carry Condom vs.HIV Reactive

Table 27: Carry Condom vs. HIV Reactive

		HIV R			
Carry Condoms			Reactive	Non Reactive	Total
	Yes	Count	8	163	171
		% within Usually carry condoms	4.7%	95.3%	100.0%
Usually Carry Condoms	No	Count	16	336	352
		% within Usually carry condoms	4.5%	95.5%	100.0%
Total		Count	24	499	523
		% within Usually carry condoms	4.6%	95.4%	100.0%

Above Table 27 show the analysis on 2x2 tables—incidence of HIV Reactive are not much different between those who usually carry condom or not carry condoms.

4.1.4 Cross Table Analysis on Age Factor vs.HIV Reactive

Table 28: Age Factor vs. HIV Reactive

	Acc	Catagoriu	HIV F		
	Age Category		Reactive	Non Reactive	Total
	Below 25 yrs	Count	0	151	151
		% within Age Category	.0%	100.0%	100.0%
		Count	24	376	400
	25 years and Above	% within Age Category	6.0%	94.0%	100.0%
		Count	24	527	551
Total		% within Age Category	4.4%	95.6%	100.0%

Above Table 28 show that further analysis on 2x2 table—incidence of HIV Reactive are much different between those above the age 25 years. 6 percentages of those are being affected by HIV among those who are above the age of 25 years. There is significantly differentiated in proportion of those having infected or not infected between age categories.

Chi-squire test result shows that statistically significant. P value = .002 Pearson Chi-Square = 9.473, p -Value = < .005

4.1.5 Cross Table Analysis on Age Factor vs.STI Infection

Table 29: Age Factor vs. STI Infected

	Acro	STI in	ж		
	Age Category		Not Infected	Infected	Total
	Below 25 yrs	Count	95	56	151
		% within Age Category	62.9%	37.1%	100.0%
		Count	226	174	400
	25 years and Above	% within Age Category	56.5%	43.5%	100.0%
		Count	321	230	551
Total	l	% within Age Category	58.3%	41.7%	100.0%

Above Table 29 show that further analysis on 2x2 table—incidence of STI infection are not much different between those at different age categories. About 57 percentages of those are being affected by STI among those who are below the age of 25 years. There is significantly not differentiated in proportion of those having infected or not infected between age categories.

Chi-squire test result shows that statistically significant. P value = .173

Pearson Chi-Square = 1.854, p - Value => .005

4.1.6 Cross Table Analysis on Age Factor vs. Sexual Intercourse with FSW

Table 30: Sexual Intercourse vs. Age Factor

			Age Ca	tegories	
Sexual 1	Sexual Intercourse with FSW				Total
				Yrs	
		Count	40	189	229
	Yes	% within Sexual intercourse with FSW	17.5%	82.5%	100.0%
Sexual Intercourse with FSW	No	Count	83	210	293
		% within Sexual intercourse with FSW	28.3%	71.7%	100.0%
		Count	123	399	522
Total		% within Sexual intercourse with FSW	23.6%	76.4%	100.0%

Above Table 30 show that further analysis on 2x2 tables—Respondent having sexual intercourse with FSW are different between those above the age 25 years. 47.4 percentages of those are having sexual intercourse among those who are above the age of 25 years. There is significantly differentiated in proportion of those having sexual intercourse or not having sexual intercourse between this age categories.

Chi-squire test result shows that statistically significant. P value = .004 Pearson Chi-Square = 8.418, p -Value = < .005

CHAPTER V: KEY FINDINGS OF THE STUDY

5 FINDINGS FROM GENERAL ANALYSIS AND EFFECT OF DIFFERENT FACTORS ON HIV PREVILENCE

The findings from the general analysis, effect of behavior factors on HIV reactive and findings from chi-squire test are highlighted in this chapter.

5.1 The Findings from 'Post-stratification Method' of District Weight

The results and discussion from analysis are based on 'Post-stratification Weighing Method'. This weighing value of the study districts are given details in the Methodology Chapter—'Analysis of Data' with detail description and display in tabular form.

- District Weight 0.5838 for Banke (district code 57)
- District Weight 0.63810 for Surkhet (district code 59)
- District Weight 3.8737 for Achham (district code 69)
- District Weight 2.0251 for Doti (district code 70)
- District Weight 0.57020for Kailali (district code 71)
- District Weight 0.2808 for Kanchanpur (district code 72)

These 'District Weights' for the study districts may be obtained by computing sample size in proportion to the estimated migrant population (the estimated number of male labor migrants/sample frame/study population were found **29376** in the six districts in the current SSO survey) and dividing them by the sample size actually used.

5.2 The Findings from District-wise Age at First Abroad

From Achham and Doti Districts, most of respondents are migrated at younger ages. 25% of them migrated under the age of below 18 yrs and 50% of them migrated under the age of 22 yrs. The median age of migration of Achham is about 16 yrs and about 19 yrs in Doti District.

5.3 The Findings from Effect of Behavior Factor on HIV Reactive

5.3.1 Age Factor vs. HIV Reactive

Age factor played a significant role on incidence of HIV Reactive. From the further analysis on 2x2 table—incidence of HIV Reactive are much different between those above the age 25 years. 6 percentages of those are being affected by HIV among those who are above the age of 25 years. There is significantly differentiated in proportion of those having infected or not infected between age categories.

Different observed seen statistically significant by *Pearson Chi-Squire Test'*. P value= .002 *Pearson Chi-Square= 9.473, p -Value=< .005*

5.3.2 Age Factor vs. STI Infection

At the same time further analysis on 2x2 on incidence of STI infection, there are not much different between those at different age categories. About 57 percentages of those are being affected by STI among those who are below the age of 25 years. There is significantly not differentiated in proportion of those having infected or not infected between age categories.

Different observed seen statistically **not significant** by *Pearson Chi-Squire Test'*. **P** value= .173

Pearson Chi-Square= 1.854, p -Value=> .005

5.3.3 Sexual Encounter with FSW vs. HIV Reactive

The analysis on 2x2 table found that an incidence of HIV reactive are different between those having and not having sexual intercourse with FSW. Less than 10 percentages of those are being affected HIV among those who are having of Sexual Intercourse with FSW. One percentage of those are being affected HIV among those who are not having of Sexual Intercourse with FSW. That differentiate in proportion of those having reactive or non reactive between safer and exposed.

Different observed seen **statistically significant** by *Pearson Chi-Squire Test':* **Pearson Chi-Square = 19.340, p -Value = < .001**

5.3.4 Sexual Encounter with FSW vs. HIV /STI Infection

The analysis on 2x2 table found that an incidence of HIV/STI infected are not much different between those having and not having sexual intercourse with FSW. 42.4 percentages of those are being affected by STI/HIV among those who are having of Sexual Intercourse with FSW. Similar percentages (41.3%) of those are being affected STI/HIV among those who are not having of Sexual Intercourse with FSW. There if no differentiate in proportion of those having infected or not infected between safer and exposed.

Different observed seen statistically **not significant** by *Pearson Chi-Squire Test'*. **P value= >5**

CHAPTER VI: CONCLUSSION AND RECOMMENDATIONS

CONCLUSION

To meet the objective of the IBBS study, different statistical analyses were done to determine the prevalence of HIV among returnee male labor migrants and assess their HIV/STI risk-related behaviors. There are various factors which play significant role on HIV and STI prevalence.

Their involvement in unsafe sexual activities causes high percentages of being exposed with HIV and other sexual transmitted infections. This is due to various contributing factors lack of employment opportunity, lack of educational opportunity, poverty, conflict, etc played major role for 'large scale-Migration' in neighbor country. Similarly, their personal factors also played major role of being exposed with HIV and other sexual transmitted infections. Most of the migrants are younger group and they are from very remote part of Country, where geographical disproportion also affects to necessity for migration.

Regarding their sexual behavior, the highest percentages of respondents who had have sex with girl friend/female is 95 percentages. Among them, 41.7% of them had have sex with commercial sex workers. Similarly, 32.8 percentages of the respondents have sexual intercourse in abroad, which was three times higher than in Nepal. The almost all percent (100%) of the age group of 25 to 49 years of the respondents have sexual contact with female and sexual intercourse with commercial sex workers are higher percentages in the age group of 35–49.

Practice of use of condom during sexual intercourse found very low, so the respondents exposed with unsafe sex due to lack of knowledge, unaware about HIV and other sexual transmitted infections, no practice to carry condoms, not availability at their convenience, no participation on awareness raising programs, lack of knowledge of proper source of receiving information on HIV/AIDS, no practice of blood test, etc

The analyses on HIV reactive and their contributing factors such as Sexual Encounter with FSW vs. HIV Reactive found that incidence of HIV reactive are different between those having and not having sexual intercourse with FSW. About 10 percentages of those are being affected HIV among those who are having of sexual intercourse with FSW. One percentage of those are being affected HIV among those who are not having of Sexual Intercourse with FSW. That differentiate in proportion of those having reactive or non reactive between safer and exposed with sex workers. Different observed seen **statistically significant** by *Pearson Chi-Squire Test'*.

Age factor played a significant role on incidence of HIV Reactive. The analysis result shows that incidence of HIV Reactive are much different between those above the age 25 years. 6 percentages of those are being affected by HIV among those who are above the age of 25 years. There is significantly differentiated in proportion of those having infected or not infected between age categories.

During survey period, the respondents were examined, diagnosed and provided treated of sexual Transmitted Infections on survey site. The result shows that more than 42 percentages of the respondents have found sign and symptoms of STI. On the basis of their examination, found

urethral discharge is high in percentages followed by ulcer around genital area and enlargement of inguinal lymph nodes. Among them the result shows that 4.3% found HIV reactive during the survey period.

RECOMMENDATIONS

Recommendations are made on the basis of study, which are as follows:-

- 1. HIV prevention programs; Community networks; Education and awareness raising programs; Behavior change trainings; Free condom distribution programs; should be addressed to the target population.
- 2. Modifications on tool are needed to simplify, short and snappy which should be focused on objectives.
- 3. Method of Analyses should be written markedly under Methodology chapter.

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ANNEX: A —APPLICATION OF 'POST-STRATIFICATION WEIGHT' OF 2010 DATA IN TABULAR FORM

Table A-1: Total Population of the Six District

Study District	District Code	Males	Females	TOTAL	Sampled Number	Percent
Banke	57	198231	187609	385840	110	20.0
Surkhet	59	142817	145710	288527	74	13.5
Achham	69	108998	122287	231285	55	10.0
Doti	70	103521	123545	227066	55	10.0
Kailali	71	312311	304386	616697	146	26.4
Kanchanpur	72	191910	185989	377899	110	20.2
	TOTAL	1057788	1069526	2127314	550	100.0

Table A-2: Estimation of Migrant Population for the Six District

Districts where the survey was conducted	DIST Code	Total Migrants Population	Sampled Num	Population Wt	Sample Wt	Total Wt	Weighted Num
Banke	57	3430	110	0.116751	0.200000	0.58375728	64
Surkhet	59	2522	74	0.085850	0.134545	0.63807239	47
Achham	69	11379	55	0.387366	0.100000	3.87365775	213
Doti	70	5949	55	0.202507	0.100000	2.02507156	111
Kailali	71	4447	146	0.151374	0.265455	0.57024405	83
Kanchanpur	72	1650	110	0.056152	0.200000	0.28075999	31
Total		29376	550	1.000000	1.000000	7.97156302	550

Table A-2: Demographic Distribution of the Respondents of Survey Districts Sampling Characteristics

Study District	Total Male Population	Estimated Migrant %	Estimated Migrants	Sample Size (Actual)	Sample Size (Needed)	District Weight
Banke	198231	1.73	3430	110	64	0.5838
Surkhet	142817	1.77	2522	74	47	0.6381
Achham	108998	10.44	11379	55	213	3.8737
Doti	103521	5.75	5949	55	113	2.0251
Kailali	312311	1.42	4447	146	83	0.5702
Kanchanpur	191910	0.86	1650	110	31	0.2808
TOTAL	1057788		29376	550	550	

ANNEX: B—DISPLAY OF NUMBER AND PERCENTAGE OF 2010 DATA IN TABULAR FORM

Table B-1: District-wise Educational Level

-	-	Education					
Districts where conducted	e the survey was	Illiterate	Literate, not schooling	Grade 1– 5	Grade 6– 9	SLC and above	Total
Banke	Number	18	15	15	13	4	65
	% within Education	17.1%	23.4%	8.5%	9.4%	6.2%	11.8%
Surkhet	Number	5	1	18	19	4	47
	% within Education	4.8%	1.6%	10.2%	13.8%	6.2%	8.6%
Achham	Number	50	27	54	50	31	212
	% within Education	47.6%	42.2%	30.5%	36.2%	47.7%	38.6%
Doti	Number	16	6	63	22	4	111
	% within Education	15.2%	9.4%	35.6%	15.9%	6.2%	20.2%
Kailali	Number	13	2	23	26	19	83
	% within Education	12.4%	3.1%	13.0%	18.8%	29.2%	15.1%
Kanchanpur	Number	3	13	4	8	3	31
	% within Education	2.9%	20.3%	2.3%	5.8%	4.6%	5.6%
Tota	Total Count		64	177	138	65	549
	% within Education	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Table B-2: Awareness on HIV of the Respondent

Knowle	Knowledge on HIV		
	Don't Know	133	24.2
	Kailali	140	25.5
	Kanchanpur	51	9.3
Place of HIV/AIDS information	Doti	44	8.0
in Nepal	Achham	46	8.4
	Banke	72	13.1
	Surkhet	64	11.6
	Total	550	100.0
Close relative or close friend has	NA	439	79.8
died of AIDS	Yes, close relative	34	6.2

	Yes, close friend		45	8.2
	No		32	5.8
		Total	550	100.0
	NA		119	21.6
	Yes		253	46.0
Healthy looking person can be infected with HIV	No		160	29.1
iniceted with 111 v	Don't Know		18	3.3
		Total	550	100.0
	NA		119	21.6
A pregnant woman infected with	Yes		277	50.4
HIV/AIDS transmit the virus to	No		99	18.0
her unborn baby	Don't Know		55	10.0
		Total	550	100.0
	NA		273	49.6
A pregnant woman can reduce the risk of transmission of HIV to	Take medication		150	27.3
her unborn child	Don't know		127	23.1
		Total	550	100.0
	NA		120	21.8
A woman with HIV/AIDS	Yes		265	48.2
transmit the virus to her newborn child through breastfeeding	No		112	20.4
cind unough breasticeding	Don't Know		53	9.6
		Total	550	100.0

Table B-3: Awareness of Availability of Condom of Respondent

Awareness of Condom Use		Frequency	Percent
	Yes	177	32.2
Usually carry condoms	No	373	67.8
	Total	550	100.0
	Not Applicable	33	6.0
	Up-to 5 minutes	156	28.4
	6 - 10 minutes	106	19.3
Time consume for getting condom	11 - 15 minutes	88	16.0
Condom	16 - 20 minutes	44	8.0
	More than 20 minutes	123	22.4
	Total	550	100.0
	Always free of cost	236	42.9
	Purchase	70	12.7
Usually obtain condom	Both ways	110	20.0
	Condom never used	134	24.4
	Total	550	100.0
	NA	370	67.3
Place of purchasing condom	Pharmacy	102	18.5
	General retail store	31	5.6

	Private clinic	47	8.5
	Total	550	100.0
	Not applicable	134	24.4
	Pharmacy	265	48.2
Most convenient place to purchase condom	General retail store	68	12.4
parenase condoni	Private clinic	83	15.1
	Total	550	100.0

Table B-4: Symptom of STI among Reactive Cases

White Discharge/Discharge of Pus/Dhatu	Flow	Frequency	Percent
No		17	94.4
Yes		1	5.6
	Total	18	100.0
Burning Sensation while Urinating		Frequency	Percent
Yes		3	16.7
No		15	83.3
_	Total	18	100.0
Ulcer or Sore around Genital Area		Frequency	Percent
Not Applicable		15	83.3
Yes		2	11.1
No		1	5.6
	Total	18	100.0

Table B-5: Source of Information on HIV/AIDS

Source of	Frequency	Percent	
	Yes	53	9.6
Met, discussed, interacted with	No	492	89.4
PE, CM in the last 12 months	No Response	6	1.0
	Total	550	100.0
	No	544	98.8
Provide Information from Government centers	Yes	6	1.2
	Total	550	100.0
	No	546	99.3
Save the Children	Yes	4	.7
	Total	550	100.0
N-SARC	No	549	99.9
1 Office	Yes	1	.1

		Total	550	100.0
	No		550	99.9
NRCS	Yes		0	.1
		Total	550	100.0
INF/Paluwa	No		550	100.0
1141 / 1 aidwa		Total	550	100.0
Siddhartha club		550	100.0	
olddiiaitiia cido		Total	550	100.0
	No		547	99.5
FHI	Yes		3	.5
		Total	550	100.0
	No		525	95.5
Others	Yes		25	4.5
		Total	550	100.0
	No		533	96.9
Don't know	Yes		17	3.1
		Total	550	100.0

Table B-6: HIV/AIDS Awareness Raising Program

Participated in HIV/AIDS awa	Frequency	Percent	
D	Yes	25	4.6
Participated in HIV/AIDS awareness raising program	No	525	95.4
	Total	550	100.0
	Yes	6	1
Street drama	No	544	99
	Total	550	100.0
	Yes	4	0.8
AIDS day	No	546	99.2
	Total	550	100.0
	Yes	8	1.5
Condom day	No	542	98.5
	Total	550	100.0
	Yes	4	0.7
Video Show	No	546	99.3
	Total	550	100.0

	Yes		10	1.8
Group Discussion	No		540	98.2
		Total	550	100.0
	Yes		4	0.7
Talk Program	No		546	99.3
		Total	550	100.0
HIV /STI Related Training	Yes		0	0
	No		550	100
		Total	550	100.0
	Yes		0	0
HIV/AIDS related workshop	No		550	100
		Total	550	100.0
	Yes		0	0
Demonstration of Condom use	No		550	100
		Total	550	100.0
	Yes		2	0.3
Others	No		548	99.7
		Total	550	100.0

ANNEX: C—FREQUENCY DISTRIBUTION OF BIOLOGICAL TEST RESULT—UN-WEIGHTED RESULTS

This section presents the findings of the study regarding HIV prevalence among the respondents. To find out the prevalence of HIV of the respondents, blood sample were collected in the survey site.

HIV reactive status was derived from the 'Determine' HIV test from the blood samples collected in 3 to 5 capillary tubes by finger prick from the respondents. 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.

Table C-1: Biological Test Results

Biological Test	Frequency	Percent		
Non Reactive	532	96.7		
HIV Reactive	8	1.5		
Syphilis Reactive	8	1.5		
Both HIV+ Syphilis Reactive	2	.4		
Total	550	100.0		

In the biological test at each field site; each and every returnee migrants were participated for blood test. Test result shows the status of HIV reactive cases among 10 out of 550 respondents (1.9 percentages) were found positive and eight were found syphilis infected cases. Among 10 reactive cases; tow were infected both HIV and syphilis.

Table C-2: District-wise HIV and Syphilis among Reactive Case

	District-wise HIV and Syphilis Reactive Cases									
District	Non reactive	HIV Reactive	Syphilis Reactive	HIV+ Syphilis Reactive	Total					
Banke	108	0	2	0	110					
Surkhet	69	2	3	0	74					
Achham	50	3	0	2	55					
Doti	53	1	1	0	55					
Kailali	143	1	1	0	145					
Kanchanpur	109	1	1	0	111					
Total	532	8	8	2	550					

Demographic Characteristics of HIV Reactive

The effect of personal factors (age, marital status and educational level) on HIV reactive covered in this study that has been divided into two categories. Average scores for personal factor on biological factors (exposure on HIV) for each of the two categories of these factors were estimated and compared statistically.

Table C-3: Demographic Characteristics of the Reactive Cases

	A	ge Cate	gory o	f Reac	tive Case	es				
Age Category			Frequency			Percent				
20–24 Yrs			1				5.	6		
25–29 Yrs			3	3			16	.7		
30–34 Yrs			(5			33	.3		
35–49 Yrs			8	3			44	.4		
Tot	tal		1	8			100	0.0		
	Edu	icationa	1 Leve	l of Re	active Ca	ases				
			Reactiv	ve Cases	3					
Educational Level		HIV Reactive		Syphilis Reactive		Both (HIV+ Syphilis) Reactive		Total		
Illiterate	4			0		0		4		
Literate, not schooling		2			3		1	6		
Grade 1–5		1		5		0		6		
Grade 6–9		1		0		1		2		
То	tal	8		8		2		18		
	M	Iarital St	tatus o	f Reac	tive Case	es				
			Reactiv	ve Cases	3					
Marital Status	Non	reactive	HIV R	Leactive	Syphilis Reactive				Both (HIV+ Syphilis) Reactive	Total
Married		439		8	7		2	456		
Divorced/Separated		6		0	0	0		6		
Widower		4		0	0		0	4		
Never married		83		0	1	. 0		84		
Total		532		8	8	3 2		550		

Table 2C-4: HIV Reactive Cases by Age Category

Age Category	HIV Reactive	Total
25–29 Yrs	2	2
30–34 Yrs	6	6
35–49 Yrs	2	2
Total	10	10

This table shows that the effect of HIV reactive on categorical age group. HIV reactive is found in the age group of 25 to 49 years. Among them maximum 60 percentage of reactive cases found in the age group of 30–34 years.

Table C-5: HIV Reactive Cases by Sexual Intercourse with FSW

		HIV Reactive	Total	
Sexual Intercourse with FSW	Yes	7	7	
	No	3	3	
	Total	10	10	

This table shows that the effect of HIV reactive by sexual contact with female sex workers. Noticeably, study shows that the respondents who did not have sex with FSW are found HIV reactive.

Table C-6: Socio-Behavior Characteristics of HIV Reactive Cases

	N Minimum		Maximum	M	Std.	95% CI		
	N	Minimum	Maximum	Mean	Deviation	Lower	Upper	
Age in Years	10	25	39	31.40	4.142	28.78	34.02	
Age at first marriage	10	12	26	18.80	4.022	16.26	21.34	
Age at first time go to abroad	10	12	25	17.80	4.315	15.07	20.53	
Months spent aboard	10	8	190	69.10	55.380	34.07	104.13	

This table shows that the effect of HIV reactive by socio-behavior characteristics of the respondents. The study shows that the respondents mean age of 31.40 years group are more exposed with HIV. Most of them are migrated at mean age of below 18 years. They spent average years about 6 years which ranged from 8 month to 15 years in abroad.

Table C-7: HIV Cases vs. Type of work in Abroad

	Type of wor		
HIV Cases	Watchman	Labor	Total
HIV Reactive	7	3	10

This table shows that the effect of HIV reactive by type of work. The study shows that the respondents who worked as watchman are found 70 percentages of HIV reactive.

ANNEX: D—DISPLAY OF NUMBER AND PERCENTAGE OF 2006, 2008 AND 2010 DATA IN TABULAR FORM

Table D-1: Socio-Demographic Characteristics of Respondents, 2006, 2008 and 2010

	New Era 2006				New Era 2008				SSO 2010 Mid-Far		
Characteristics	W/estern			l-Far stern		Western		Mid-Far Western		N	0/0
Age of Respondents											
Below 25 years	167	46.3	3	164	45.5	139	38.7	122	33.8	151	27.4
25 years or above	193	53.7	7	196	54.4	221	61.4	238	66.1	399	72.6
Range	18-4	9 years	s	18-48	3 years	18-4	9 years	18-4	9 years	18-49	years
Mean Age:	2	27.8		2	7.7	2	29.6	2	29.2	30.	.18
Median Age	2	25.0		2	6.0	2	27.0	2	28.0	2	8
Total	360	100)	360	100	360	100	360	100	550	100
Education											
Illiterate	27	7.5	5	51	14.2	38	10.6	67	18.6	106	19.2
Literate, no schooling	17	4.7	7	10		19	5.3	15	4.2	64	11.6
Grade 1 – 5	132	36.	7	122	33.9	140	38.9	131	36.4	177	32.1
Grade 6 – 9	156	43	3	148	41.1	112	31.1	128	35.6	140	25.4
SLC and Above	28	7.8	3	29	8.1	51	14.2	19	5.3	64	11.6
Ethnic/Caste Group											
Brahmin	85	23.	6	49	13.6	80	22.2	28	7.8	22	4.1
Damai/Sarki/Kami	73	20	3	104	28.9	82	22.8	102	28.3	163	29.7
Magar	51	14.	2	30	8.3	55	15.3	17	4.7	27	5.0
Chhetri/Thakuri	48	13	3	119	33.1	52	14.4	150	41.7	205	37.4
Terai Caste	41	11.	4	12	3.3	25	7	7	2	11	1.9
Musalman	21	5.8	3	3	0.8	14	3.9	4	1.1	10	1.9
Tharu	5	1.4	1	37	10.3	13	3.6	44	12.2	81	14.7
Others (Dhobi, Sunwar, Sundi, Rajbhar, Gaderi/Pal, Newar, Tamang etc)	23	10.	1	4	1.7	39	10.8	8	2.4	33	6.0
Marital Status			-								
Married	259	71.		303	84.2	281	78.1	317	88.1	477	86.7
Divorced/Separated/Widow	8	2.2	2	11	3.1	5	1.4	6	1.6	16	3.0
Never Married	93	25.	8	46	12.8	74	20.6	37	10.3	57	10.3
Total	360	100)	360	100	360	100	360	100	550	100

Table D-2: Male Labor Migrant's Age at First Migration and Duration of Stay in India, 2006 and 2008

Characteristics	New Era 2006					New Era 2008				SSO 2010 Mid-Far Western	
	We	Western		Mid-Far Western		Western		Mid-Far Western		0/0	
Age at First Migration	1										
Below 25 years	319	88.6	310	86.2	319	88.6	290	80.5	445	80.9	
Above 25 years	41	11.5	50	14	41	11.3	70	19.5	105	19.1	
Range Age	7 - 44 years		10 - 40 years		9 - 43 years		7 - 46 years		11–47 yrs		
Mean		18.6	19.8		18.7		2	20.1	19.9		
Median		18.0	19.0		18.0		18.0		20		
Duration of Stay in In	dia										
Less than 12 months	33	9.2	66	18.4	38	10.6	70	19.5	133	24.1	
13 – 24 months	43	11.9	60	16.7	41	11.4	53	14.7	67	12.1	
25 and above months	284	78.9	234	65	281	78.1	237	65.8	351	63.8	
Total	360	100	360	100	360	100	360	100	550		

Table D-3: Sexual Behavior of Male Labor Migrants, 2006 and 2008

Characteristics			New 20	Era 06		New Era 2008				SSO 2010 Mid-Far	
Characteristics	West	Western Mid		d-Far Western		Western		Mid-Far Western		N	%
Ever had sex with a fer	male										
Yes	330	91	.7	347	96.4	313	86.9	345	95.8	523	95
No	-	-		-	-	-	-	-	-	27	5
Total	267	10	0	314	100	286	100	323	100	550	100
Age at First Sex		•									•
Less than 19 years	209	63	5.4	260	74.9	171	54.7	234	67.8	352	64.0
20 – 24	94	28	3.5	78	22.5	111	35.5	93	27	138	25.1
25 years and above	27	8.	.2	9	2.6	31	9.9	16	4.6	33	5.9
Never had sex with Female	30	8.	.3	13	3.6	47	13.1	15	4.2	27	5.0
Mean	-	19	0.0	-	17.9	-	19.4	-	18.4	-	18.91
Median	-	18	3.0	-	18.0	-	19.0	-	18.0	-	18
Age at First Marriage											
Below 15 years	8	3	3	12	3.8	19	6.6	11	3.4	17	3.1
15-19	104	3	9	171	54.5	114	39.9	171	52.9	256	46.6
Above 20 years	155	58	3.1	131	41.7	153	53.5	141	43.6	220	40.1
Unmarried	-		-	-	-	-	-	-	-	57	10.3
Mean	-	20).7	-	19.3	-	20.1	-	19.5	-	19.42
Median	-	20	0.0	-	19.0	-	20.0	-	19.0	-	18.0
Total	360	10	00	360	100	360	100	360	100	550	100

Table D-4: Sexual Encounter of Male Labor Migrants with FSWs in Nepal, 2006 and 2008

Description	New Era 2006				New Era 2008				SSO 2010 Mid-Far	
Description	Western		Mid- Far - Western		Western		Mid- Far – Western		N	%
Ever Had Sex with a Sex Worker in India	62	17.2	97	26.9	35	9.7	78	21.7	181	32.8
Use of Condom During the Last Sex with FSWs in India *	7	11.3	22	22.7	4	11.4	12	16.7	376	68.4
Ever had sex with FSWs in Nepal	13	3.6	29	8.1	9	2.5	23	6.4	65	11.6
Use of Condom During the Last Sex with FSWs in Nepal **	8	61.5	8	27.6	4	44.4	2	8.7	31	6.9
Total	360	-	360	-	360	-	360	-	550	-

ANNEX: E—TOOL USED IN IBBS SURVEY IN 2010 (QUESTIONNAIRE FORM)

Informed Consent form

INTEGRATED BIOLOGICAL AND BEHAVIOUAL SURVEY (IBBS) AMONG MALE LABOR MIGRANTS IN MID WESTERN and FAR-WESTERN NEPAL -2010

Namaste!	
My name is, I am here from Success research study. This study is being conducted by Su limited with technical assistance from Save the Ch and STD Control (NCASC), Ministry of Health a taking process, during this data collection, I will ask behavior, use and promotion of condoms, STI/I believe that you will provide correct information of for HIV testing. If you have any STI symptoms, w information given by you will be strictly treated as a talk because your name will not be mentioned in the 60 minutes to complete the interview and blood survey any time you want to. You do not have to answer. But I hope, you will participate in this survanswers of all the questions.	ccess Search Option (SSO) and Intrepid Pvt. ildren Nepal and National Centre for AIDS and Population. As explained in the consent you some questions that will be about sexual HIV/AIDS, drugs and migration pattern. I anly. We will also draw a few drops of blood we will provide treatment free of charge. The confidential. Nobody will know whatever we ais form and blood sample. It will take about sample collection. You are free to quit the answer questions that you do not want to
Would you be willing to participate? 1. Yes 2. No	
Signature of Interviewer: Name of interviewer:	
Definition of Respondent "Men aged between 18 to 49 years who have got	
months and have returned home within the last	·
Checked by the supervisor: Signature:	Date:

CONSENT FORM FOR HIV TESTING

This is to state that I have been counseled about the HIV test to be conducted on me and have been explained about the implications of the test result. All details pertaining to HIV, Its transmission, testing procedure, its limitations and interpretation of results have been explained tin understandable way. I have given the date and time for getting the results. I also understand that I am free to decide to be involved for HIV testing and also ensured for help if I needed from the center without being discriminated against.

I hereby give my consent for the test to be conducted in order for me to know my HIV status.
Signature of client

Date:
Counselor's name and Signature:
Date:

ANNEX: F—QUESTIONNAIRE/TOOLS FOR IBBS SURVEY

1.0 GENERAL INFORMATION

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

2.0 PERSONAL INFORMATION

No.	Questions and Filters	Coding Categories	Skip To
201	How old are you?	Age	
		(Write the completed years)	
202	What is your caste?	Ethnicity/Caste	
	(Write code no. as per Ethnicity/Caste	(Specify)	
	Manual)	Code No	
203	What is your educational status?	Illiterate0	
	(Circle '0' if illiterate, '1' for the literate	Literate 1	
	without attending the school, and write	Grade	
	exact number of the	(write the completed grade)	
	completed grade if attending school)		
204	What is your present marital status?	Married1	
		Divorced/permanently	
		separated2	
		Widower3	
		Never married4	206
205	How old were you when you were first	Age	
	married?	(Write the completed years)	
206	With whom are you staying currently?	With wife 1	
		With male friends2	
		With female friends3	
		Alone4	
		With parents5	
		With children6	
		Others 96 (Specify)	
207	How many dependents are there in your	(Specify)	
207	family?	INUITIDEI	
	Tanniy:		

3.0 WORK AND MIGRATION

301. Before you came back to Nepal where did you work in abroad and for how long? (Mention first place of work at first. Write detail description of each location and duration in this table)

Visited Country	Visited Cities		Date of Visited		Months Spent Aboard	Date of Returned Back to Nepal		Months Spent in Nepal	Type of Work Aboard	
	State	City	Nearby City	Yea r	Mont h		Yea r	Mont h		

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 often did you have drinks containing alcohol?	Every day	
304	Last time when you were abroad, with whom did you live?	Alone	
305	Will you be going abroad again for work?	Yes	
306	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	401

307. Wher	307. Where did you work in Nepal and for how long?								
Date of Visited		1	Worked Place	Months Spent in Nepal	Type of Work Aboard				
Year	Month	District	VDC/Municipality						

4.0 INFORMATION ON SEXUAL BEHAVIOR

No.	Questions and Filters	Coding Categories	Skip To
401	Did you ever have had sexual intercourse with	Yes1	
	a woman?	No2	503
402	How old were you at your first sexual	Years old	
	intercourse? (In completed years)	Don't know/can't98	
403	Have you ever had sex with a sex worker?	Yes1	
		No2	501

Sexual Behavior with Female Sex Workers in Nepal

404	Did you ever have had sex with a female sex	Yes1
	worker in Nepal?	No2 501
405	In Nepal, about how many female sex workers	Number
	did you have sex with in your lifetime?	
406	In Nepal, did you have sex with a female sex	Yes
	worker in the past year?	No2 501
407	During past one year, how many female sex	Number
	workers did you have sexual intercourse with in	
	Nepal?	
408	How many times did you have sex with female	Times
	sex worker in the past 12 months in Nepal?	
409	Where did you meet the female sex worker	Lodge/Hotel1
	with whom you had your last sexual intercourse	Eating-place (Restaurant)2
	in Nepal?	Bhatti (Liquor shop) 3
		On the street4
		Forest 5
		Workplace6
		Others (Specify)

Sexual Behavior with Female Sex Workers when living abroad

410	Did you ever have sex with female sex workers	Yes1	
	abroad?	No2	501
411	With about how many female sex workers have	Number	
	you had sex with so far when you were abroad?		
412	Did you have sex with a female sex worker	Yes1	
	when abroad in the past year?	No2	501
413	During the past one year how many female sex	Number	
	workers did you have sexual intercourse		
	abroad?		

414	During the past one year how many times did	Times
	you have sex with female sex workers abroad?	
	When were the last times?	Week
415	In which places did you have sex with female	Name of Country City/Nearby City
	sex workers during the past one year of your	
	stay abroad?	
416	Where did you meet that last sex worker for	Lodge/Hotel1
	sexual intercourse?	Eating-place (Restaurant)2
		Bhatti (Liquor shop) 3
		On the street 4
		Forest 5
		Workplace6
		Others(Specify)
417	During your stay abroad, did you usually go to	Alone 1
	sex workers alone or with friends?	With friends2

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

501	How many times did you have sexual	Times
301	intercourse with your wife over the last one	Times
	month?	Don't know 00
502		Don't know
302	Did you use condom in your last sexual	Yes1
	intercourse with your wife?	No
503	Who suggested condom use that time?	Myself1
		My wife2 505
		Don't know 98
504	Why didn't you use condom that time?	Not available1
		Too expensive2
		Partner objected3
		I didn't like to use it4
		Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know 98
505	Over the last one year, how often did you use	All of the time
	condom while having sex with your wife?	Most of the time2
		Some of the time3
		Rarely4
		Never5
506	Why you did not use condom always?	Not available1
		Too expensive2
	(Multiple answers. Do not read the	Partner objected3
	possible answers)	I didn't like to use it4
	<u>'</u>	Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know

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. 512

507	Did you use a condom in your last sexual intercourse with a sex worker in Nepal?	Yes1 No2	
508	Who suggested condom use that time?	Myself 1 Sex Workers 2 Don't know 98	510

509	Why didn't you use condom that time?	Not available1
		Too expensive2
		Sex Worker objected3
	(Multiple answers. Do not read the	I didn't like to use it4
	possible answers)	Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know 98
510	Over the last one year, how often did you use	All of the time
	condom while having sex with sex worker?	Most of the time2
		Some of the time3
		Rarely4
		Never5
511	Why you did not use condom always?	Not available1
		Too expensive2
		Sex Worker objected3
	(Multiple answers. Do not read the	I didn't like to use it4
	possible answers)	Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know 98

Condom Use with Girl Friend/Lover in Nepal

512	During the past 1 year did you have sexual	Yes1	
	intercourse with your girl friend in Nepal?	No2	518
513	Over the last 1 month, how many times did	Times	
	you have sexual intercourse with your girl		
	friend?	Don't know 98	
514	Did you use a condom in your last sexual	Yes1	
	intercourse with your girl friend in Nepal?	No2	516
515	Who suggested condom use that time?	Myself1	
		My Partner2	517
		Don't know 98	
516	Why didn't you use condom that time?	Not available1	
		Too expensive2	
		Partner objected3	
	(Multiple answers. Do not read the	I didn't like to use it4	
	possible answers)	Didn't think it was necessary5	
		Didn't think of it6	
		Others (Specify)96	
		Don't know 98	
517	Over the last 12 months, how often did you use	All of the time1	
	condom while having sex with your girl friend	Most of the time2	[
	in Nepal?	Some of the time3	
		Rarely4	
		Never5	

Condom Use with Female Sex Worker during Abroad Stay

Note: If the answer is 'No' in Q. 403 or 404 or 406 then Go to Q. 523

518	Did you use a condom in your last sexual	Yes1	
	intercourse with a sex worker when abroad?	No2 520	:0
519	Who suggested condom use that time?	Myself1	
		Sex Workers	1
		Don't know 98	
520	Why didn't you use condom that time?	Not available1	
		Too expensive2	
		Sex Worker objected3	
	(Multiple answers. Do not read the	I didn't like to use it4	

	possible answers)	Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know 98
521	Over the last 1 year, how often did you use	All of the time
	condom while visiting sex workers abroad?	Most of the time2
		Some of the time3
		Rarely4
		Never5
522	Why didn't you use condom always?	Not available1
		Too expensive2
		Sex Worker objected3
	(Multiple answers. Do not read the	I didn't like to use it4
	possible answers)	Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know 98

Condom Use with Girl Friend During Abroad Stay

523	Over the past 1-year did you have sexual	Yes1	
	intercourse with your girl friend abroad?	No2	530
524	Over the last 1 month, how many times did	Times	
	you have sexual intercourse with your girl		
	friend abroad?	Don't know 98	
525	Did you use a condom in your last sexual	Yes1	
	intercourse with your girl friend abroad?	No2	527
526	Who suggested condom use that time?	Myself1	1
		My Partner2	528
		Don't know 98	
527	Why didn't you use condom that time?	Not available1	1 '
		Too expensive2	
		Partner objected3	
	(Multiple answers. Do not read the	I didn't like to use it4	
	possible answers)	Didn't think it was necessary5	
		Didn't think of it6	
		Others (Specify)96	
		Don't know 98	
528	Over the last 1 year, how often did you use	All of the time1	530
	condom while having sex with your girl friend	Most of the time2	
	abroad?	Some of the time3	
		Rarely4	
		Never5	
500	327 11 1 1 2	21.1	
529	Why you did not use condom always?	Not available1	
		Too expensive2	
	M. E.L D 13	Partner objected3	
	(Multiple answers. Do not read the	I didn't like to use it4	
	possible answers)	Didn't think it was necessary5	
		Didn't think of it	
		Others (Specify) 96 Don't know	
		DOIL KHOW 98	

Condom Use with Male Partner in Nepal

530	During the past one-year did you have anal sex	Yes1	
	with a male partner in Nepal?	No2	537
531	Over the last 1 month, how many times did	Times	
	you have anal sex with male partner in Nepal?		
		Don't know 98	

532	Did you use a condom in your last anal sex	Yes1
	with your male partners in Nepal?	No2 534
533	Who suggested condom use that time?	Myself1
		My Partner2 535
		Don't know 98
534	Why didn't you use condom that time?	Not available1
		Too expensive2
		Male Partner objected3
	(Multiple answers. Do not read the	I didn't like to use it4
	possible answers)	Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know 98
535	Over the last 1 year, how often did you use	All of the time
	condom while having anal sex with male	Most of the time2
	partner in Nepal?	Some of the time3
		Rarely4
		Never5
536	Why you did not use condom always?	Not available1
		Too expensive2
		Male Partner objected3
	(Multiple answers. Do not read the	I didn't like to use it4
	possible answers)	Didn't think it was necessary5
		Didn't think of it6
		Others (Specify)96
		Don't know 98

Condom Use with Male Partner During Abroad Stay

F27	D		
537	During the past one-year did you have anal sex	Yes1	F 477
500	with a male partner in abroad?	No2	547
538	Over the last 1 month, how many times did	Times	
	you have anal sex with male partner in abroad?		
		Don't know 98	
539	Did you use a condom in your last anal sex	Yes1	
	with your male partners in abroad?	No2	541
540	Who suggested condom use that time?	Myself1	
		My Partner2	542
		Don't know 98	
541	Why didn't you use condom that time?	Not available1	
		Too expensive2	
		Male Partner objected3	
	(Multiple answers. Do not read the	I didn't like to use it4	
	possible answers)	Didn't think it was necessary5	
	<u> </u>	Didn't think of it6	
		Others (Specify)96	
		Don't know 98	
542	Over the last 1 year, how often did you use	All of the time1	544
	condom while having anal sex with male	Most of the time2	
	partner in abroad?	Some of the time3	
		Rarely4	
		Never5	
543	Why you did not use condom always?	Not available1	
		Too expensive2	
		Male Partner objected3	
	(Multiple answers. Do not read the	I didn't like to use it4	
	possible answers)	Didn't think it was necessary5	
	<u> </u>	Didn't think of it6	
		Others (Specify)96	
		Don't know 98	
544	With whom did you have the last sexual	FSW1	

	intercourse?	Wife2
		Other female friend3
		Lover/female friend4
		Male friend5
		No sexual intercourse in
		last 12 months6
		Never had sexual intercourse7
545	Did you use condom at that time?	Yes1
		No2
546	Where did you have the last sexual intercourse?	Nepal1
		Abroad2

Condom Accessibility

547	Do you usually carry condoms with you?	Yes1
		No2
548	Which places or persons do you know where	Health Post / Health Center1
	you can obtain condoms?	Pharmacy2
	ľ	General retail store
		(Kirana Pasal)3
		Private Clinic4
		Paan shop5
	(Multiple answers. Do not read the	Hospital6
	possible answers)	FPAN Clinic7
		Peer/Friends8
		Health Workers/Volunteers9
		Hotel /Lodge10
		Brothel11
		NGO12
		FCHVs13
		Others96
		(Specify)
		Don't know 98 550
549	How long does it take for you to get condom	Minute
	from your work place or home?	
550	Do you usually obtain condoms free of cost or	I get it free of cost1
	pay for it or obtain both ways?	I buy2 553
		Both3
		Never used condom4 601
551	From where do you often obtain free	Health Post/ Health Center1
	condoms?	Hospital2
		FPAN Clinic3
		Peer/Friends4
		During Community Program .5
		Health Workers/Volunteers6
	(Multiple answers. Do not read the	NGO7
	possible answers)	FCHVs8
552	Which would be the most assert at 1	Others 96
332	Which would be the most convenient place/s	Health Post/ Health Center1
	for you to obtain free condoms?	Hospital
		Peer/Friends4
		During Community Program .5
	(Multiple answers. Do not read the	Health Workers/Volunteers6
	possible answers)	NGO7
	possible uniswers)	FCHVs8
		Others96
553	From where do you often buy condoms?	Pharmacy1
333	Train where do you often buy condonia:	General retail store
	(Multiple answers. Do not read the	(Kirana Pasal)2
	possible answers)	Private clinic3
	F > >	

		Paan Shop4
		Others96
554	Which would be the most convenient places	Pharmacy1
	for you to buy condom?	General retail store
		(Kirana Pasal)2
	(Multiple answers. Do not read the	Private clinic3
	possible answers)	Paan Shop4
		Others 96

6.0 AWARENESS OF HIV/AIDS

601	Have you ever heard of an illness called HIV/AIDS?	Yes1 No	701
602	Where have you seen or heard messages		701
002	regarding HIV/AIDS?	<u>Country</u> <u>Village</u> <u>District</u> In Nepal	
		Abroad	
603	What messages have you heard?	List Messages	
		1	
		2.	
	(Probe this about any others)	3.	
	, ,	4	
		5	
604	What are the sources of these information on	List sources of information	
	HIV/AIDS?	1	
		2	
		3	
		4	
		5	
605	Has any person tried to educate you about	Yes1	
	HIV or STDs in the past year?	No2	
		Don't know	607
606	In which district or city did those people	Country Village District	
000	educate you?	In Nepal	
	caucate you:		
		Abroad	

Knowledge, Perception and Attitudes on HIV/AIDS

607	Do you know anyone who is infected with	Yes1
	HIV or who has died of AIDS?	No2 609
608	Do you have a close relative or close friend	Yes, a close relative1
	who is infected with HIV or has died of AIDS?	Yes, a close fried2
		No3
609	Can people protect themselves from HIV by	Yes1
	having one uninfected faithful sex partner?	No2
		Don't know 98
610	Can people protect themselves from HIV,	Yes1
	virus causing AIDS, by using condom correctly	No2
	in each sexual contact?	Don't know 98
611	Do you think a healthy-looking person can be	Yes1
	infected with HIV?	No2
		Don't know 98
612	Can a person get the HIV virus from mosquito	Yes1

	bite?	No2	
		Don't know 98	
613	Can a person get HIV by sharing a meal with	Yes1	
	an HIV infected person?	No2	
		Don't know 98	
614	Can a pregnant woman infected with	Yes1	
	HIV/AIDS transmit the virus to her unborn	No2	
	child?	Don't know 98	616
615	What can a pregnant woman do to reduce the	Take Medication1	
	risk of transmission of HIV to her unborn	Others (Specify)96	
	child?	Don't know 98	
616	Can a woman with HIV/AIDS transmit the	Yes1	
	virus to her newborn child through	No2	
	breastfeeding?	Don't know 98	
(17		X7 4	
617	Can people protect themselves from HIV virus	Yes1	
	by abstaining from sexual intercourse?	No2	
618	Can a parson got HIV by halding an with HIV	Don't know	
018	Can a person get HIV by holding on with HIV infected person's hand?	Yes1 No2	
	infected person's nand?	Don't know	
619	Can a person get HIV by using previously used	Yes1	
019	needle/syringe?	No2	
	niedie/symige:	Don't know	
620	Can blood transfusion from HIV infected	Yes1	
020	person transmit HIV to others?	No2	
	person transmit III v to others.	Don't know	
621	Is it possible in your community for someone	Yes1	
	to have a confidential HIV test?	No2	
		Don't know 98	
621.1	If you have to go for HIV testing, do you know	Yes1	
	where can you go for it?	No2	
622	I don't want to know the result, but have you	Yes1	
	ever had an HIV test?	No2	701
623	Did you voluntarily undergo the HIV test or	Voluntarily1	
	was it required?	Required2	
		No Response99	
624	Please do not tell me the result, but did you	Yes1	
	find out the result of your test?	No2	525.1
625	Why did you not receive the test result?	Sure of not being infected1	
		Afraid of result2	
		Felt unnecessary3	
		Forgot it4	
(05.4	T -1 - 1'1 - C TITY	Others (Specify) 9	
625.1	In the past one year did you go for HIV	Yes1	(2)
625.2	testing? I don't want to know the result, but did you	No2	626
025.2	receive the test result?	Yes	
626	When did you have your most recent HIV test?	Within last 12 months1	
020	when did you have your most recent fit v test?		
		Between 1-2 years2 Between 2-4 years3	
		More than 4 years ago4	
		111010 man T years agoT	

7.0 STI (SEXUALLY TRANSMITTED INFECTION)

701	Which diseases do you understand by STI?	White Discharge/Discharge of
		Pus/Dhatu flow1
		Pain during urination2
		Burning Sensation while
		Urinating3

	(Multiple answers. Do not read the possible answers)	Ulcer or sore around § Syphilis (Bhiringi) HIV/AIDS Others (Specify) Don't know	5 6 96	
702	Do you currently have any of the following sym	•	1	
	<u>Symptoms</u>	<u>Yes</u>	<u>No</u>	
	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			
703	Have you gone through medical treatment for any of these symptoms?	Yes No		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?	Private Clinic		
		N-SARC Clinic		
		FPAN Clinic	3	
		Health Post/ Health (
	(Multiple answers. Do not read the	Hospital	5	
	possible answers)	Pharmacy		
		Self Treatment (Specif		
		Others (Specify)	96	
705	For which symptoms did you get treatment? Spe			
	<u>Symptoms</u>	<u>Treat</u>	<u>ment</u>	
	1. White Discharge/Discharge of pus			
	2. Pain during urination			
	3. Burning sensation while			
	urinating			
	4. Ulcer or sore around genital area			
	96. Others (Specify)			
706	Did you receive a prescription for medicine?	Yes	1	
		No	2	J
		Home treatment		709
707	Did you obtain all the medicine prescribed?	Yes I obtained all of it		
		I obtained some but n		ור
		I did not obtain the m		709
708	Did you take all of the medicine prescribed?	Yes No		709
708.1	If not, why did you not take all of the	Forgot to take	1	
	medicine prescribed?	Felt cured	2	
		Medicine did not help	3	
		Others (Specify)		
709	How much did you pay for medicine you took?	RsRea		
	(Note: If not paid mention the reasons)			
710	Did you have any of the following symptoms du	uring the past year?		
	<u>Symptoms</u>	<u>Yes</u>	<u>No</u>	
	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	
	96. Others (Specify) (If answer is 'No' to all in the	-	=	

	<u>Symptoms</u>	<u>Yes</u>	<u>No</u>	
	1. White Discharge/Discharge of pus	1	2	
	2. Pain during urination	1	2	
	3. Burning sensation while urinating	1	2	
	5. Ulcer or sore around genital area	1	2	
	96. Others (Specify)	1	2	
	(If answer is 'No' to all in			
712	Where did you go for the treatment?	Private Clinic		
		FPAN Clinic	3	
		Health Post/ Health C		
		Hospital	5	
	(Multiple answers. Do not read the	Pharmacy		
	possible answers)	Self Treatment (Specif		801
		Others (Specify)	96	
713	Did anyone from the place you visit for	Yes		
	treatment counsel you about how to avoid the problem?	No	2	801
714	What did she/he tell you?	Told me to use condo	m1	
		Told me to reduce nur	mber of	
		Sexual partners	2	
		Others (Specify)	96	

8.0 USE OF DRUGS AND INJECTION

801	During the last 1 month how often did you	Everyday1	
001	have drinks containing alcohol?	2-3 times a week2	
	nave drinks containing accords:	At least once a week3	
		Less than once a week4	
		Never5	
		Don't know	
802	Some people take different types of drugs.	Yes1	
	Have you also tried any of those drugs in the	No2	
	past 30 days?	Don't know 98	
803	Some people inject drugs using a syringe. Have	Yes1	
	you ever injected drugs?	No2	901
	(Do not count drugs injected for medical	Don't know 98	
	purpose or treatment of an illness)	,	
804	Have you injected drugs in last 12 months?	Yes1	
	(Do not count drugs injected for medical	No2	
	purpose or	Don't know	901
	treatment of an illness)	J	
805	Are you currently injecting drugs?	Yes1	
		No2	901
806	Think about the last time you injected drugs.	Yes1	
	Did you use a needle or syringe that had	No2	
	previously been used by someone else?	Don't know 98	
807	Think about the time you injected drugs during	Every Time1	
	the past one month. How often was it with a	Almost Every Time2	
	needle or syringe that had previously been used	Sometimes3	
	by someone else?	Never4	
		Don't Know 98	
808	Usually how do you get/did you get	My friend/relative gave it to me after his	
	syringe/needle?	use1	
		Unknown person gave it to me2	
		I picked it up from a public place which	
		was left there by others3	
		I picked it up from a public place which	
		was left there by myself4	
		I used a new needle/syringe given by	
		NGO volunteer5	

	I used a needle/syringe which I	
	purchased6	
	Others (Specify)96	

9.0 STIGMA AND DISCRIMINATION

901	If a male relative of yours become ill with HIV,	Yes1
	would you be willing to care for him in your	No2
	household?	Don't know 98
902	If a female relative of yours become ill with	Yes1
	HIV, would you be willing to care for him in	No2
	your household?	Don't know 98
903	If a member of your family become ill with	Yes1
	HIV, would you want it to remain secret?	No2
		Don't know 98

10.0 KNOWLEDGE AND PARTIICIPATION IN STI and HIV/AIDS PROGRAMS

1001	Have you met, discussed, or interacted with	Yes1	
	peer educators (PE) or community mobilize	No2	
	(CM) in the last 12 months?	No response99	1003
1002	Do you know from which organization were	Government1	
	they?	Save the c2	
		NSARC3	
		NRCS4	
	(Multiple answers: DO NOT READ the	INF/Paluwa5	
	possible answers)	Siddhartha Club6	
		FHI7	
		Others (Specify)96	
		Don't know 98	
1003	Have you visited or been to any drop in	Yes1	
	center (DIC) in the last 1 year?	No2	1005
1004	Do you know which organizations were	NSARC1	
	running those DICs?	NRCS2	
		INF/Paluwa3	
		Siddhartha Club4	
	(Multiple answers: DO NOT READ the	Others (Specify)96	
	possible answers)	Don't know 98	
1005	Have you visited any STI clinic in the last 1	Yes1	
1007	year?	No	1007
1006	Do you know which organizations run those STI clinics?	AMDA Nepal1	
	S11 clinics?	NSARC2 NRCS3	
		INF/Paluwa4	
	(Multiple answers: DO NOT READ the	Siddhartha Club5	
	possible answers)	Others (Specify)96	
	possible answers)	Don't know	
1007	Have you visited any voluntary counseling	Yes1	
2007	and testing (VCT) centers in the last 12	No2	1009
	months?	_	
1008	Do you know which organizations run those	NSARC1	
	VCT centers?	NRCS2	
		INF/Paluwa3	
	(Multiple answers: DO NOT READ the	Siddhartha Club4	
	possible answers)	Others (Specify)96	
	,	Don't know 98	
1009	Have you ever participated in HIV/AIDS	Yes1	
	awareness raising program or community	No2	1012
	events in the last 1 year?		-

1010	Which activities have you participated in? (Multiple answers: DO NOT READ the possible answers)	Street drama		
		HIV/AIDS related Workshops8 Condom use demonstrations9 Others (Specify) 96		
1011	Do you know which organizations organized those activities?	NSARC		
	(Multiple answers: DO NOT READ the possible answers)	Siddhartha Club4 Others (Specify) 96 Don't know		
1012	In the last 1 year have any CHBC health workers visited your house?	Yes		
1013	Do you know which organizations were they from? (Multiple answers: DO NOT READ the possible answers)	NSARC		
	Interview Completion Time:	Don't know		

ANNEX: G—Name of Selected VDCs and Clusters

District	VDC	Cluster No.
	Birendranagar NP	1
C 11 .	Gumi	2
Surkhet	Lekhaparajul	3
	Salkot	4
	Baijapur	5
	Indrapur	6
Banke	Kohalpur	7
Danke	Nepalganj NP	8
	Puraina	9
	Udharapur	10
	Bauniya	11
	Dododhara	12
	Dhangadhi NP	13
TZ . 21 . 12	Hasuliya	14
Kailali	Malakheti	15
	Pahalmanpur	16
	Ramshikharjhala	17
	Thapapur	18
	BaiseBichawa	19
	Dekhatbhuli	20
T7 1	Krishnapur	21
Kanchanpur	Mahendranagar NP	22
	Pipladi	23
	Suda	24
	Ghanghal	25
Doti	Khatibada	26
	Simchour	27
	Chafamandu	28
Achham	Kuskot	29
	Sokat	30

ANNEX: H—IBBS PRELIMINARY COORDINATION MEETING

Date: 2067 Asar 17, Thursday

District: Kanchanpur

Venue: Seminar Hall, District Public Health Office, Kanchanpur

SN	Name	Designation	Organization
1	Shyam Raj Adhikari	Local Development Officer	District Development Office
2	Buddhi Bahadur Khadka	Chief District Office	District Administration Office
3	Pawan Prasad Kharel	Superintendent of Police	District Police Office
4	Shiva Datta Bhatta	Senior Public Health Administrator	DPHO
5	Dr. Dipendra R. Singh	Medical Superintendent	Zonal Hospital, Mahakali
6	Bhawani Datta Joshi	Public Health Officer	DPHO
7	Prabha Dhanuk	CHBC	Nava Aasha
8	Deepak Chand	Team Leader	АНН
9	Krishna B. Adhikary	Program Officer	Save the Children
10	Prem Bahadur Khadka	President	Nava Aasha
11	Amba Datta Bhatta	FP Officer	DPHO
12	Manoj Prasad Upreti	Program Coordinator	Nepal Red Cross Society
13	Mahesh Neupane	Program Officer	Nepal Red Cross Society
14	Ashok Pandey	Coordinator	DACC, Kanchanpur
15	Ishwor Raj Pant	Coordinator	Prasanasa Protection Group
16	L. B. Das	Program Coordinator	NNSWA
17	Tek Raj Joshi	Admin/Finance Officer	TSDA
18	Dil Bahadur Shahi	EPIS Officer	DPHO
19	Kusum Shahi	Program Coordinator	NEEDS
20	Pashupati Singh	PHN	DPHO
21	Dr. Lochana Shrestha	Technical Advisor	Save the Children
22	Bishnu Prasad Shrestha	M&E Officer	Save the Children
23	Ganesh Shahi	Project Coordinator	Success Search Option

Date: 2067 Asar 18, Friday

District: Doti

Venue: Seminar Hall, District AIDS Coordination Committee, Doti

SN	Name	Designation	Organization
1	Yadu Prasad Panthi	Local Development Officer	District Development Office
2	Chudamani Bhandari	Public Health Administration	District Health Office
3	Krishna Prasad Dhital	Lab Technician	NCASC
4	Kalu Singh Karki	Program Coordinator	Save the Children
5	Amir Kumar Rana	Program Coordinator	Samaj Sewa Doti
6	Bhakta Bahdur Singh	Chairperson	Community Development Forum
7	Ramesh Chandra Joshi	Social Development Officer	Dipayal Silgadhi Municipality
8	Kishor Prasad Shrestha	Officer	DHO, Doti
9	Prem Bahadur Kathayat	Coordinator	DACC, Doti
10	Laxmi Aauji	СНВС	Community Development Forum
11	Bhupendra B Shah	CMA	Nava Kiran Plus
12	Kate Nepali	Member	DACC, Doti
13	Kamala Malla	Chairperson	Lali Gurash Ekata Samaj
14	Kali Das Joshi	Program Coordinator	Community Development Forum
15	Sher Bahadur Malla	Chairperson	CEAD
16	Bishnu Prasad Shrestha	M&E Officer	Save the Children
17	Ganesh Shahi	Project Coordinator	Success Search Option

Date: 2067 Asar 20, Sunday District: Kailali

Venue: Seminar Hall, District Public Health Office, Doti

SN	Name	Designation	Organization
1	Harish Chandra Shah	Public Health Administrator	DPHO
2	Girish Raj Joshi	Agriculture Development Officer	DADO
3	Krishna Prasad Dhital	Lab Technician	NCASC
4	Babu Ram Chaudhary	Health Facilitator	CBODC
5	Nirmal Khatri	Health Assistant	Sundar Paschim Samaj
6	Liala Mani Sharma	Program Manager	Save the Children
7	Kalu Singh karki	Program Coordinator	Save the Children
8	Bhim Bhadur Chand		
9	Prakash Chandra Madai	Program Management Officer	Nava Kiran Plus ,Kailali
10	Suman Karmacharya	Accountant	Nava Kiran Plus ,Kailali
11	Hark Bahadur Bohara	Officer	Thagil Samagik Bikash Sangh
12	Mohan Bhattrai	Coordinator	NAP+N Dhangadi
13	Lalmani Joshi	Incharg	MSS Attaria
14	Asha Swar	Accountant	Sneha Samaj
15	Chandra Saud	President	LRS, Kailali
16	Tek Bahadur Saud	Member	LRS, Kailali
17	Bal Bahadur Saud	Treasure	LRS, Kailali
18	Dharma Raj Joshi	Program Coordinator	AHH, Kailai
19	Santosh Mahata	Program Coordinator, Health	Save the Children
20	Krishna Gopal Singh	FPHM	DPHO Kailali
21	Yam Baral		DPHO Kailali
22	Bed Raj Dhungana	Program Supervisor	NSARC, Attariya
23	Khagendra Bharati	Computer Operator	DPHO
24	Prem Bahadur Singh	Malaria Inspector	DPHO
25	Binod Lal Karna	TB, Leprosy Inspector	DPHO
26	Chet Raj Bhatta	Branch Officer	DPHO
27	Bhoj Raj Bhat	Program Coordinator	DPHO
28	Bishu Prasad Shrestha	M&E Officer	Save the Children
29	Noor Jung Shah	Project Officer	Save the Children
30	Ganesh Shahi	Project Coordinator	Success Search Option

Date: 2067 Asar 22, Tuesday District: Banke

Venue:

SN	Name	Designation	Organization
1	Dhir Jung Shahi	Senior Public Health Officer	DPHO
2	Lokendra Acharya	Supervisor	WDO
3	Bachanu Jha	Program Coordinator	NSARC
4	Govinda Bahadur Raut	Program Manager	NSARC
5	Dipendra Prasad Shrestha	Program Coordinator	АНН
6	Tilak Prasad Sharma	Program Coordinator	Community Heath Institute
7	Prabin BC	Officer	Recovering Nepal
8	Indra Pariyar	Facilitator	NAPN
9	Sreedhar Gyawali	Program Coordinator	Nagarjun Devt. Community
10	Dev Bahadur Ale	Program Coordinator	Save the Children
11	11 Mahendra Raj Singh Volunteer		National Network against AIDS
12	Bishnu Maya Rana	Treasure	Sewa Club
13	Tara Devi Rana	Program Coordinator	Junkiri Mahila Samuha
14	Nod Narayan Chaudhary	TB, Leprosy Officer	DPHO
15	Rajendra Dahal	Program Coordinator	BNMT
16	Ram Bahadur Chand	Focal Person	DPHO
17	Sudip Kumar Sharma	Regional Coordinator	Blue Diamond Society
18	Nabin Shrestha	Officer Manager	Change Rehabilitation Centre
19	Yuddha Pachhai	Coordinator	Junkiri
20	Bashu Rana	Regional Coordinator	NAPN
21	Ganga Ram Budhathoki	DACC Coordinator	DACC
22	Bir Bahadur Pun	Senior AHW	Bheri Zonal Hospital
23	BIshnu Prasad Shrestha	M&E Officer	Save the Children
24	Noor Jung Shah	Project Officer	Save the Children
25	Ganesh Shahi	Project Coordinator	Success Search Option

Date: 2067 Asar 23, Wednesday

District: Surkhet

Venue: Seminar Hall, DHO

SN	Name	Designation	Organization
1	Mukunda Raj Gautam	Senior Public Health Officer	DHO
2	Hira Lal Regmi	Chairperson	DACC
3	Chetan Nidhi Wagle	DACC Coordinator	DACC, DHO
4	Narayan Datta Upadhya	Supervisor	DHO
5	Narayan Sapakota	Program Director	Digo Bikash
6	Tika Ram Acharya	Executive Director	Samaj Jagaran Kendra (SAC)
7	Vivek Shahi	ivek Shahi Executive Manager	
8	Devendra Shahi	Coordinator	Nav Kiran Plus
9	Aaiti Chaudhary Coordinator		SAC Nepal
10	Shekar Dhamala	Supervisor	FPAN
11	Roshan Ghimire	Braanch Manager	FPAN
12	Durga Prasad Shrestha	Senior AHW	DHO
13	Ratna Raj Chapai	Coordinator	NAP+N
14	BIshnu Prasad Shrestha	M&E Officer	Save the Children
15	Ganesh Shahi	Project Coordinator	Success Search Option

ANNEX: I—RECORD OF SYNDROMIC TREATMENT PROVIDED TO THE RESPONDENT

District:	
VDC:	
Cluster No:	

S.N.	Date	ID No. of Respondent	Syndromic Diagnosis	Medicine Given and Quantity Provided to the Respondent

Note: The guideline is based on 'National Guideline on Case Management of Sexually Transmitted Infections' prepared by the Ministry of Health and Populations, NCASC/July 2009

ANNEX: J—IBBS VDC COORDINATION MEETING

Date: 2067 Sawan 14 District: Surkhet VDC: Lekhaparajul

Venue: Sub-Health Post, Lekhaparajul

SN	Name
1	Dhan Bahadur Gharti
2	Top Bahadur Gharti
3	Ratna Bahadur Budha
4	Chaturvuj Gautam
5	Khadak Bahadur Dhaulakoti
6	Karna Bahadur Sinjali
7	Sanat Bahadur BK
8	Hikmat Gharti
9	Thir Bahadur BK
10	Ram Bahadur Gharti
11	Ranu Budha
12	Sanjeeb Shahi
13	Debendra Sharma
14	Prakash Chandra Bhatta
15	Gopal Prasad Bhatta
16	Umesh Shah

Date: 2067 Sawan 28 District: Surkhet VDC: Gumi

Venue: Sub-Health Post, Lekhaparajul

SN	Name
1	Agam Bahadur Pun
2	Bal Bahadur Magar
3	Purna Gharti
4	Kusma Shrestha
5	Khaman Singh Sunar
6	Kamala Gharti
7	Dhan Bahadur Khamcha
8	Moti Ram Gharti
9	Sanjeeb Shahi
10	Debendra Sharma
11	Prakash Chandra Bhatta
12	Gopal Prasad Bhatta
13	Umesh Shah

Date: 2067 Bhadra 9 District: Surkhet VDC: Salkot

Venue: Primary Health Care Centre, Palaite

SN	Name
1	Dil Bahadur Raskoti Magar
2	Lalite BK
3	Subarna Buda
4	Hasta Raj Giri
5	Yub Raj Bhandari
6	Prem Bahadur Subedi
7	Bam Bahadur Kumal
8	Khagisara Kumal
9	Laxmi Sinjali
10	Nar Bahadur Rokaya
11	Devisara Ale
12	Prabha Kumari Khanal
13	Man Bahadur Kasera
14	Rita Bharati
15	Tara Budha
16	Yam Bahadur BC
17	Bishnuhari Thapa
18	Bal Bahadur Khatri
19	Mangal Kunwar
20	Siddha Raj Regmi
21	Danda Pani Subedi
22	Chakra Nath Yogi
23	Sanjeeb Shahi
24	Debendra Sharma
25	Prakash Chandra Bhatta
26	Gopal Prasad Bhatta
27	Umesh Shah

Date: 2067 Bhadra 20 District: Surkhet

VDC: Birendranagar Municipality-12 Venue: Cooperative Building

SN	Name
1	Chetan Nidhi Wagle
2	Sita Sapkota
3	Bandana Acharya
4	Santi Dahal
5	Pavitra Paudel
6	Balika Saru
7	Pramod Barhghare
8	Yam Lal Sapkota
9	Hridaya Kumar Ale
10	Yam Lal Subedi
11	Tara Sapkota
12	Dilli Raj Poudel
13	Krishna Acharya
14	Padma Sapkota
15	Dharma Raj Poudel
16	Bishnu Prasad Shrestha
17	Rajan Shrestha
18	Ganesh Shahi
19	Sanjeeb Shahi
20	Debendra Sharma
21	Prakash Chandra Bhatta
22	Gopal Prasad Bhatta
23	Umesh Shah

Date: 2067 Bhadra 3 District: Kailali VDC: Dododhara Venue: Sub-Health Post

SN	Name
1	Krishna Dev Jodhi
2	Badri Narayan Chaudhary
3	Bhawani Khanal
4	Tulsi Chaudhry
5	Manju Kathariya
6	Manju Chaudhary
7	Durga Thapa
8	Kamala Paudel
9	Bishnu Gautam
10	Krishna Mati Chaudhary
11	Prakash Chandra Madai
12	Mohammad Mohasin
13	Lal Bahadur Aauji
14	Sujit Raj Sharma
15	Birendra Bohara

Date: 2067 Bhadra 11 District: Kailali

VDC: Bauniya

Venue: Sub-Health Post, Bauniya

SN	Name
1	Dammar Bahadur Thapa
2	Ram Prasad Chaudhary
3	Tek Bahdur Ojha
4	Bishnu Prasad Dagaura
5	Ram Kishan Kathariya
6	Harsha Raj Malla
7	Tika Ram Mishra
8	Laxmi Chaudhary
9	Ful Chandra Kathariya
10	Dhan Bahadur Thapa
11	Khadak Bahadur BK
12	Shiva Bahdur Swar
13	Tham Raj Joshi
14	Anil Kumar Mishra
15	Didhra Raj Binadi
16	Padam Bahadur Bohara
17	Puniya Chaudhary
18	Kailash Pati Chaudhary
19	Krishna Chaudhary
20	Anita Chaudhary
21	Raj Kumari Chaudhary
22	Sundarikali Chaudhary
23	Fulrani Chaudhary
24	Jagatrani Chaudhary
25	Jhalrani Chaudhary
26	Rampyari Chaudhary
27	Kailashpati Chaudhary
28	Ratna Chaudhary
29	Raj Kumari Chaudhary

30	Sita Rani Chaudhary
31	Mina Miya
32	Tulsi Hamal
33	Surat Chaudhary
34	Anita BK
35	Prema Badayak
36	Lila Badayak
37	Panmati Chaudhary
38	Rajpati Chaudhary
39	Asha Chaudhary
40	Triveni Chaudhary
41	Radha Mauni
42	Mina Chaudhary
43	Sabita Kumari Rawat
44	Prakash Madai
45	Sujit Raj Sharma
46	Lal Bahadur Aauji
47	Mohammad Mohasin
48	Birendra Bohara

Date: 2067 Saawan 13

District: Kailali

VDC: Thapapur Venue: VDC Building, Thapapur

SN	Name
1	Harka Bahadur Bam
2	Bal Bahadur Rawal
3	Kapil Kishor Ghimire
4	Sarswati Ghimire
5	Min Bahadur Thapa
6	Guma Chand
7	Sarada Chaudhary
8	Janaki Devi Chaudhary
9	Kul Raj Gyawali
10	Tej Ram Chaudhary
11	Bal Kiran Chaudhary
12	Baburam Chaudhary
13	Jaya Prasad Dhungana
14	Renuka Ghimire
15	Khem Raj Joshi
16	Prem Lal Chaudhary
17	Madan Devkota
18	Ganga Chaudhary
19	Bhim Bahadur Chaudhary
20	Gopi Lal Chaudhary
21	Lal Bahadur Khadak
22	Prakash Saud
23	Tek Bahadur Bam
24	Uday Kumar Sah
25	Chetu Ayer

Date: 2067 Saawan 22 District: Kailali

VDC: Ramshikharjhala

Venue: VDC Building, Ramshikharjhala

SN	Name
1	Kalicharan Chaudhary
2	Chandra Bahadur Thapa
3	Yagya Raj Aacharya
4	Tilak Bahadur Chapai
5	Ser Bahadur Rawal
6	Bhuwaneswori Bista
7	Binda Budha
8	Desh Rani Chaudhary
9	Raju Budha
10	Indira Bhandari
11	Dilli Rawal
12	Chhabi Lal Wali
13	Binti Ram Chaudhary
14	Madan Bahadur Chaudhary
15	Hari Prasad Chaudhary
16	Bam Bahadur Shahi
17	Chanda Kala Rawal
18	Lal Bahadur Khadak
19	Prakash Saud
20	Tek Bahadur Bam
21	Uday Kumar Sah
22	Chetu Ayer

Date: 2067 Sawan 31 District: Kailali VDC: Pahalmanpur

Venue: VDC Building, Pahalamanpur

SN	Name
1	Keshav Datta Bhatta
2	Shyam Narayan Yadav
3	Kamala Sapakota
4	Indira Bhandari
5	Chakra Bahadur Shahi
6	Narayan Mishra
7	Khushi Ram Chaudhary
8	Krishna Singh
9	Bishnu Chaudhary
10	Kamalapati Kathariya
11	Gulabi Chaudhary
12	Suraj Chaudhary
13	Raj Kumari Kadariya
14	Raj Kumari Chaudhary
15	Ram Kumari Chaudhary
16	Gyani Chaudhary
17	Gujana Kathariya
18	Sita Kathariya
19	Manisha Chaudhary
20	Rita Chaudhary
21	Kashi Chaudhary
22	Bharati Chaudhary
23	Naian Chaudhary
24	Maghi Chaudhary
25	Radha Mishra
26	SaritaBam
27	Mangi Devi Chaudhary
28	Lal Bahadur Khadak
29	Prakash Saud

30	Tek Bahadur Bam
31	Uday Kumar Sah
32	Chetu Ayer

Date: 2067 Bhadra 11 District: Kailali VDC: Hasuliya

Venue: Health Post, Hasuliya

SN	Name
1	Dudhi Ram Chaudhary
2	Tok Raj Chaudhary
3	Bal Ram Chaudhary
4	Naresh Chaudhary
5	Bani Ram Chaudhary
6	Bimala Paudel
7	Gita Chaudhary
8	Rekha Chaudhary
9	Kaushi Bohara
10	Kamala Chaudhary
11	Lalita Chaudhary
12	Maheswori Chaudhary
13	Bindra Chaudhary
14	Buddhi Ram Chaudhary
15	Chandrakala Nepal
16	Sunita Chaudhary
17	Kailash Kusmi
18	Firu Devi Chaudhary
19	Narayan Paudel
20	Lal Bahadur Khadak
21	Prakash Saud
22	Tek Bahadur Bam
23	Uday Kumar Sah
24	Chetu Ayer

Date: 2067 Sawan 22

District: Doti VDC: Simchour

Venue: Health Post, Simchour

SN	Name
1	Birkha Bahadur Saud
2	Ram Bahadur Sinjali
3	Man Bahdur Bohara
4	Bhim Bahadur Gurung
5	Girija Devi Saud
6	Bipana Sapana
7	Asuni Devi Sapkota
8	Indrakala devi KC
9	Bishnu Bam
10	Teksara Acharya
11	Ranjeet Magar
12	Nar Bahadur Aauji
13	Arjun Kunwar
14	Prem Kunwar
15	Goma Joshi
16	Manoj Adhikari

Date: 2067 Bhadra 3

District: Doti VDC: Khatiwada

Venue: Health Post, Khatiwada

SN	Name
1	Purna Bahadur BK
2	Ashok Bahadur Nagari
3	Surendra BK
4	Ser BK
5	Laxman Khadka
6	Jagannatha Prasad Dahal
7	Dev Bahadur Kathayat
8	Laxmi Prasad Chataut
9	Mani Ram Ojha
10	Janu Kumari Majhi
11	Chhatra Devi Dahal
12	Man Bahdur Khadaka
13	Rajesh Man Rajbhandari
14	Ganesh Shahi
15	Nar Bahadur Aauji
16	Arjun Kunwar
17	Prem Kunwar
18	Goma Joshi
19	Manoj Adhikari

Date: 2067 Bhadra 14 District: Achham

VDC: Sokat

Venue: Health Post, Sokat

SN	Name
1	Tara Singh Saud
2	Mahendra Bahadur Saud
3	Kamal Bahadur Saud
4	Padam Bahadur Saud
5	Bhanu Bhakta Joshi
6	Nar Bahadur Saud
7	Dil Bahadur Saud
8	Chandra Singh Saud
9	Ganesh Bahadur BK
10	Ganga Ram Saud
11	Deumale Saud
12	Hunku Devi Saud
13	Mata Devi Saud
14	Setu Devi Saud
15	Madhura Devi Saud
16	Santosh Pokhrel
17	Naresh Bohara
18	Bira Devi
19	Raju Saud
20	Sita Saud
21	Kati devi Saud
22	Narpata Devi Saud
23	Bimala Saud
24	Kalpana Jaishi
25	Deusari Saud
26	Narpata Parki
27	Jhima Nepali
28	Dhauli Saud
29	Deumati Saud

30	Mata Devi Saud
31	Khima Devi Joshi
32	Papi Saud
33	Gauri Devi Joshi
34	Duri Saud
35	Nain Saud
36	Ser Bahadur Saud
37	Ram Bahadur Saud
38	Jhankar Saud
39	Paharam Saud
40	Tura Ram Joshi
41	Jan Singh Saud
42	Shiv Narayan Joshi
43	Ser Bahdur Saud
44	Ram Bahadur Saud
45	Ram Bahadur Saud
46	Rewant Bohara
47	Dammar Saud
48	Guje Aauji
49	Prasane Koli
50	Dil Luhar
51	Bhime Saud
52	Mandhire Saud
53	Dhirghe Saud
54	Bhumi saud
55	Chhatra Jora
56	Bhuwan Joshi
57	Santosh Pokhrel
58	Naresh Bohara
59	Tanka Joshi