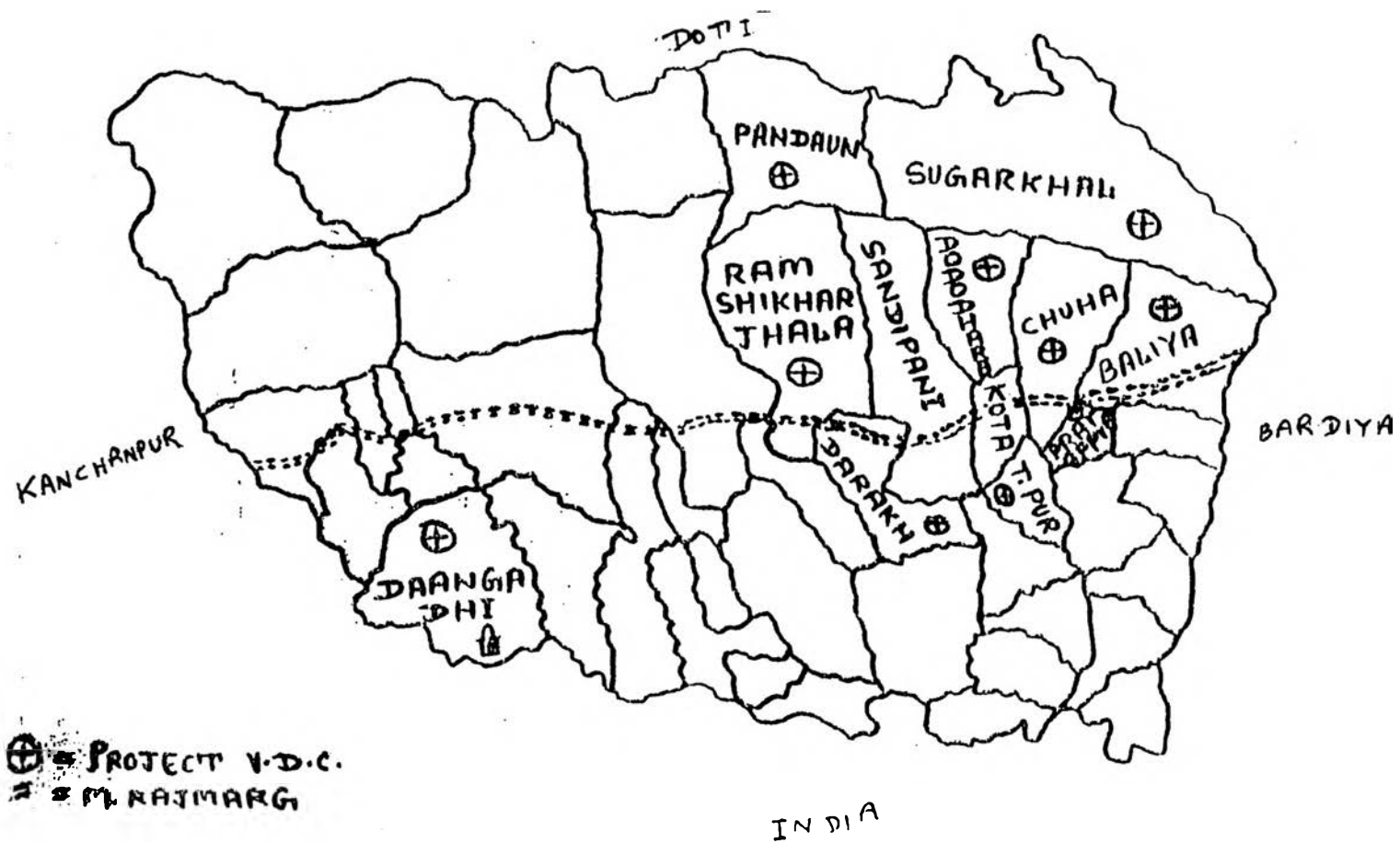


Map of Nepal

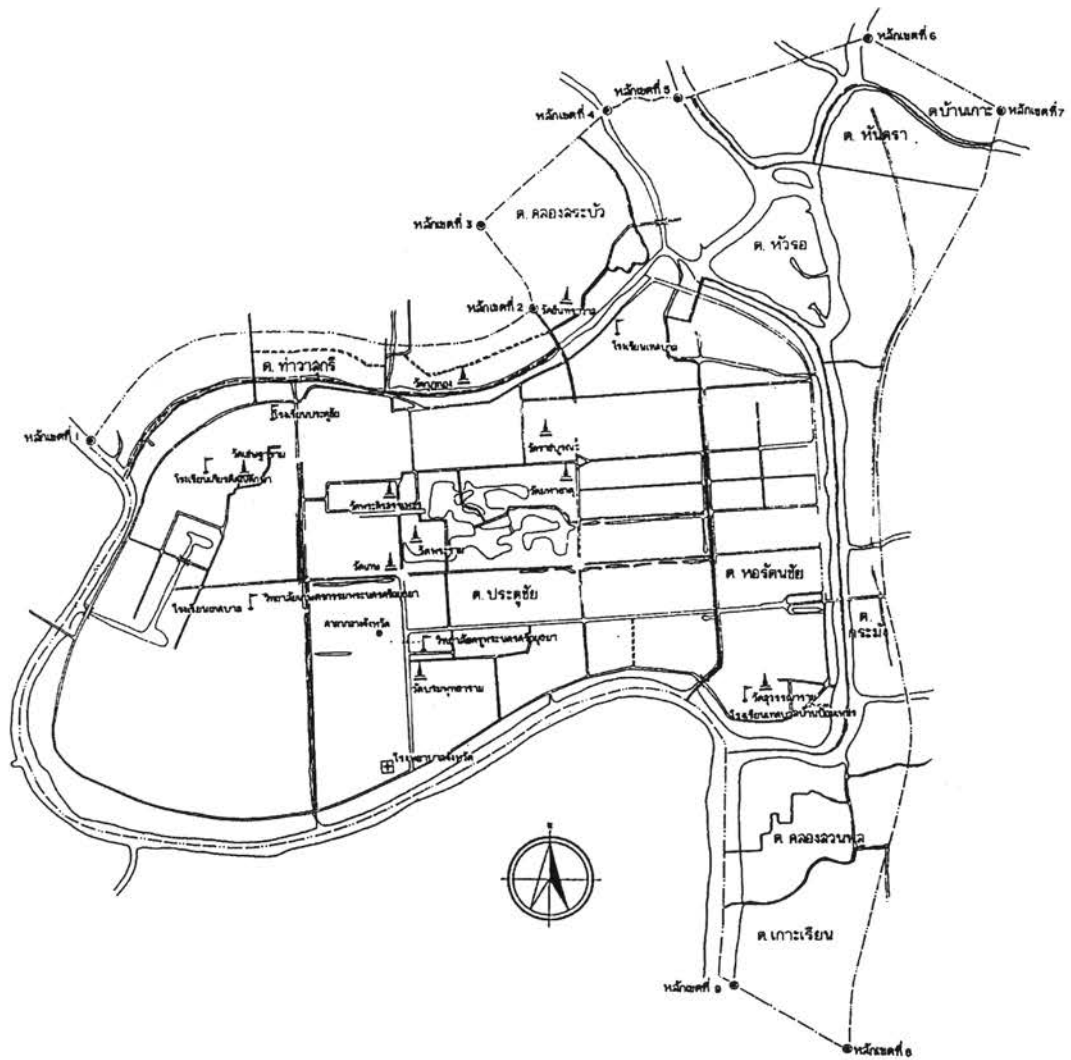


Map of Kailali district

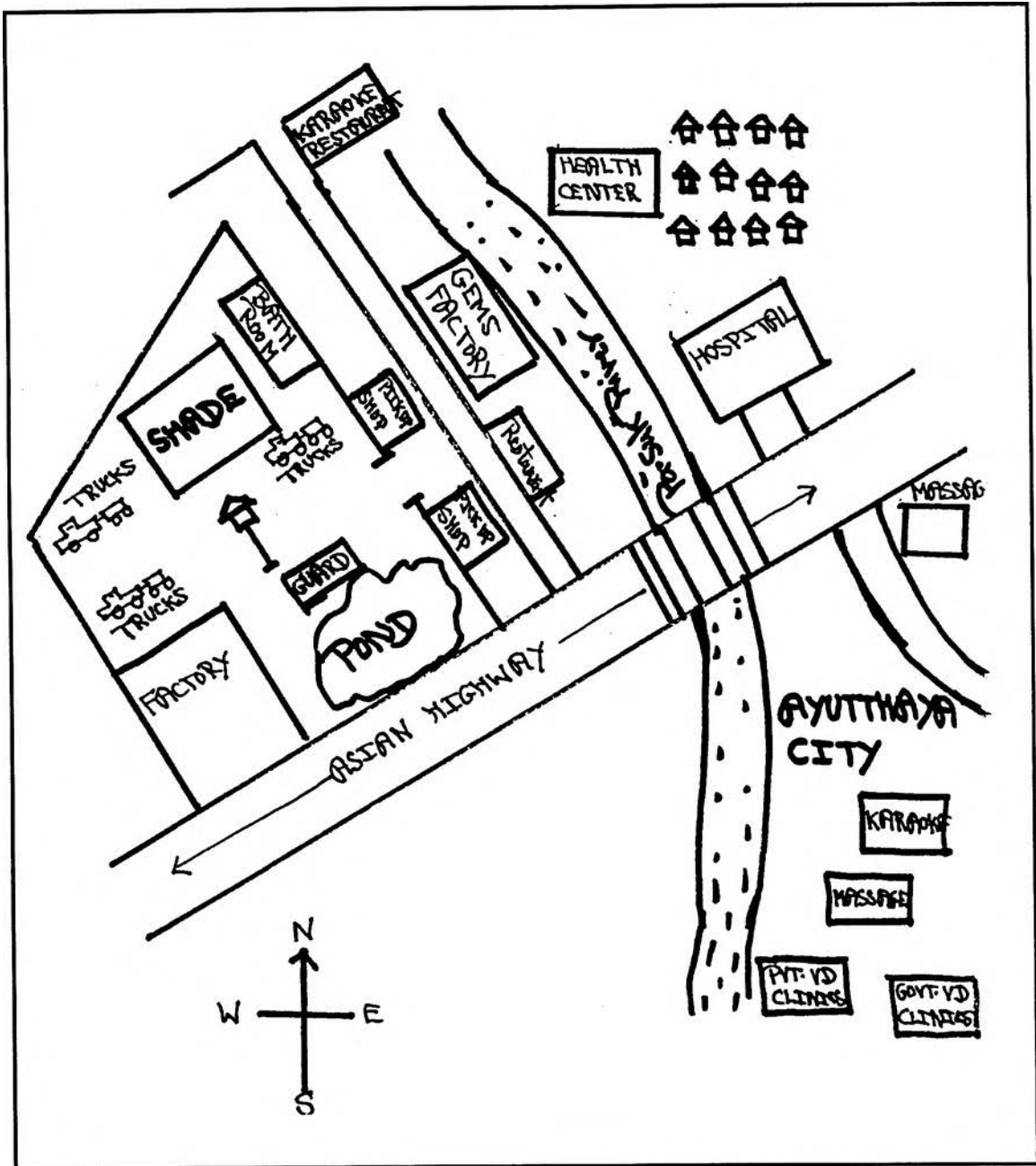


Appendix : III

Map of Ayutthaya province



Map of truck stop sites



HIV prevention counseling for transport workers

Training Curriculum

Session	Method	Time
I. HIV/AIDS overview 1. Transmission and prevention of HIV/AIDS 2. Syndromic approach to STD case management 3. Safer sex methods	Mini lecture Discussion Transmission game Handout reading	2 1/2 hours
II. Behavior change 4. Behavior modification strategies 5. Behavior change theories 6. Stages of change theory	Mini lecture Discussion Handout reading	2 hours
III. Transport workers 7. Concept of core population 8. Problems and difficulties of transport workers 9. Myths/beliefs about AIDS/STDs 10. Sexual practices of transport workers 11. Lessons learned from past interventions	Mini lecture Brain storming Group discussion Handout reading	3 hours

Session	Method	Time
IV. Value clarification 11. Risk behavior vs. high risk groups 12. Sexual words 13. Values regarding sexual issues 14. Values and attitude of a good counselor	Sexual words exercise Moving survey Sexuality Discussion Sexuality belief exercise Mini lecture	2 1/2 hours
V. Life skills 15. Condom use 16. Assertive communication 17. First aid	Condom race Role plays Demonstration Practice	4 hours
VI. Counseling 18. What is counseling 19. HIV prevention counseling 20. Counseling steps 21. Counseling skills	Mini lecture Group discussion Handout reading	2 1/2 hours
VII .Counseling practice 22. Rapport 23. Exploration/risk assessment 24. Decision 25. Action 26. Closure	Practice by Carousel Village risk advisor Role plays	5 hours

Session	Method	Time
VIII. Outreach services 27. Interventions for HIV prevention 28. Advantages of outreach services 29. Difficulties in outreach services 30. Procedures for outreach services 31. Responsibilities of outreach counselors 32. Supervision and support	Mini lecture Brain storming Discussion Practice on record/report Case presentation	3 1/2 hours
IX. Field Practice of outreach counseling 33. Selection of counseling site 34. Screening 35. Counseling 36. Recording 37. Case presentation	Field visit in truck stop Counseling Record keeping Case presentation	6 hours
Total		31 hours 6 days

Protocol for HIV Prevention Counseling

Purpose:

The purpose of this counseling is to help the clients assess their personal risks for HIV and develop a risk reduction plan that incorporates a self-identified behavior goal.

Objectives:

By the end of session 1, the client will:

1. Establish rapport with the counselor.
2. Assess personal risk for HIV infection or transmission.
3. Develop a realistic perception of personal risk of HIV.

By the end session 2, the client will:

4. Identify and plan specific actions for risk reduction by adopting one or more of the 4 safer sex behaviors: limiting number of partners, adopting less risky sexual acts, condom use and STDs treatment.
5. Receive appropriate information about HIV transmission
6. Obtain reinforcement and support from counselor for previous safer sex efforts.

By the end of session 3, the client will:

7. Receive condoms and relevant IEC materials from the counselor
8. Receive necessary life skill training from the counselor

By the end of session 4, the client will:

9. Obtain appropriate referrals to resources for support of desired behavior change.

Guidelines for the counselor:

1. Maintain strict confidentiality for all people receiving HIV counseling and assure confidentiality to the client.
2. At the beginning of each session, explain to the client the purpose of the session, its expected duration and what is hoped to happen in the session.
3. Make the session interactive and client-focussed by enhancing client's participation (client should speak more than the counselor) and by making it responsive and relevant to the client's particular needs. Listen effectively to what the client's says, use open-ended questions, do not interrupt needlessly, and respond to questions appropriately.

4. Avoid making preconceived set of points during the session, and focus on i) exploring client-specific issues to HIV risk behaviors and ii) developing goals for the clients rather than simply providing information.
5. During the session, communicate at the client's level of understanding, avoiding technical terms, jargon or words beyond client's comprehension (e.g. 'window period').
6. Take what the client says at the face value, while exploring relevant circumstances and details of the client's life and risks to establish a context for what the client reports or beliefs.
7. Optimize opportunities to reinforce the client's intentions and reported actions relative to addressing HIV or STD issues in his or her life.
8. Respond appropriately to what the client states and to the client's feelings.
9. Help the clients to understand dissonant statements when they come up (for example, dissonance between reported behavior and risk perception, between behavior and intentions, between reported behavioral and conflicting information).
10. At the end of each session, make an appointment with the client for the next counseling session and give a card to the client writing the day, time and place of appointment.

Counseling task

Introduction and rapport

- Introduce yourself as an outreach counselor
- Describe the purpose of session, expected duration and what is hoped to be achieved, as well as assure confidentiality
- Seek consensus from the participant as to objectives of the session and agreement to maintain this focus throughout the counseling.
- Be polite, professional and display respect, empathy and sincerity to the clients.
- Become involved and interested and convey an appropriate sense of concern and urgency related to client's risk behaviors.
- Use plausible and factual motivation.
- Seek to deal with client's concern.

Labeling

- With the client explore his general situation
- Focus on the client's specific sexual behavior/s and circumstance, which affect that behavior.
- Establish an atmosphere that conveys a collaborative exploration of the relevant issues.
- Assess with the client what he knows and explain him the transmission of HIV
- With the client, identify the categories and range of behaviors that place him at risk of HIV, focussing on his specific behaviors, situations, and partner encounters that contribute to his risks.
- Exploration of behaviors during risk assessment is an integral component of the counseling intended to facilitate the client's self- understanding of his her risks. It is not intended as a screening tool or data collection process.
- Help the client recognize specific sexual behaviors that place him at risk

Commitment

- Help the client identify any self-initiated changes already made in response to HIV/AIDS and inquire into his social(peer) and community perceptions of HIV/AIDS.
- reinforce/support the client's actions, intentions, and communications about safer sex behaviors.
- Clarify misinformation and educate only as needed in his specific situation.
- Help the client understand the barriers to safer sex behavior: partner limitation, less risky sex act, condom use or STDs treatment.
- Explore the risk-reduction attempts in detail, and identify and define impasses and difficulties.
- Focus on client's sense of self efficacy for specific risk-reduction activities.
- Help the client to recognize dissonance in perception, intention and information.
- Focus on community and peer norms, and relevant attitudes and beliefs

Suggested reinforcing statements:

- It's great that you are here!
- You have taken the first step; you are doing a great job; keep it up!
- The fact that you are concerned about HIV is important.
- It is important you recognize how you have clearly been thinking about reducing your HIV risk.

Enactment

- Help the client set specific goals for safer sex
- Help the client establish a reasonable yet challenging risk-reduction step towards one or more of the 4 safer sex behaviors.
- Ensure together that it addresses the client's baseline risk behavior as identified in the risk assessment phase and incorporates previous attempts made and perceived barriers to reducing risk.
- Discuss how the client will operationalize the plan, using specific and concrete steps.
- Establish a back up plan.
- Confirm that this plan is personalized and is acceptable to the client.
- Document the plan, give a copy to the client and retain a copy for the file.
- Acknowledge that the plan is a challenge and assure that you will work with him to discuss and review the outcome at the next visit.
- Explain that together you can negotiate the plan if necessary.
- Ask the client to repeat his plan to make sure that you both are clear.
- Solicit questions and validate his initiative in agreeing to try to negotiate a risk reduction plan.
- Teach the client life skills such as use of condom and sexual and assertive communication.
- Give the client IEC materials and condoms if required.

Closure

- Help the client to solve problems faced in implementing the risk reduction plan.
- Reinforce attempts made by the client.
- Refer the client to other service sites such as condom distribution outlets, information booth, STD treatment clinic or testing site.
- Tell the client that he can now continue the safer sex without your help.
- End the counseling relationship assuring future help if required.

Appendix: VII**HIV prevention counseling for transport workers****In-depth interview guide for Key Informants****1. Purpose:**

- Introduce yourself (researcher) and tell the purpose of data collection.
(Note: for probing use mirror technique and paraphrasing in order to maintain neutrality)

2. Introduction/Background:

- Please tell me a little about yourself and your work (make sure that you get information about their age, education, type of work and place of origin)
- Please tell me about the transport workers that you are in contact with (sub-group, age/sex composition, ethnicity, languages, education, marital status and place of residence).
- Where can they be accessed easily? (truck stops, mechanic/repair center, gas station, bar, brothel, police post, transport association, license renewal office, others)
- Please tell me about their relationship among each other (communication, sense of community, specific norms, conflict, any difference in sub type).

3. Truck/bus stops:

- Please tell us about the halting points or resting-place for truck/bus drivers and assistants. (location, number, distance)
- Why do they like the particular place? (Restaurants, tea, alcohol/drugs, CSWs or other girls, no disturbance from police or public, parking place, mechanics, enough water to clean, other) How long would they stop here? How frequently do they come here?
- How many vehicles come to rest in this stop per day? What types of vehicles? How many vehicles are seen in this stop at one time?

4. Working condition of transport workers:

- Please describe the work of transport workers. (Type of employment, salary, extra income, insurance, medical expenses, where do they come from, duration of round trip, distance they cover, places they go, frequency of trip, crew members per trip) What type of supplies they carry? Who takes care of that?
- How frequent are the accidents? Who pays in case of accidents? (damage, penalty, medicine, death, others)
- What is the daily routine of transport workers? What time of day they drive and when they rest? (Toilet, bath, eating, morning, day, evening, night, if possible exact time)

- Are there any differences between bus and truck drivers or with their assistants/ helpers? (differences in terms of employment, salary, status, travel etc).
- What is it like inside the driver cabin? (cool, cassette player, space to sleep, space to keep personal items). Where does the helper sit during driving? Where do they sleep during night?

5. Stress and anxiety:

- What types of mental/physical difficulties transport workers face because of their occupation? (their main concerns, stress because of away from home, financial pressure, traffic rules, others)
- What is the coping mechanism for those stresses? (Drug, alcohol, gambling, sex, other entertainment)
- What do the drivers do in resting time? (drug, alcohol, gamble, sex, others)
- Please tell me more about drug or alcohol they consume. (availability, where to get, how much they consume, where they store, level of addiction, what type alcohol and drug, price)
- Do they face any problem because of that? What problems? (accidents, fine, work, violence, family, economic, others)

6. Sexual partners:

- How would you describe their sexual behavior? Do they have other partners? (multi-partners, Visit to CSWs, frequency of visit, difference between subgroups)
- Please tell why they have other partners (reasons to have other partners, physical need, emotional need, away from spouse/home, no community checks, peer norm, financial affluence, alcohol/drug, more sexual enjoyment etc).
- What particular type of partners do they prefer? (young, school girl, rural, modern)
- Do they face any difficulties because of other partners? (what difficulties, financial, social, family, disease, police, others).
- Do they want to reduce number of sexual partners? Any such case you know? What difficulties they face in this effort? (stress, away from home, alcohol, peer pressure, others).
- What support they would receive in their effort to reduce number of partners? From whom? (Emotional, educational, wife, peers, others).

7. Sexual act:

- What they like about other sex partners? (Young, beautiful, modern, gentle, fresh, sexually more pleasure, others)
- Why they think other partners can give more sexual pleasure? (different positions of sex, anal, oral, others).

- What about other types of sex? (non penetrative sex, sex during menstruation) What exactly they do? (Sex between thigh, breast, other parts)
Do they enjoy?
- What do they do when they can not find other sex partners? (Man to man relations, with whom, any case of sex abuse).
- What do they do when alone? (Sexual gratification)
- What problem they would face not to do risky sex acts: anal sex and sex during menstruation or do non penetrative sex? (loss of pleasure, loss of partner, habit, others).
- What support they would receive in this effort? From whom? (emotional, educational, from friends, family etc).

8. Condom use:

- Do they use any protection? What? (condom, lubricant, spermicide, take antibiotic, lemon or dettol wash, other methods)
- What are their perceptions about condoms? (less pleasure, breakage, not healthy, difficult to wear, expensive, not available, others)
- Where can they get condoms? (shops, free in clinics) Is it near?
- What they do for lubrication? (they like it dry, use local oil, others)
- What protection do they use with wife? Why? (nothing, condoms, other contraceptives).
- Do they always use condom? When and with whom they do not use? Why? (wife, non commercial partners, with male partners, others).

- What difficulties would they face in always using a condom? (Peer norm, no pleasure, financial, storage, others).

9. STDs treatment:

- What are the common illnesses they suffer? (STDs).
- Where do they go for treatment? What treatment? (hospital, pharmacy, NGO clinic, traditional healers, nothing).
- When do they go? Do they wait for certain symptoms to appear? (Immediately after sex, immediately after symptoms appear, wait till symptoms become severe). Why do they go late?
- Do they take/send their partners also for treatment? Which partners? Why? (embarrassment, loss of partner, money, unknown partners, others).
- What support they would receive if they wanted to treat their partners also? By whom? (friends, families, others)

10. Knowledge and risk perception:

- What do they say about AIDS? (Incubation period, window period, blood testing, transmission, prevention, treatments, number/persons infected, others).
- What are their common beliefs about AIDS? (not real, drivers are immune, medicine will come, traditional healing, others)
- Are they afraid of AIDS? Why? (no treatment, visit to CSWs, STDs, no condom use, IDU, others).

- Do they consider themselves at risk of HIV infection? Why? Why not? (Enough protection, 'can not happen to me', others).

11. Suggestions/closure:

- Please tell me about their specific needs? What would they value most? (money, praise, consumer items, treatment, medicine, others)
- What are the ways you think to help them? (secure employment, legal support, insurance, treatment, health education, others).
- To whom do they listen to most? Who is most popular with transport workers? With whom do they interact most? (peers, senior transport workers, elder family members, wives, other partners, police, pharmacists, others)
- Any suggestions for us for HIV prevention program?

Rapid ethnographic study of the truck stops

Observation checklist

Note to the observer:

- Select a truck stop for observation by asking key informants.
- Go there at the time when the maximum number of transport workers are likely to come.
- If necessary introduce yourself to people concerned and explain the study purpose.
- Observe carefully in a comfortable way and make rapid notes related to the following points.
- Do not do activities likely to raise unnecessary attention and disturb the environment.
- Clarify things by informal conversation with people around there.
- Leave the place in the case of hostile environment.

1. People present:

- Who is/are present? (Drivers, cleaners, conductors, passengers, shop keepers, vender girls etc.)
- How can we describe them?
- What roles they are playing?

2. Event/activity:

- What is happening? (Selling, cooking, talking, sleeping, eating, drinking, vehicle washing, repairing etc.)
- What are people doing and saying?
- How are they behaving?
- How and what are they communicating?
- What body language are they using?
- Why this event happening?
- Are there different perspectives on what is happening?
- What contributes to things happening in this manner?

3. Place/environment:

- Where is this happening? (Truck/bus park, gas station, repair shop, restaurant, bar, brothel, medical shop, clinic etc.)
- How important is the physical surrounding?
- Can and does this happen elsewhere?
- When does this activity occur?
- How is it related to other activities or events?
- How long does it last?
- What makes it the right or wrong time for this to happen?

4. Mapping:

Include the following things in the map:

Major action settings

- Social divisions of the truck stop sites
- Directions and distances between key sites.
- Natural features such as rivers, forests, roads.
- Location of Karaoke parlors, barber shops, bars, alcohol shops, restaurants or hotels, and other entertainment areas, if any.
- Medicine shops, STDs treatment, clinics, shops with condoms etc.
- Gas station, vehicle repair shops, truck parking area, toilets, bathrooms etc.

Topic Guide

Focus Group Discussions with transport workers

1. INTRODUCTION

- First of all clearly explain the objectives of the discussion.
- Introduce yourself and your team members present there. Then request the participants to introduce themselves one by one. Get the necessary background information about each of them such as age, ethnicity, language, education, place of residence and marital status.
- Pass about five minutes to make the group comfortable. You may talk about the general situation such as climate, farming etc.
- Request the participants to tell about their opinion clearly and frankly. Tell them that their opinion is very valuable for our study.
- Clarify that this is not a test. Explain that no answers are correct or incorrect and all type of answers and ideas are equally welcome.
- Assure them that their response will be kept fully confidential and will be used only for the purpose of research.
- Get their permission to record the discussion on tape.
- Do not use any sensitive words such as sex, sexual act, AIDS, Vagina, penis, CSWs from your side. Let it come from the participants in discussion and you probe little by little on that.

- Avoid using judgemental or leading words such as advantage, disadvantage, support, approve, barrier, easier, immediately etc.
- First ask about transport workers/drivers in general and then gradually ask about the participants themselves.
- The key words we are looking for are: safer sex, anal sex, oral sex, vaginal sex, masturbation, homosexual, HIV, AIDS, STDs, alcohol use, drug use, bar, karaoke, massage parlor, CSWs, casual partners, second wife, treatment, hospital, clinic, pharmacy, pleasure/ enjoyment, condoms, lubricant. Do not mention that word yourself. But when the participant mention that word probe from that to get detailed information. What, where, when, why, how, who etc.

2. BACKGROUND:

Use some information received from key informant interview as the ice breaker.

- What is your job like? (Permanent, contract, salaried, lease, owner)
- How do you like it? How long you are working?
- Are you married? Where is your wife?
- How long is your trip? And how often do you go back home? Do you want to go more? Why?

3. SEXUAL CONTACT AND PARTNERS:

The main purpose here is to find out about the number of partners, commercial/non commercial partners, who they are, reasons for seeking sex outside and motivation having many partners and difficulties/support in reducing partners.

- What do drivers do in the long trip? Where do they take rest? What about the truck?
- What drivers do in free time during those trip? Where do they hang around? And you? What do you like about that? Why?
- Do drivers have other partners? Why? How many? What about you?
- Who are they? Where do they live?
- How often do drivers see them? What do they do?
- What does drivers think about having relations only with wife? Why? Why not?
- What does your wife think about drivers having other partners? Why? Why not? And for you? For you or for her? What will she do?
- What do your friends think about having many partners? Which friends? Why?

4. SEXUAL ACT:

The main purpose is to find out about the riskiness of sex act as indicated by anal, vaginal, oral or non penetrative sex and difficulties if any to move from risky to non risky sex acts. Also we should try to know about the motivation to do risky sexual acts and difficulties/support to adopt less risky sex act such as non penetrative.

- What do you like about other partners? Why? What do they do? What about with your wife?
- What do other drivers like to do? What they do? How? With whom?
- What can drivers do if alone? Has anybody here tried? How do you like that? Why? What others think about that?
- Are there drivers who have male to male relationship? Why? What do they do? What do you think?

5. CONDOM USE:

The purpose is to know about the frequency of condom use, reasons for no use, with whom they use, in what sex acts and support to use.

- What type of protection do you use sexual acts? When? With whom? How many times? Why not always?
- How do you feel using that? Why? How to wear that?
- Where do you find that? How?

- Do you try not to use it some time? Why? With whom do you try?
- How do your wives like that? Why? What she will do?
- How do your friends like that? Why? What they will do?
- What do you do if you have no condom? How? Why?

6. STDs TREATMENT:

The purpose is to find out timing and type of STD treatment as well as treatment to their partners, and also difficulties/support for that.

- What do you do if you have reproductive health problems? Where do you go? Why or why not? What happen there? How do you like there? And do you take your partner/s also?
- How soon will you go? Why?
- What your wife would think? What your friends would think? About what? Why?
- How do you know if you have any reproductive health problem? And to your partner/s? From where did you know?
- What other drivers do if they have reproductive health problem? When would they go? Where? What do you think about them?

7. RISK PERCEPTION AND ANXIETY:

The purpose is to know their risk perception and level of fear anxiety and reasons.

- What do you know about HIV/AIDS?
- What do drivers talk about HIV/AIDS among themselves? Why?
- Do you feel you are at risk of HIV infection? Why? How can it be overcome? By whom?
- Do you think drivers have any fear or anxiety regarding HIV/AIDS? What about you? Why? How can it be overcome?

8. CLOSURE:

- Ask if they have any suggestions regarding this. To whom? Why?
- If time permits, summarize or ask the note taker to summarize the main points found in the discussion for verification.
- Thank all the participants for their involvement in active discussion and their valuable opinion.
- Distribute a small gift item for each of them if possible.

Appendix : X

HIV Prevention counseling
Observation checklist for Simulated client

Site:-----	Session duration:----min			
Observer:-----				
Counselor:-----	Observation date:--/--/---			
Counseling Activities/skills	Not achieved	Achieved	Excelled	
Rapport				
1.Created a comfortable environment /privacy	1	2	3	4 5
2.Introduced each other	1	2	3	4 5
3.Defined scope/duration	1	2	3	4 5
4.Assured confidentiality	1	2	3	4 5
5.Polite and respectful	1	2	3	4 5
Labeling				
6.Listened effectively	1	2	3	4 5
7.Used appropriate non verbal communications	1	2	3	4 5
8.Used open-ended question	1	2	3	4 5
9.Identified and clarified client's needs, concern, fear	1	2	3	4 5
11.Assisted the client to identify risk	1	2	3	4 5
12.Addressed peer perception of HIV/AIDS	1	2	3	4 5

Commitment					
13. Discuss together client's options to reduce risks	1	2	3	4	5
14. Identified and reinforced client's previous actions	1	2	3	4	5
15. Assessed barriers and support to risk reduction	1	2	3	4	5
16. Provided information based on needs	1	2	3	4	5
17. Used appropriate audio/visual aids	1	2	3	4	5
18. Helped client to recognize dissonance in risk perception, intention and conflicting information	1	2	3	4	5
Enactment					
18. Helped client set an achievable goal	1	2	3	4	5
19. Negotiated reasonable yet challenging incremental steps to achieve the goal.	1	2	3	4	5
20. Confirmed with the client that the plan was reasonable and acceptable	1	2	3	4	5
21. Help client learn specific skills such as condom use and sexual communication to operationalize plan	1	2	3	4	5
Closure					
22. Reinforced client's risk reduction efforts, intention and plan	1	2	3	4	5
23. Made referrals as necessary	1	2	3	4	5
24. Reassured confidentiality	1	2	3	4	5
25. Assured help in future as required.					

Appendix: XI

Confidential

HIV Prevention Counseling

Pre and post test Questionnaire

I.D. Number:

Clients name:

I. DEMOGRAPHIC CHARACTERISTICS:

1. How old are you? years
2. What ethnic group or tribe do you belong to?.....
3. What is your nationality?
4. On an average how much do you earn per month? Rs.....per month
5. Where do you come from?

<input type="checkbox"/> Rural	<input type="checkbox"/> Urban
--------------------------------	--------------------------------
6. What is the name of the place? And how far is it from here?

.....Name of the place. Distance in kilometer.
-------------------------	------------------------------
7. What school grade have you completed?

<input type="checkbox"/> Illiterate	<input type="checkbox"/> Illiterate only
<input type="checkbox"/> Primary education	<input type="checkbox"/> Secondary
<input type="checkbox"/> High school	<input type="checkbox"/> Other (specify)

8. Are you married?

Yes

No → Go to Q.N.10

9. Are you presently living with your wife?

Yes

No

↓

II. 9.1. Where does she live?
.....
9.2. How frequently do you visit her?
.....
9.3. What is approximate number of days
you are away from her?

10. Have you had sex in the last month?

Yes

No → Go to

↓

10.1. How many times did you have sex
in the last month?

11. Do you have other sex partners?

Yes

No → Go to Q.N.

↓

11.1. Last month how many sex
partners did you have sex with? .

.....Number of persons

12. What type of sex partners did you have sex with in last two months?

Wife

Casual partner →

Commercial partner →

Others (Specify) →

12.1. If other than wife, why did you have other partners?

Peer pressure

Alcohol

Away from home

Release engine heat

Other (Specify).....

13. Last month, did you have sexual contact other than vaginal intercourse?

Yes

No



13.1. What type of sexual acts did you perform?

Anal

Oral

Non penetrative

Other (Specify).....

III. CONDOM USE AND SEXUAL COMMUNICATION

14. Have you ever used condom?

Yes

No → Go to Q.N.15



14.1. What are the reasons for using condom?

Birth control

HIV prevention

STDs prevention

Other(specify)

15. Did you use a condom last month?

Yes



15.1 How many times did you use a condom?

No



15.2 Why did not you use a condom?

Not available

Reduce pleasure

Opposed to their use

Partner suspect

Too expensive

Other (specify)

16. Do you feel that you are able to talk about safer sex with your partner/s?

Yes



16.1 What do you say?

Condom

Non penetrative sex

STDs treatment

Partner reduction

family Planning

Other (Specify)

No

IV. STDs TREATMENT SEEKING:

17. Have you or your sex partner/s experienced any of the following symptoms in last month? (You may tick in more than one boxes)

- Burning in the penis
- Pus from the penis
- Foul smelling discharge from vagina
- Lower abdominal pain
- Other specify

18. Did you go for treatment of the symptoms last month?

Yes



No



18.1 Where did you go?
 Health post/center
 Hospital
 Pharmacy
 Ayurved
 Faith Healers
 Others (Specify)
 18.2 After how many days did you go?
 Number of days.

18.3. Why?
 No need
 Embarrassment
 Expensive
 No knowledge
 Not available
 Very far
 Others (Specify)

19. Did you take your sex partner/s also for the treatment?

Yes



No



19.1 How many partners did you
 take for treatment?
 Number of partners.

19.2 Why?
 No need
 Expensive
 No knowledge
 Not available
 Very far
 Others (specify)

V. RISK PERCEPTION, FEAR AND KNOWLEDGE:

20. Do you think you are at risk of HIV infection?

Yes



<p>20.1 Why ?</p> <p><input type="checkbox"/> Do not use condom every time</p> <p><input type="checkbox"/> Have multiple partners</p> <p><input type="checkbox"/> Visit CSWs</p> <p><input type="checkbox"/> My partner has other partners</p> <p><input type="checkbox"/> Had blood transfusion</p> <p><input type="checkbox"/> Inject drugs</p> <p><input type="checkbox"/> Had hospital operation/injection</p> <p><input type="checkbox"/> Others (specify)</p>

No



<p>20.2 Why not? .</p> <p><input type="checkbox"/> Use condoms every time</p> <p><input type="checkbox"/> Only one partner</p> <p><input type="checkbox"/> No CSWs visit</p> <p><input type="checkbox"/> Not injecting drugs</p> <p><input type="checkbox"/> No operation/ injection</p> <p><input type="checkbox"/> No blood transfusion</p> <p><input type="checkbox"/> Others (Specify)</p>
--

21. Are you very afraid of AIDS or HIV?

Yes



<p>21.1 Why ?</p> <p><input type="checkbox"/> No medicine</p> <p><input type="checkbox"/> Life long infection</p> <p><input type="checkbox"/> Death</p> <p><input type="checkbox"/> Loss to family members</p> <p><input type="checkbox"/> Large expenses</p> <p><input type="checkbox"/> Social stigma</p> <p><input type="checkbox"/> Job loss</p> <p><input type="checkbox"/> Other (Specify)</p>

No

22. Do you know any thing about HIV/AIDS?

Yes

No



22.1 How is HIV transmitted?
.....
.....
.....
22.2 From where do you know that?
.....Name of place/person

VI. CLIENT SATISFACTION:

23. Did you find the counseling session helpful?

Yes

No



23.1. Why?
.....
.....

24. Would you come back for further counseling service?

Yes

No



2.4.1 Would you want the same counselor?
<input type="checkbox"/> Yes <input type="checkbox"/> No

25. Do you have any suggestions for the HIV prevention program?

.....

Thank you very much for your support. Your information will really help us to better understand the situation in the transport sector.

Vehicle registration Number till 2055 Ashad Masanta (July 1998)

<p align="center">HIS MAJESTY'S GOVERNMENT MINISTRY OF WORKS AND TRANSPORT DEPARTMENT OF TRANSPORT MANAGEMENT NEW BANESWOR, KATHMANDU NEPAL VEHICLE REGISTRATION NUMBER Till 2055 Ashad Masanta</p>									
OFFICE	BUS	MINI BUS	TRUCK/TANKER	CAR/JEEP/VAN	TEMPO	MOTORCYCLE	TRACTOR	OTHER	TOTAL
BAGMATI	1,471	1,562	5,042	31,124	3,978	71,047	1,672	3,278	119,174
NARAYANI	3,666	342	8,187	6,689	774	10,452	4,899	49	35,058
LUMBINI	955	167	1,323	1,642	240	6,582	3,081	20	14,010
KOSHI	302	179	1,219	2,473	265	7,931	1,308	154	13,831
GANDAKI	517	202	671	2,793	-	5,397	585	13	10,178
JANAKPUR	182	18	379	436	34	5,420	1,239	70	4,778
BHERI	187	32	465	499	132	2,436	807	14	4,572
MECHI	236	35	397	441	18	1,513	318	2	2,960
SAGARMATHA	93	16	234	346	9	1,137	480	3	2,318
SETI	95	5	316	159	37	564	815	2	1,993
MAHAKALI	150	6	174	154	29	388	231	-	1,132
RAPTI	123	6	97	163	9	445	244	6	1,093
TOTAL :-	7,977	2,570	18,504	46,919	5,525	110,312	15,679	3,611	211,097

CURRICULUM VITAE

Navin K. Pyakuryal

Save The Children US

Kathmandu, Nepal.

Phone: 412570

Date of Birth : 10 February 1957.

Education : Master in Economics, 1981, Tribhuvan University,
Kathmandu.

Diploma in Demography, 1992, IPPS, Bombay.

Work Experience : Program Officer, Save The Children US from October
1992

Information Officer, Family Health Division Ministry
of Health from 1981 to 1992.