

**KNOWLEDGE AND AWARENESS OF HIV/AIDS OF RICKSHAW  
PULLERS IN BUTWAL MUNICIPALITY**

A Thesis Submitted to:

**Central Department of Rural Development  
Faculty of Humanities and Social Sciences  
In partial fulfillment of the requirement for the Master's  
Degree of Arts in Rural Development  
Tribhuvan University, Kirtipur, Kathmandu**

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**November 2006**

## **RECOMMENDATION**

The thesis entitled **Knowledge and Awareness of HIV/AIDS of Rickshaw Pullers in Butwal Municipality** submitted by **Yuba Raj Ghimire** was prepared under my guidance and supervision. I, therefore, recommended this thesis for final approval and acceptance.

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## **ACKNOWLEDGEMENTS**

This research work could never have been completed without valuable co-operation and assistance of many individuals and organizations.

First and foremost, I wish to express my sincere and deep sense of gratitude to Suman Baskota, Lecturer, Central Department of Rural Development, Tribhuvan University for his valuable suggestions, encouragement and guidance while preparing this research work. He has provided me much of his precious time in the completion of this work. His wise counseling and guidance provided me the inspiration to go ahead with the work.

I wish to express my deep indebtedness to Prof. Dr. Pradip Kumar Khadka, Head of the Department, Rural Development, T.U., Kirtipur for his academic guideline.

I am also grateful to all the staff of Riksa Byavasayi Sangh Butwal, for their kind cooperation.

I must express gratitude to my family members for the continuous support in my efforts. I also extend special thanks to Bishnu Ghimire and Reshmi Raj Ghimire for their co-operation during the process of preparing this report.

**Yuba Raj Ghimire**

**November 2006**

## ABSTRACT

The study on knowledge and awareness of HIV/AIDS among the rickshaw pullers of Butwal Municipality was carried out by using primary data collected from different places of Butwal.

The main objective of this study is to analyze the existing level of knowledge and awareness among rickshaw pullers about the mode of transmission and method of prevention of AIDS. It has attempted to explore and reflect the situation of Rickshaw puller who is in the risky occupational group.

The main tool applied in this study is questionnaire. Different books, magazines, research papers were studied to prepare the questionnaire. After the preparation of questionnaire, suggestions and comments were sought from supervisor. Other method like observation and interview with key informants were conducted.

The total population is 150 and all are males. The purposive sampling technique was used to select the study area and samples of 150 respondents most of the respondent are married and majority of the respondent of age group 20-25 majority of the respondent were Brahmin/Chhetri followed by Tharu. Regarding their educational status these was a majority of literate people. Although income from rickshaw pullers is not sufficient or just sufficient most of them doing their job for more then 5 years many of the respondents bad their house and land at origin.

Regarding the knowledge on HIV/AIDS 18 percent of then had never knowledge about AIDS and we found Tharu people have very little knowledge about it. F.M Radio was the most cited sources of knowledge followed by friends. The over all knowledge on HIV/AIDS was found to be not less although misconception regarding the non sexual transmission routes still high both in literate and illiterate respondents misperception regarding the mode of transmission by mosquito bites seemed to be some of them believe there is medicine for the treatment of this disease.

Regarding the commercial sex most of them (68%) told they have not had sex with commercial sex workers on the reply of question 32 percent told to use condom during intercourse, 30 percent told not to have sex with many partners, 10 percent replied not to have sex at all preventing AIDS transmission.

Misconception regarding the mode of transmission was high in both illiterate and literate respondents.

Many respondents think the AIDS us curable and have medicine for it.

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## ACRONYMS

AIDS	-	Acquired Immune Deficiency Syndrome.
CBS	-	Central Bureaus of Statistics
CDPS	-	Central Department of Population Studies
CSW	-	Commercial Sex Workers
DHS	-	Demographic Health Survey
HIV	-	Human Immune Deficiency Virus
NCASE	-	National Center of AIDS and STD Control
T.U.	-	Tribhuvan University
UN	-	United Nation
UNFAP	-	United Nation Fund for Population Activity
WHO	-	World Health Organization

## CHAPTER-I

### INTRODUCTION

#### 1.1. General Background of the Study

AIDS (Acquired Immune Deficiency Syndrome) is caused by human immune deficiency virus (HIV). It is also called slim disease. According to Oxford dictionary it is an illness, which attacks the body's ability to resist infection and which usually, causes death. AIDS was first recognized in 1981 in USA and now it has presented it self being one of the most burning problems of the world. It needs immediate action and effective planning to control. It is transmitted by sexual intercourse, contaminated needles or syringe, transfusion of inflected blood and by an infected mother to her unborn child. The risk of transmission is very high through blood transfusion that is about 90 percentages. The risk of transmission to fetus is about 30 percentages and 1 per 1000 to 1 per 1000 for a single contact through sexual intercourse. But in the case of South East Asia, the mode of transmission is 80-90 percentage sexual intercourse, 3-5 percentage by blood transfusion, 5-20 percentages by injecting drug use (WHO, 1993).

In Nepal, first AIDS case was found in `1988. Commercial sex workers and their customer, young migrant labour force, drivers of long route and the people sharing infection without sterilization are seen mostly affected from this disease.

There are three stages in the development of AIDS from initial infection. They are acute infection, a symptomatic stage and AIDS. During initial stage there may not be any symptoms in patient. When HIV antibody test is carried out the text is negative, but the person can transmit the disease to others. This period is known as Window period and Healthy carrier stage. This stage almost lasts for 2 months.

In a symptomatic stage the person looks healthy but has HIV in the body. This period might last for 5-12 years. AIDS develops after this period.

Major signs and symptoms of HIV/AIDS include Weight loss more than 10 percentage of body weight, continuous diarrhea for more than one month and continuous fever for more than one month. Minor signs and symptoms of HIV/AIDS include. Persistent cough for more than one month, it chi skin disease, seen various types of herpes and thrush in mouth and throat the virus is not spread by combs, sitting together, hugging, eating together, shaking, hands, Mosquito/insects and using same toilet.

There is no effective treatment and vaccination found yet. Some medicines developed so far are not effective treatment of the disease. They can only help in prolonging the life span. It ca be controlled by reducing the number of sex partner, use of condom and provision of diagnosis and early treatment of sexually transmitted disease.

Everyone is convinced that until and effective remedy is found there is only one effective tool for curbing HIV/AIDS and that is education and awareness. We also need to end all form of gender based discrimination and exploitation and abuse of girls and women in Nepal.

Globally, there are 42 millions people living with HIV/AIDS out of them 38.6 millions are adult, 19.2 millions are women and 3.2 millions are children under 15 years (UN AIDS,2003).

In regional context, it is estimated there are 13000 people in Bangladesh, 3970000 in India, 58000 in Nepal, 78000 in Pakistan, 4800 in Sri Lanka are living with HIV/AIDS by the end of 2001 (UN AIDS, 2002).

In the case of Nepal, there are 2698 HIV infected person by February 2003. Out of them 1962 are male and 736 are female (NCAS Teku Hospital). This data is of those who have got their blood tested voluntarily. In fact a large number of people have been suffering from it. It is estimated that there are almost 58000 people have HIV in Nepal (UN AIDS, 2002). In 1988, it was found only 14 people 3 of them were male and 1 female in Nepal (NCAS, Teku Hospital).

According to the age group, 1420 people out of 2698 are in the age group 20-29, 1032 male and 388 female (NCAS, Teku Hospital). So it is seen mainly the young and economically active population have been affected by this disease. It is also seen 470 sex workers and 1669 clients of sex workers are suffering from it (NCAS, Teku Hospital 2003).

There is no sign that the problem of HIV/AIDS is diminishing; in fact the truth is completely opposite. There is strong evidence that unsafe sex is on the increase, with the latest national survey of sexual attitudes and life styles showing an increase in number of sexual partners, lower age at first sexual intercourse, increase levels of heterosexual. All of these are known to be associated with HIV/AIDS infection.

Major ways to prevent HIV/AIDS spreading are education, prevention of blood borne HIV transmission and health care.

**Education:-** Until a vaccine or cure for AIDS is found, the only means available in the present society is health education and use of condom during sexual intercourse. There is "however" no guarantee that the use of condoms will give full protection. Intravenous drug users should be noticed that the sharing of needles and syringe involves high risk. Women suffering from AIDS at a high risk of infection should avoid becoming pregnant. Educational material and guidelines for prevention should be made widely available. Mass media channels should be mobilized in educating the people on AIDS, its nature, transmission and prevention.

Prevention of Blood borne HIV Transmission: People in high risk groups should be urged to refrain donating blood, body organs sperm or other tissues. All blood should be screened for HIV 1 and HIV 2 groups before transfusion. Strict sterilization practices should be ensured in hospitals and clinics (Adhikari 1996).

**Primary health care:-** AIDS touches all aspects of primary health care, including mother and child health, family planning and education. It is important that AIDS control programs are not conducted in isolation integration into countries primary health care system is essential.

## **1.2. Statement of Problem**

AIDS educators, consultants and information experts say that awareness about the fatal disease that is AIDS has not reached to desired level and all types of people. Educated people know about the disease but uneducated people may not know anything about it. Many uneducated people who work as drivers or rickshaw pullers may not have proper knowledge regarding the transmission and prevention of HIV/AIDS.

The National Center for AIDS and STD Control (NCASC) is playing an important role in providing data, information, communication and education sharing the assistants from other nongovernmental organizations. Efforts made by it may be insufficient due to the lack of proper information about the perception of AIDS.

Effective planning towards AIDS prevention and control is possible only with the help of authentic statistics related to the knowledge about HIV/AIDS. HIV/AIDS is challenging and burning problem face by every nation. Unsafe sexual intercourse is a common mode of transmission of HIV/AIDS. 470 sex workers, and their 1669 clients, male 1662 and female 57 are suffered from it (NCAS, 2003). Study and evidence show this disease is transformed mostly from male partner to the female partner. Many people even if they are infected with the disease

cannot come up openly thinking they would hate by the society. It is also true that our society may not know it is a fatal disease, which can be avoided with the improvement of self behavior. Many people still do not want to sit together and share love and affection with HIV/AIDS victims, It should be clear to every one it is a disease, which is not easily transformed from one person to another i.e. while eating together, by shaking hands, by toilet seats, by hugging, by combs and by insects. The most serious obstacle is the silence and stigma surrounding the disease.

AIDS is the most burning issue in the world, which has no any medicine for the treatment. Prevention is only the way out of it. We can prevent this disease if people are aware of it . Therefore public awareness is the most important to protect people from it.

The study of awareness on HIV/AIDS among rickshaw pullers in Butwal municipality of Rupandehi district occupies great importance because of multifactorial problems like drug addiction, sex trade, girls trafficking, open boarder with India, migration, industrial area and is on the highway route. Thus Butwal municipality of Rupandehi district was selected as study are purposively.

In this study, rickshaw pullers from Butwal municipality were selected as the target groups and sample area for the study. Rickshaw pullers were selected for the study because they were migrant workers, young, of the reproductive age group. Productive and represent a group that is involved in risky behavior, and considering a group which is out of school and college so naturally far from education.

### **1.3. Significance of the Study**

AIDS is a big challenge given to the scientists of 21<sup>st</sup> century. Even the developed countries are suffering from these problems. Many researchers are conducted on HIV/AIDS in Nepal. But this study focus

about the knowledge and awareness of working class people i.e. Rickshaw pullers who are out of school, campus and seminars about HIV/AIDS. We need to have access to correct information and knowledge about sexual and reproductive health. This study will definitely help to reveal the existing situation of AIDS awareness among the backwards and general people of the country who are residing out of capital city. It will also help to bring out any misconceptions about the modes of transmission. This will be even a guide for planner and policy maker. It will give out a new way for the future research and study.

This study also attempts to find out the source of information of AIDS from which they have heard about it. It also helps to improve the effectiveness of the Medias. It will equally important to planners to adopt the new strategies to eliminate the existing wrong concepts.

#### **1.4. Limitation of the Study**

1. This study is based on Butwal municipality only. So the national scenario of the rickshaw pullers may not be reflected.
2. Findings from it cannot be generalized for others uneducated people who are not rickshaw pullers by occupation.
3. The reporting of modes of transmission and sex with commercial sex workers may be inaccurate due to shyness, prestige and conservative culture.

#### **1.5. Objectives of the Study**

The main objective of this study is to analyze the existing level of knowledge and awareness on AIDS among the rickshaw pullers. Others objectives are as follows.

1. To find out the knowledge, awareness and misconceptions on HIV/AIDS.
2. To know the effectiveness of media about HIV/AIDS.
3. To study the socio-economic status of rickshaw pullers.



## **CHAPTER-II**

### **LITERATURE REVIEW**

The transmission of HIV sexuality is solely associated with intercourse, with insertive and receptive anal intercourse and receptive vaginal intercourse resulting in HIV. The probability of transmitting HIV during unprotected anal intercourse is greater than for the receptive partner than insertive partner among men and the risk of transmitting HIV from man to woman is greater during anal intercourse than vaginal intercourse. The chance of transmitting HIV from male to female during vaginal intercourse also is greater than of female to male transmission; however, the probability of transmitting HIV from female to male is increased if menstrual blood is present during intercourse (Sharma, 1996).

There is no evidence that HIV is transmitted by kissing or kissing with blood or lesion in the mouth that have resulted from braces on the teeth or from brushing and flossing the teeth, in addition, the transmission of HIV has not been associated with rare presence of HIV in saliva (Sharma, 1996).

The different modes of HIV transmissions are sexual intercourse including homosexual/heterosexual intercourse, oral and sex, artificial insemination, blood transfusion, organ transplantation, use of contaminated syringes, needles, safety pins, blades, surgical instruments, tooth extractor drug abusers, pregnancy and delivery (Bekalo, 1994).

The major mode of HIV transmission in Nepal is heterosexual transmission and it is estimated that 85 percentage of HIV transmission in Nepal is heterosexual transmission (Theme of World AIDS day 1999).

Several studies have demonstrated that the use of condoms during sexual intercourse reduces the risk of transmitting or acquiring infection

with HIV as well as other STDs and consistent condoms use can play an important role in AIDS prevention. Condoms are however not perfect and can vary in quality depending on manufacturing technology and practices and preventing standards (WHO 1999).

HIV prevalence is 1.5 percentages among the truckers. Condoms use during the last encounter with a sex worker was 70 percentages (New Era 2000).

An important component of AIDS prevention programme is the promotion of safe sex. The NHDS sought to determine the proportion of men who had sexual relationship with women other than their wife. The data show that the overwhelming majority of married Nepalese men (98%) did not have sex with anyone else other than their wife in 12 months preceding the survey. Knowledge of condoms is important information from the programme's perspective. Although 70 percentages of currently married women know where to obtain condoms, only half of them could get condoms by themselves. 84 percentages of currently married men know of a source of condoms. Condom is much less common with a spouse than with a noncomhabitiny partner. Only 6 percentage of men have used a condom with a spouse, compared with 45 percentage of men who have used a condom with non cohabitiny partner(DHS,2001).

High prevalence of unsafe sexual practices, STDs and low rates of condoms use facilitates HIV transmission in Nepal. In addition lack of public awareness related to the country's low rates of literacy, a shortage of appropriate AIDS education messages and strong cultural prohibition against the public discussion of sex. Further contribute to the problem. The principal route of AIDS transmission is heterosexual with commercial sex fuelling the current spread of HIV in Nepal (UNAIDS,1999).

Pre and extra marital sex is not commonly in Nepal and the high prevalence of STD in the general population further facilitates HIV transmission in the country. High prevalence of unsafe sexual practices, STDs and low rates of condom use facilitates HIV transmission in Nepal. In addition, lack of public awareness to the country's low rates of literacy, a shortage of appropriate AIDS education messages and strong cultural prohibitions against the public discussion of sex further contribute to the problem (Subedi 1992).

A study in two VDCs Sandepuni and Darakh of kailali districts, a total of 610 males aged between 18 and 50 years were selected and a high proportion of participants (76%) were aware of the importance of condoms during intercourse. A vast majority of participants claimed to have knowledge of HIV/AIDS(79%) and its transmission routes (73%). They reported that with the use of condoms they could protect themselves from being infected with the fatal disease. But among these who visited sex workers, only 62 percentages used condoms during sex with sex workers (New Era, 2002).

HIV infection was found only among those who visited Mumbai (6.1%) and had sex with sex workers without using a condom. They reported that when involved in such behavior they could not think of its necessity (New Era, 2002).

About 90 percentages of the transport workers and male laborers reported having sex with a women. 64 percentage of the transport workers and 28 percentage male laborers have admitted to have with a sex worker (New Era 2001).

Research carried out along the highway routes indicated that the majority of the clients of sex workers are industrial workers, rickshaws, transport/migrant workers, police/ army personnel etc. This group of

clients possessed high risk of acquiring HIV because of their behavior (New Era,1997).

During the study 769 individuals were interviewed on issue related to HIV/AIDS. 3 percentages of respondents were able to explain HIV/AIDS and its transmission modes and preventive measures. 28 percentages were able to explain two-transmission modes of HIV/AIDS and their prevention measures. Only few individuals were able to explain three-transmission modes of HIV/AIDS. 47 percentage said that HIV/AIDS was incurable 8 percentage had not heard about HIV/AIDS. 22 percentages were not aware of HIV/AIDS. 78 percentage respondents said that HIV/AIDS was transmitted through unsafe sex (Action Aid Nepal, 2000).

In a thesis prepared the questionnaire given to respondent to give their view about AIDS transmission, a large number of respondent 97.14 percentage considered blood transfusion as the main cause for AIDS transmission, likewise, the second large number of respondent 84.77 percentage viewed the unutilized needle as the main cause of AIDS transmission, Accordingly they viewed sex with multi partner (66.67%), sex without condoms (49.52%) and infected mother to her baby (47.14%) as the main agent for HIV transmission (CDPS, 2002).

Only one in two women (50%) compared with nearly three in four men (72%) have heard of AIDS. At the same time, 38 percentages of women and 67 percentages of men believe there is a way to avoid HIV/AIDS. The depth of women's knowledge of HIV/AIDS is also much lower than that of men. One in three women and one in two men know of two or more.

Programmatically important ways to avoid HIV/AIDS. About one in three women mentioned use of condoms and limiting the number of sexual partners as specific ways to avoid HIV/AIDS, compared with 63

percentage and 54 percentage men respectively. In addition, about two-fifth women and three-fifth of men say a healthy looking person can have Ads and that HIV/AIDS can be transmitted from a mother to her child 14 percentage of women and 23 percentage of man have discussed HIV/AIDS with their spouse (DHS, 2001).

The study reveled that 73 percentage of rickshaw-pullers had heard of AIDS. Radio, TV are the most cited sources of knowledge among 42.46 percentage of rickshaw-pullers. 24.20 percentage respondents reported that HIV/AIDS is curable just like other disease whereas 48.40 percentage of rickshaw pullers believed that HIV/AIDS is not curable. Misperception regarding the mode of transmission by mosquito bites seemed to be high as compared to others(71.23%). In specific 53.21 percentage illiterate and 46.79 percentage literate respondents said that HIV/AIDS is transmitted by mosquito bites (Kalpana Paudel,2000).

Radio is the most cited source of knowledge of condoms amont the sex worker and male sentinel groups. For the sex workers and male sentinel groups the percentage citing radio as a source of knowledge is more than 90 percentage (New Era, 2001).

A dissertation by Nepal on his thesis that all of the respondent said they heard about AIDS, but only (27%) of them were able to report that AIDS is caused by the virus called Human Immune Deficiency Virus(HIV). Among these students who think themselves knowledgeable about HIV/AIDS have also same misconception that (24 %) of them think mosquito bite is a cause of AIDS transmission. Like this 11 percentage of the respondents think pills is also useful contraception preventing AIDS and other STDs. Similarly, some of their view was that only a few of the person would die who were infected with HIV/AIDS. According to his report the students of age 15 years and more are found better knowledgeable than those who were less than 15 years of ages. The name

of AIDS carrier is not known by (73%) of the students. Among the students who think themselves knowledgeable about AIDS,(24%) don't have correct knowledge. This may be due to the difficulties in understanding the messages disseminated through the mass media. More than (10%) of the students are found well informed about the problem that AIDS can produce. They said that "AIDS is dangerous" and all of the persons infected with AIDS would surely die. He found that high percentage of students demand AIDS awareness program in their village as well as schools (Nepal 1998).

There are approximately 80000 to 1 lakh full-fledged cases of AIDS in India. An estimated 3 to 5 million people are infected with HIV/Virus and this figure is rapidly rising every day (Grewal and Bhatia,1998).

In a survey conducted in Indian slums out of total 40 percentage people had heard of AIDS. And only 4 % knew about HIV virus. Majority of AIDS patient are in the age group of 15-44 years(89%) (Grewal and Bhatia, 1998).

Major challenges remaining in the promotion of use of condoms in South-East Asia which include social, cultural and religious sensitiveness, lack of access to condoms and inability to talk frankly about condoms or sex (WHO,1999).

Gender based violence, sexual abuse and exploitation in south Asia increase risks and vulnerability to HIV/AIDS. There is growing evidence in the region that violence against women, especially domestic, is of epidemic proportion with 40 to 70 percentages of women and girls in South Asia experiencing some forms of physical, sexual and emotional abuse (Hayward,2000).

South Asia is the most gender sensitive region. Gender inequality manifested by low social status, illiteracy, violence, sexual abuse and

powerlessness put the girls and women at greater risk of HIV infection. Young girls are vulnerable because of their inability to refuse unwanted and unsafe sex. In Nepal 1/3 of reported HIV positive cases are women of whom 33 percentage are adolescent (UNDP,1998).

About 41 percentage of HIV positive Bangladeshi have been migrant workers. Research in the Tarai area of Nepal revealed that the 17 percentage of sex workers who had worked in India accounted for three-quarters of all HIV cases. About 30 percentages reported that they had been coerced. Testing revealed that these women were 3 times more likely to be HIV-infected than other women (UN AIDS, 2001).

In the first 10 years of the HIV/AIDS epidemic, 63 percentage of the people diagnosed with AIDS have died, of the people diagnosed with HIV diseases between 1978 to 1983,92 to 96 percentage had died by 1987. Between 1985 and 1988,HIV/AIDS became one of the 10 leading causes of death among women of reproductive age. In 1990 HIV-infected was among the top 10 cause of death in the US. Among person 24 to 47 years old AIDS was the 3rd leading cause of death and accounted for 13 percentage of all deaths (Sharma, 1996).

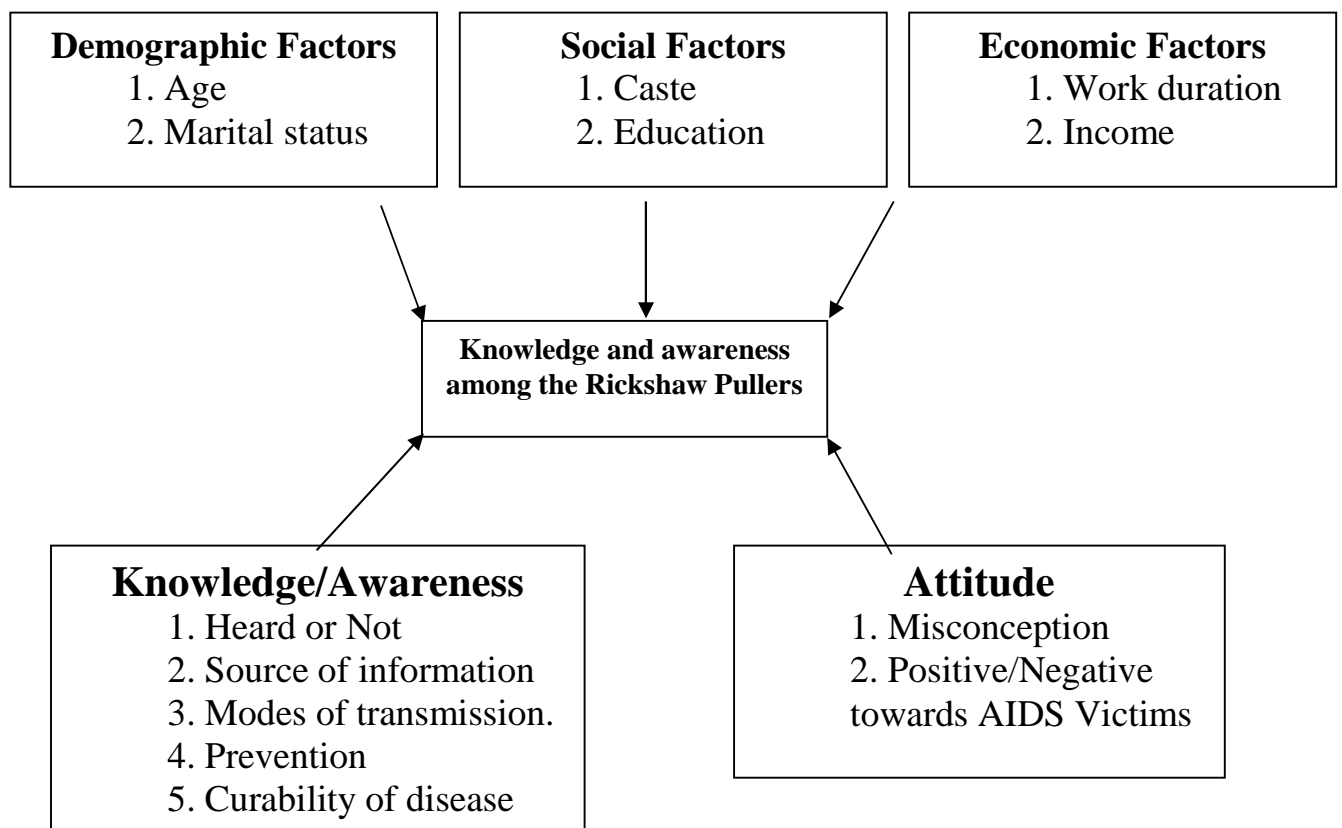
It is estimated that 95 percentage of those infected live in developing countries and two thirds live in sub-Saharan Africa, where 8 percentage of adults aged 15-19 are HIV positive. AIDS has a terrible effect on individuals and communities, as it strike down working people, orphan children and places huge strains on health care and social system (UNFPA 1999).

Sometimes, young people know of the risks of unprotected sex but feel AIDS could not possibly happen to them. In Malawi, most young men and women know how HIV is transmitted and how it can be prevented when asked, however, many said they felt invulnerable to the virus. Some 90 percentage of teenage boys said they were at no risk or at

minimal risk of infection, even though nearly half of them reported at least one causal sex partners over the last year and condom was low (UN.AIDS, 1999).

### Conceptual Frame Work

The conceptual frame work was developed based on review of literature and variables selected for the analysis of awareness on HIV/AIDS. The knowledge on HIV/AIDS among the rickshaw pullers is which hypothesized to be influenced by many factors like demographic (age, marital status), social (caste and education), Economic (work duration and income). the knowledge about HIV/AIDS and attitude towards the HIV problems determines the behaviors of rickshaws pullers.



Age is an important demographic factor to influence the knowledge and awareness. It is believed young people have more knowledge than the



people of old age and teenagers. Similarly, married people know more about the means of family planning and importance of condoms. Knowledge and awareness is also affected by caste, most of the people like Tharu, Kami, Damai etc may have little knowledge about it. Education is the most important factor to influence knowledge, it is true educated people have definitely more knowledge and ideas about Aids and the modes of transmission. Sometimes, it also is likely to be affected by the duration of work (experience of work) and income. People earning may have more knowledge but it is not always true.

## **CHAPTER - III**

### **RESEARCH METHODOLOGY**

#### **3.1 Study Area**

Butwal, which is the main city of western development region, has been selected as the study area. Butwal is the municipality of Rupandehi district. The total population of Rupandehi 2001 is 708419 (male 360773 and female 347646) and the total population of Butwal municipality is 75384 (male 38712 and female 36672). People from migrate inside the district and outside of district are found in Butwal. People from Arghakhanchi, Gulmi, Palpa, Pyuthan and Syanga have migrated in the city. We can also see the people from India as it is very close to Indian boarder.

Butwal is a multi-ethnic, multi-lingual society. The major ethnic groups in Butwal are Newari, Muslim, Magar, Brahmin, chhetri , Kami, Dargee, Yadav etc. The common language or Rupandehi district are Maithali, Nepali, Tharu and other local language. Besides agricultural, labour work is also common in this district rickshaw pulling is also a main occupation among the poor and down trodden people in this district. In this study , Study area which is Butwal, has been selected purposively. The sampling universe is the total number of rickshaw pullers of the Butwal municipality. It is estimated there are almost 5000 rickshaws in Butwal municipality.

#### **3.2. Research Design**

It is based on primary data and information. Structured questionnaire are used as a major tool of information collection procedure for the data needed in this study. Both descriptive as well as exploratory types of research method are applied to make the job easier of the

respondent in answering the questions for the purpose of identifying the existing condition of knowledge and awareness of HIV/AIDS among the rickshaw pullers of Butwal municipality. No sophisticated mathematical analysis and interpretation have been used in the research.

### **3.3. Sampling Procedure**

It is estimated there are almost 5000 rickshaw are registered in Butwal municipality but actual number is more than this because many rickshaws are not registered . Rickshaw pullers were selected by non-probability technique, which is a purposive and on the spot sampling. Participation was voluntary and the total number of 150 respondents were interviews for the study. Different places like Traffic Chowk, Bus Park, Goal park, Milan Chowk and Chauraha were visited to take the interview of rickshaws pullers.

Total respondent, name from Traffic Chowk (26) Bus park(42), Goal park(22), Milan Chowk (50) Chouraha (10) were selected purpose.

### **3.4. Tools and Instruments of Data Collection**

The main tool applied in this study is questionnaire. Different books, magazines, research papers were studied to prepare the questionnaire. After the preparation of questionnaire, suggestions and comments were sought from supervisor other methods like observation, interview, key informate are use to collect data.

Pre testing of questionnaire was done in the same group and in the same area among 5 Rickshaw pullers. The questions were asked in a simple language. It was also told the purpose of study. Questionnaires were finalized on the basis of result got from the pre-testing of questionnaire.

### **3.5. Data Analysis and Interpretation Procedure**

After the collection of required data, they were tabulated in computer. SPSS 10 Programme was used to analysis and interprets the data collected.

Basically, Percentage, bar diagram, Pie charts and Graphs are used for processing, analyzing interpreting the result of data.

## CHAPTER-IV

### ANALYSIS

#### 4.1 General Characteristics of the Respondents

This chapter describes the basic characteristics of the sample population. The subsequent chapter deal with the demographic (age, marital status), social (caste, literacy) and economic (work duration and daily income) finding of sample, Rickshaw pullers. The information is basically questionnaire survey. The total numbers of respondent being 150 from Butwal Municipality.

##### 4.1.1 Age Group

It is believed that only the youth, strong and energetic persons are involved in pulling rickshaws as it is physically a difficult job. However, the respondents of all age group from 10 to 55 were found doing this job and they all are male.

**Table-1:** Age Distribution of the Respondents

Age group (class)	Respondents	Percentage
10-15	4	2.66
15-20	20	13.33
20-25	39	26
25-30	21	14
30-35	15	10
35-40	28	18.66
40-45	6	4
45-50	9	6
50-55	8	5.33
Total	150	100

Source: Field Survey 2006

Table 1 shows that 26 percentage of Rickshaw pullers are in the age group of (20-25), 18.66 percentage of age group (35-40) and 14

percentage of both (15-20) and (25-30). It is very clear most of the respondents are young and age of productive. The mean age group being 29.96 and standard deviation being 10.35

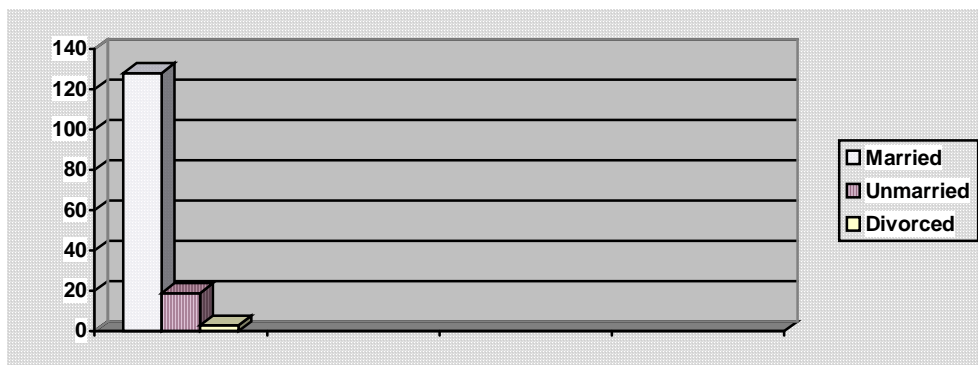
#### 4.1.2 Marital Status

Marriage is considered to be the important event in Nepalese society. It is also said one becomes matured only after his/her marriage. It is also believed marital status is one of the indicators of family responsibility in family, which could compel them to work. It is applied in Rickshaw pullers also so majority of the Rickshaw pullers are married.

**Table-2:** Marital Status of the Respondents

Marital Status	Respondents	Percentage
Married	128	85.3
Unmarried	19	12.7
Divorced	3	2.0
Total	150	100

Source: Field Survey 2006



The Table 2 shows that 85.3 percentages of the respondents were married and 12.7 percentage of the respondents were unmarried. Since married people have to support many family members, they are forced to work. Therefore, there are a majority married people on Rickshaw pulling.

## 4.2 Social Status

### 4.2.1. Caste/Ethnicity

Different castes, ethnicities and religions are found in Nepal. Caste is the main base of the social hierarchy among the people of Nepal. Some castes are considered to be of upper level and some of lower level. In this study also many castes were involved in pulling the Rickshaw.

**Table-3:** Distribution of Respondents by Caste/Ethnicity

Caste/Ethnicity	Respondents	Percentage
Brahmin/Chhetri	34	22.66
Tharu	29	19.33
Kami	21	14.00
Damai	18	12.00
Lama	12	8.00
Muslim	9	6.00
Kumal	6	4.00
Yadav	4	2.66
Others	18	12.00
Total	150	100.00

Source: Field Survey 2006

Note: Others include Newar, Limbu, Magar and Indian people.

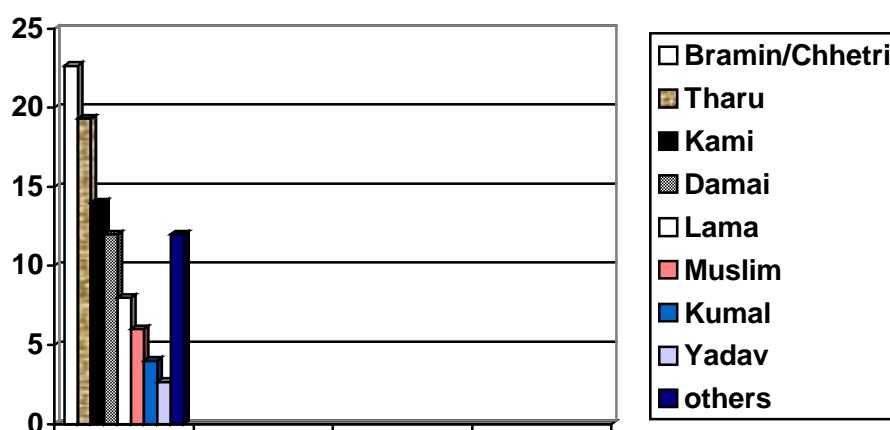


Table 3 shows 22.66 percentages of respondents are Bramin/Chhetri followed by 19.33 percentage respondents are of Tharu which could be Butwal being the city of Terai and close to hilly region. 14 percentages are Kami, 12 percentages are Damai, 8 percentages are Lama, 6 percentages are Muslim, 4 percentages are Kumal and 2.66 percentages are Yadav.

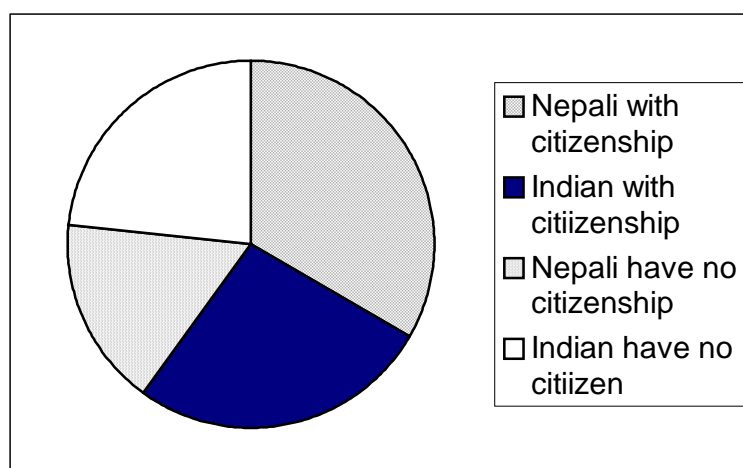
#### 4.2.2 Citizenship

Nepali and Indian citizen working the Rickshaw puller in Butwal Municipality in total workers Indian people much than Nepal people.

**Table-4:** Citizenship of Respondents

Citizen	Respondents
Nepali with Citizenship	50
Indian with Citizenship	40
Nepali have of citizenship	25
Indian No citizenship	35
Total	150

Source: Field Survey 2006



#### 4.2.3. Education

Before 1950, only a very small minority of Nepal's population had access to education. There has been a considerable growth since then over the last four decades. However it is felt that development of the education



system in Nepal has concentrated on the expansion of facilities rather than on quality of education. Nepal seems to have made substantial progress in the overall literacy rate, which went up to 23.3 percentages in 1981 to 39.3 percentage in 1991, as against about 13.9 percentages in 1971. According to the census of 2001, literacy rate of Nepal is found to be 54 percentages.

**Table-5:** Literacy Status of the Respondents

Literacy	Respondents (Cases)	Percentage
Read only	7	4.66
Read and write	82	54.66
Illiterate	61	40.66
Total	150	100

Sources: Field Survey 2006

By the nature of job, we could say illiterate Rickshaw pullers should be more than literate one. It is correct also but here is found literate Rickshaw pullers are more than illiterate it is because many innocent and illiterate Rickshaw pullers were afraid and not willing to answer our questions.

The table 4 shows 54.66 percentage of the respondent can read and write and 4.66 percentages can only read where as it is found 40.66 percentages of the respondents are illiterate more than Rickshaw puller are not passed any education level.

**Table-6:** Educational Status

Class	Respondents	Percentage	Valid Percentage
1-5	28	18.70	42.4
5-8	10	6.70	15.2
8-10	28	18.70	42.4
Total	66	44.00	100
Not passed any class	84	56.00	
Total	150	100.00	

Sources: Field Survey 2006

Table 6 shows that 89 people were found literate but the table 5 shows only 66 people have got formal education. 42.4 percent of the respondents have passed primary level followed by 42.4 percent have passed class 8 to 10. And 15.2 percent of the respondents were found to pass lower secondary level. We also found some people who have passed class 10 and working as rickshaw pullers which shows the unemployment problem in the country.

### 4.3. Economic Features

The economic status like duration of work and daily income of respondents are summarized.

#### 4.3.1 Duration of Work

Unemployment is one of the major challenging problems of our country. Many people are involved in agricultural field but job in this field is only seasonal. So, it is difficult to get a job for both educated and uneducated people.

**Table-7:** Duration of the Respondents

Work duration	Respondents	Percentage
<6 months	48	32.00
6 months to 1 year	24	16.00
1 year to 3 year	21	14.00
3 year to 5 years	9	6.00
5 year above	48	32.00
Total	150	100

Source: Field survey 2006

Table 6 shows that 32 percentages of the Rickshaw pullers were involved in the Rickshaw pulling for more than 5 year followed by 32 percentage respondents were of up to 6 months. This pattern of work duration shows that newly joined people in the profession is increasing. It could be because of people not getting any other jobs in the market.

### 4.3.2 Daily Income of Respondents

Nepal is a list development country. So, many people are effected from on employment problem who are involve in the job there are also no sufficient income. Shown below the table.

**Table-8:** Distribution of Respondents as Daily Income

Income (daily)	Respondents	Percentage
RS 100-150	48	32.00
RS 150-200	57	38.00
RS 200-250	24	16.00
RS 250	21	14.00
Total	150	100.00

Source: Field Survey 2006

Table 8 shows that 38 percentages of the respondents earn 150-200 daily followed by 32 percentage of respondents earn Rs. 100-150 and only 14 percentage of the respondents earn Rs 250 above daily. Generally, one person has to support the family of four or five members but we found many rickshaw pullers earning less than Rs. 150 in a day. Rs 150 is not sufficient at all to support their family member.

### 4.3.3 Economic Status of Respondents at Origin

In order to measure the economic status of respondents at origin three major questions house, types of house and , holding land were asked. (In the study, it was found 75.24 percent respondents were migrant workers, here migrant workers are all the respondents those who are not from Rupandehi district, field survey 2006.

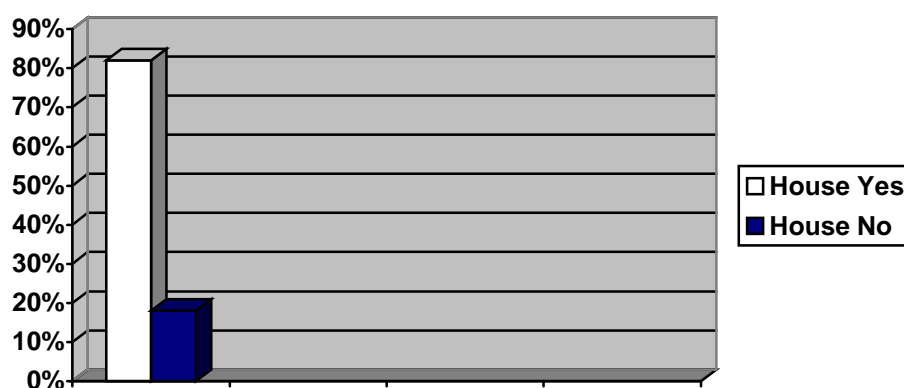
### 4.3.4. House Types of Rickshaw Pullers at Origin

All the respondents were asked whether they had their own house if yes what types of house they had. 123 of them told they had their own house and 27 of them told they did not have their own house.

**Table-9:** Distribution of Respondent on Own House or Not

House	Respondents	Percentage
Yes	123	82.00
No	27	18.0
Total	150	100.00

Source: Field Survey 2006



The table 9 shows that 82 percentage of the respondents 18 percent of the respondents did not have their own house.

**Table-10:** Type of house of Rickshaw Pullers

Type	Respondents	Percentage
Pakki	12 (simple)	9.8
Kachi	96	78
Others	15	12.2
Total	123	100

Source: Field Survey 2006

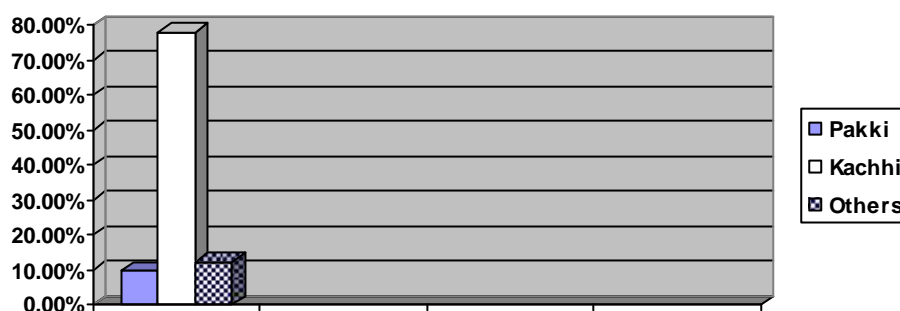


Table 10 shows that a large number of people (i.e. 78%) have Kachi house which is quite natural in Nepal and only 9.8 percent have Pakky house.

#### 4.3.5 Land Holding of Respondents

According to the table 11 given below, among the total respondents, the 94 (62.66%) respondents reported having their own and 56 (37.33%) of respondents reported of not having their own land.

**Table-11:** Holding of Land

Land	Respondents	Percentage
Yes	94	62.67
No	56	37.33
Total	150	100.00

Source: Field Survey 2006

Similarly another table shows a large number of people have very less land that is less than 5 Kattha and 5-10 Kattha of land.

**Table-12:** How Much of Land?

Land	Respondents	Percentage
Less than 5 Kattha	30	32.30
5-10 Kattha	30	32.30
10-20 Kattha	18	19.70
Greater than 1 Bigha	15	16.10
Total	93	100.00

Source: Field Survey 2006

Table 12 shows 32.30 percentages of people having less than 5 kathhas of land followed by 32.30 percentage of people having 5 to 10 kathhas of land. Only 16.1 percentage of respondents have more than 1 bigha.

**CHAPTER - V**

**KNOWLEDGE AND AWARENESS ON HIV/AIDS AMONG  
RICKSHAW PULLERS IN BUTWAL**

This chapter deals with different aspects of knowledge on HIV/AIDS among the rickshaw pullers under studying. It is the main topic of research. Main focus is given to the knowledge of the modes of transmission, measures in preventing AIDS transmission. Efforts are also made to identify the effective source of media, correct and wrong information about the disease and also their attitudes towards AIDS victims it was also asked whether they reveal to their partner if suffered from HIV/AIDS.

**5.1. Knowledge about the HIV/ Aids**

AIDS is the big challenge given to the scientist and medical persons of 21<sup>st</sup> century. Many innocent people are become the victims of this disease they lack of proper knowledge about it. In the case of Nepal, migrant workers are being victimized of this disease. In the study, researchers were asked if they have heard about HIV/AIDS. The Table 12 shows, out of the total, 123 have heard but another 27 of them told that they have never heard about HIV/AIDS. They looked so innocent and had never been to school. Butwal is the main city of Lumbini zone and very close to India and many Rickshaw pullers have come from India. So 18 percentage of the total respondent have never heard about the disease at all. When they have never heard about the disease it was no use of asking any other questions related to this disease. They were the people those who came form Bihar and U.P. to work as a rickshaw pullers in Butwal.

**Table-13: Distribution Respondents by Knowledge HIV/AIDS**

Heard or Not	Respondents	Percentage
Yes	123	82.00
No	27	18.00
Total	150	100.00

Source: Field Survey 2006

**Table-14: Relationship between Caste/Ethnicity and Known/Informed**

Caste	Know		Total
	Yes	No	
Bramhin/Chhetri	27	7	34
Kami	15	6	21
Damai	18		18
Kumal	6		6
Tharu	20	9	29
Yadav	4		4
Lama	12		12
Muslim	6	3	9
Others	15	2	17
Total	123	27	150

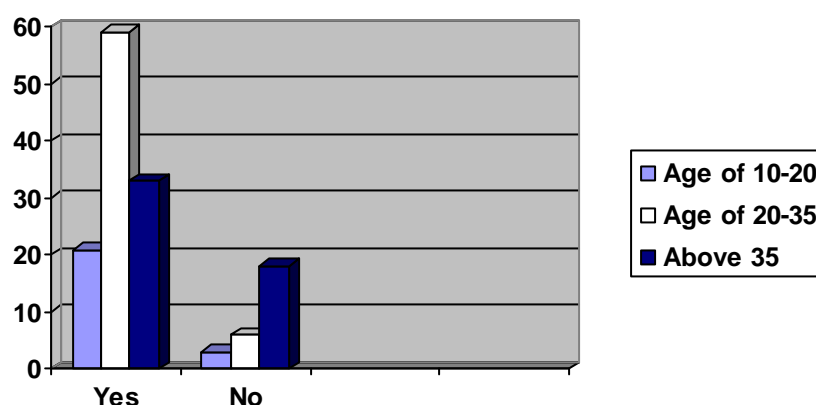
Source: Field Survey 2006

The table 14 shows many respondent those who have not heard about AIDS are Tharu and many respondents who have heard are Bramin/Chhetri. So Bramin/Chhetri are considered having more knowledge on HIV/AIDS as compared to others castes. Similarly, all the Dami, Kumal, Yadav and Lama Respondents have also heard about AIDS. Only Tharu ethnicity is found having less knowledge on it.

**Table-15:** Relationship between Age and Knowledge of Respondents

Age	Knowledge		Total
	Yes	No	
10-20	21	3	24
20-35	59	6	75
Above 35	33	18	51
Total	123	27	150

Source: Field Survey 2006



The Table 15 shows that majority of young people of age group 10-35 knowledge about HIV/AIDS and many people those who are above 35 have knowledge about the AIDS. It shows Young people have more knowledge about Aids. It could be because they have been to school and have passed levels.

**Table-16:** Relationship between Time and Knowledge of Respondents

Time	Hear		Total
	Yes	No	
Less than 6 months	39	9	48
6 months to 1 years	18	6	24
1 to 3 years	18	3	21
3 to 5 years	9		9
5 year above	39	9	48
Total	123	27	150

Source: Field Survey 2006

The table 16 shows that 100 percent respondents of those who have worked 3 to 5 years have knowledge about AIDS. The people those who have worked more than 5 years and those who have worked less than 6



months have not knowledge about AIDS. It could be respondents who have worked for less time may be new to the city and likely to be migrated from village so they may not have knowledge and the people who have worked for more than 5 years could be old and illiterate because of this they may not know of AIDS.

**Table-17:** Relationship between Income and knowledge of Respondents

Income	Knowledge		Total
	Yes	No	
100-150	36	12	48
150-200	48	9	57
200-250	24		24
above 250	15	6	219
5 year above	39	9	48
Total	123	27	150

Source: Field Survey 2006

Table 17 shows all the respondents those who income Rs. 200-250 have knowledge about AIDS. Many respondents those who income less i.e. 100-150 have not knowledge about it. So the conclusion is less income less knowledge of AIDS.

## **5.2 Source of Information on Hiv/Aids**

Communication media plays an important role in disseminating the information on HIV/AIDS. We see many messages about condoms and AIDS on Media in recent year. It was asked to the respondents from which source they have knowledge about HIV/AIDS from the first time.

**Table-18:** Distribution of Respondents by First source of Information about AIDS.

Source	Respondents	Valid percentage
F.M. Radio	54	43.91
Friends	39	31.71
T.V.	14	11.39
Poster	6	4.88
Health worker	6	4.88
Newspaper	4	3.26
Total	123	100.00
G.Total	150	

Source: Field Survey 2006

The table 18 shows 54 of the respondent told they knowledge it from radio, 39 of them from their friends, 14 from TV, 6 from poster, 6 from health workers NGO and 4 of them from news. On the basis of this data we can say radio is the most popular and effective media in disseminating the knowledge and information about AIDS and followed by friends. Only 14 of them told they have heard it from T.V.T.V. does not seem having much importance about it. It could be because many of them are poor and don't get chance to watch T.V. It could also be true to mention there since many of them drink they don't have time to watch T.V. in evening time.

### **5.3. Awareness About HIV/AIDS**

The entire respondent was asked whether they were careful about HIV/AIDS. Almost all of the respondents those who have knowledge about HIV/AIDS replied that they are careful about HIV/AIDS. It is a positive and encouraging message obtained from rickshaw Pullers of Butwal Municipality.

**Table-19:** Distribution of Respondents on Carefulness of HIV/AIDS

	Respondents	percentage
Yes	120	80
Do not know	30	20
Total	150	100

Source: Field survey 2006

The table 19 shows 80 percent of the respondents were found to be careful, 20 percent did not know and no respondents were found who are not careful about it.

#### **5.4 Knowledge on the Modes of Transmission**

A question about modes of transmission was asked to the respondents. It is a fundamental question which was asked during the sample study. Main objective of the study was to find out whether the rickshaw pullers have knowledge on the modes of transmission of HIV/AIDS. They are careful in a real sense only if they have knowledge on the modes of transmission. The result has been presented in the Venn diagram.

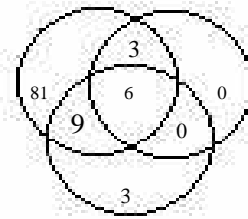
Distribution of respondents about the knowledge on the modes of Transmission

Sexual intercourse	99
Infected Syringes	9
Infected Blood	21
Sexual intercourse only	81
Infected Blood only	3
Sexual Intercourse+Syringes+Blood	6
Sexual Intercourse+Syringes only	3
Sexual Intercourse+Blood only	9

It can be shown in Venn diagram as follows:

Sexual intercourse-99

Syringes-9



Blood-18

- Total number of respondents who said at least one of the modes of transmission= $81+3+6+9=102$
- Not told at all= 48
- More than  $\frac{2}{3}$  of the respondent knew at least one mode transmission.
- 68 percentages of the total respondents knew one of the modes of transmission. Although most of the respondents those who have heard about it have told being careful about it, no one knew all the modes of transmission of HIV/AIDS. Among the different options of transmission sexual intercourse was mostly reported (81 out 123). We found very few people those who knew other modes of transmission besides sexual intercourse. It was a great irony that non of the respondents knew birth from infected mother is also a mode of transmission.
- We found 17 percentages of the heard respondents did not know any mode of transmission of HIV/AIDS. It shows a pathetic knowledge and awareness on HIV/AIDS among the Rickshaws Pullers. They need a special package program to raise the standard of their knowledge on HIV/AIDS if we want to control this disease as in our country migrant workers are in the high risk of HIV/AIDS.

**Table- 20:** Relationship between Literacy and Mode 1 (Sexual intercourse)

Literacy	Sexual intercourse	Do not Know	Total
Read only	-	7	7
Read and write	69	13	82
Illiterate	30	28	61
Total	99	48	150

Source: Field Survey 2006

69 out of total respondents 82 those who could read and write knew sexual intercourse in the mode of transmission of HIV/AIDS. It shows higher the knowledge, the more knowledge on the mode of transmission (table 19)

**Table-21:** Relationship between Literacy and Mode 2 (Syringe) and Mode 3 Blood

Literacy	Syringe	Blood
Read and Write	9	15
Illiterate	0	3
Total	9	18

Source: Field Survey 2006

Table 21 shows the respondents who could read and write have the knowledge that HIV is transmitted through infected syringes and 15 of the literate respondents told HIV is transmitted through infected blood and we also found 3 illiterate respondents saying is transmitted through infected blood.

### **5.5. Misconception**

There is still a misconception that the HIV/AIDS is transmitted through mosquito bite, sitting together, shaking hands and so on.

### 5.5.1. Respondents View on the Transmission of Disease by Mosquito Bite

It was also a main objective of the study to find out any misconception on the modes of transmission of HIV/AIDS. Respondents were asked whether the disease is transmitted by mosquito bite or not. Most of the respondents those who have heard about HIV/AIDS said this disease is transmitted by mosquito bite. Researcher came to know still there is a big misconception about the disease. A program to rickshaw pullers and migrant workers has to be launched to eliminate the wrong concept having with them.

**Table-22:** Distribution of Respondents Views on Mosquito Bite

View	Respondents	Percentage
Yes	77	51.33
No	19	12.66
Do not know	54	36.00
Total	150	100.00

Source: Field survey 2006



Table 22 shows only 19 out of 150 respondents knew that the disease is not transmitted by mosquito bite. It is very low frequency as 131 respondents gave the wrong answer.

**Table- 23:** Relationship between Literacy and Mosquito Bite

Literacy	yes	No	Don't Know	Total
Read-only	7	-	-	7
Read Write	51	10	21	82
Illiterate	19	9	33	61
Total	77	19	54	150

Source: Field Survey 2006

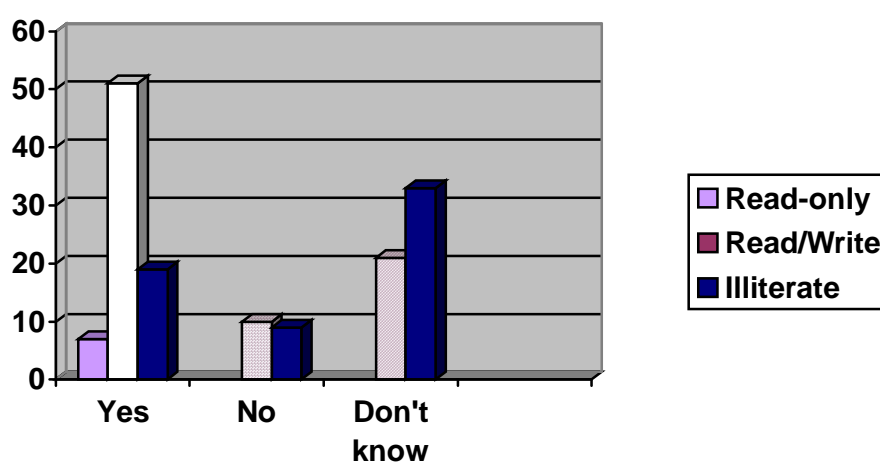
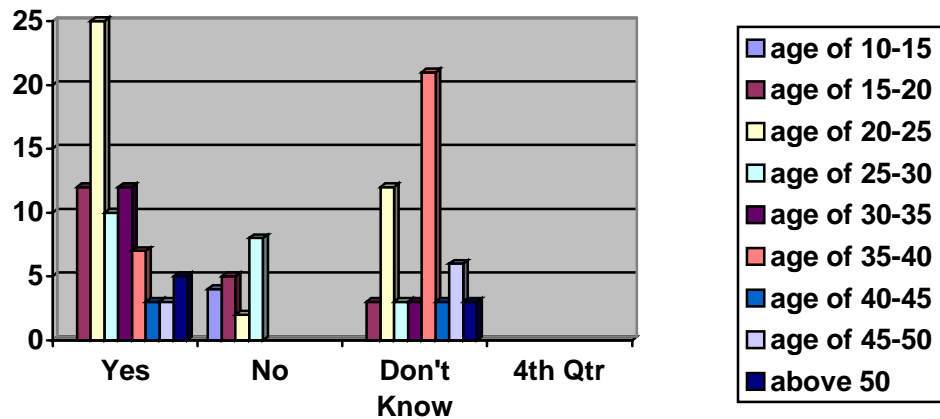


Table 23 shows 10 of the respondents who could read and write told disease is not transmitted by mosquito bites. 33 illiterate people of 61 didn't know about it. Misconception regarding the modes of transmission by mosquito bites seems to be high both in literate and illiterate people.

**Table-24:** Relationship between Age and Mosquito Bite

Age	Yes	No	Don't Know	Total
10-15		4		4
15-20	12	5	3	20
20-25	25	2	12	39
25-30	10	8	3	21
30-35	12		3	15
35-40	7		21	28
40-45	3		3	6
45-50	3		6	9
Above 50	5		3	8
Total	77	19	54	150

Source: Field Survey 2006



The Table 24 shows that 8 respondents out of 21 (i.e. 38.09 percent) of the respondents of age group 25-30 knew the disease is not transmitted through mosquito bites. Similarly all the respondent of age group 10-15 knew the disease is not transmitted through mosquito bites. There is high frequency (25) in age group 20-25 who told the disease is transmitted through mosquito bites. Even the young people of age group 20-25 have misconception that the disease is transmitted through mosquito bites.

### 5.6 Knowledge about Treatment of HIV/AIDS

AIDS is a fatal disease which has no medicine found so far in the history of medical treatment. Medical persons are making untiring efforts towards it. It would be a great achievement of 21<sup>st</sup> century's Scientist if any medicine is invented for AIDS. Anyway so far there is no medicine, which can cure for the HIV/AIDS. During the study time everyone was asked whether the AIDS could be cured or not. Majority of them told it cannot be cured but a significant respondents told it would be cured that shows that they have still very little knowledge about its.



**Table- 25:** Distribution of Respondents on Cure of HIV/AIDS

	Respondents	Percent
Yes	33	22.00
No	66	44.00
Don't know	51	34.00
Total	150	100.00

Source: Field Survey 2006

According to the table 25,22 percent of the respondents told the AIDS can be cured and 44 Percent of the respondents told the AIDS can't be cured. It shows even if many of them know AIDS is transmitted by sexual intercourse, a large number of people don't know there is no any medicine and the disease can not be cured. Ultimately infected person has no any alternate way except to die. So planners will have to make certain efforts towards it.

**Table-26:** Relationship between Literacy and Cure

	Yes	No	Don't know	Total
Literacy				
Read-only	2		5	7
Read write	19	48	15	82
Illiterate	12	18	31	61
	33	66	51	150

Source: Field Survey 2006

According to the table 26 that 48 respondents out of 82 (i.e. 58.54%) those who couldn't be cured and 18 respondents out of 61 illiterate respondents (i.e. 29.5%) told the disease can not be cured. So there is positive relationship between literacy and knowledge on cure of HIV/AIDS.

**Table- 27:** Relationship between Cure and Age

Age	Yes	No	Don't Know	Total
10-15		4		4
15-20	9	9	2	20
20-25	3	24	12	39
25-30	6	9	6	21
30-35	3	6	6	15
35-40	6	9	13	28
40-45	3		3	6
45-50	3		6	9
Above		5	3	8
Total	33	66	51	150

Source: Field Survey 2006

The table 27 shows respondents of age group 10-15 and 20-25 have more knowledge in comparison to others age group, non of the respondent of age group 40-45 and 45-50 knew that the disease is not curable. Many respondents that is 24 out of 39 age group 20-25 knew the disease is not curable.

**Table-28:** Relationship between Caste/Ethnicity and Cure

Caste/Ethnicity	Yes	No	Don't Know	Total
Brahmin/Chhetri	3	25	6	34
Kami	6	3	12	21
Damai	3	12	3	18
Kumal	3	3		6
Tharu	15	5	9	29
Yadav		3	1	4
Lama	3	3	6	12
Muslim		6	3	9
Others		6	11	17
Total	33	66	51	150

Source: Field Survey 2006

The table 28 shows that Brahmin/Chhetri have more knowledge as 25 out of 34 respondents knew the disease is not curable and Tharu has less knowledge on the cure of HIV/AIDS as only 5 out of 29 respondents knew the disease is not curable. Even Damai seems to have some knowledge as 12 out of 18 knew the disease is not curable.

**Table-29:** Relationship between Income and Cure

Cure				
Income	Yes	No	Don't Know	Total
50-100	12	15	21	48
100-150	9	30	18	57
150-200	9	12	3	24
Above 200	3	9	9	21
Total	33	66	51	150

Source: Field Survey 2006

Table 29 shows the people those earn more have told that there is no cure for HIV/AIDS (i.e. 9 out of 21). Similarly, 12 respondents out of 24 earning Rs. 150-200 have told there is no cure for HIV/AIDS and 30 respondents out of 57 earning 100-150 told there is no cure for HIV/AIDS but only 15 respondents out of 48 earning 50-100 told there is not cure for HIV/AIDS. So the people those who earn less have less knowledge about and more earning, more knowledge on it.

**Table-30:** Relationship between Duration of Work and Cure

Time	Yes	No	Don't know	Total
Less than 6 months	15	21	12	48
6 months to 1 years		9	15	24
1 year to 3 year		18	3	21
3 years to 5 years	6		3	9
5 years above	12	18	18	48
Total	33	66	51	150

Source: Field Survey 2006

Table 30 shows the people those who have worked from 1 to 3 years have more knowledge on it as 18 out of 21 knew the disease is not curable.

### 5.7 Knowledge in Preventing Aids Transmission

Prevention is only the way out of it since medical treatment is not possible of this disease since many of them are aware that the main modes of transmission is sexual intercourse are they told not to have sex with many partners and use of condom during the intercourse are the measures of preventing AIDS transmission.

**Table- 31:** Distribution of Respondents in Preventing AIDS Transmission

Prevention	Respondents	Percentage
Not to have sex at all	15	10.00
Use condom	48	32.00
Not to have sex with many partners	45	30.00
Not to sit with AIDS patients	3	2.00
Don't know	39	26.00
Total	150	100.00

Source: Field Survey 2006

The table 31 shows 32 percent of the total respondents told to use condom during intercourse and 30 percent of the respondents told not to have sex with many partners. Only 3 of them not to sit with AIDS patients so overall knowledge on it is satisfactory.

**Table-32:** Relationship between Method of Prevention and Literacy

Prevention	Read-only	Read/Write	Illiterate	Total
No sex at all		12	3	15
Use condom	1	28	19	48
No sex with		33	12	45
Not to sit with AIDS patients			3	3
Don't know	6	9	24	39
Total	7	82	61	150

Source: Field Survey 2006

The table 32 shows that the people who can read and write showed their due concerns on different preventive measures. 12 literate people told not to have sex all, 29 literate people told to use condom during the intercourse and 33 literate people no sex with many partners. So there is a majority of literate people saying use condom and no sex with many partners in preventing aids transmission.

**Table- 33:** Relationship between Age and Method of Preventive Measures

Prevention						
Age	No sex	Use condom	No sex with many partners	Not to sit with AIDS patients	Don't know	Total
10-15	3	1				4
15-20		8	9		3	20
20-25	3	18	12		6	39
25-30		15		3	3	21
30-35	3		9		3	15
35-40			9		19	28
40-45		3	3			6
45-50	3		3		3	6
Above 50	3	3	3		2	8
Total	15	48	45	3	39	150

Source: Field Survey 2006

The table 33 shows many respondent saying use condoms and no sex with many partners from age group 20-25. So, young people have more knowledge on prevention of HIV/AIDS. But the age group of 25-30 say to use condom and age group of 35-40 say not to have sex with which a misconception is having with them. 3 out of 4 respondents of age group 10-15 say not to have sex all

**Table- 34: Relation between Caste/Ethnicity and Method of Prevention**

Caste/Ethnicity	Prevention					Total
	No sex	Use Condom	No sex with many partners	Not to sit with AIDS patients	Don't know	
Brahmin/Chhetri	6	4	12	3	9	34
Kami		6	6		9	21
Damai		12	6			18
Kumal		3	3			6
Tharu	3	11	3		12	29
Yadav			3		1	4
Lama	3		6		3	12
Muslim		3	3		3	9
Others	3	9	3		2	17
Total	15	48	45	3	39	150

Source: Field Survey 2006

Table 34 shows that 12 out of 34 (i.e. 35.39%) of Brahmin/Chhetri respondent told not to have sex with many partners 12 out of 18 (i.e. 66.66%) of Damai respondent told to use condom and 12 out of 29(i.e.41.37%) of Tharu respondents didn't know. The above table shows tharu has less knowledge on it as compared to other castes.

### **5.8 Knowledge on Availability of Medicine**

All the respondents were asked whether there is any medicine available for the treatment of HIV/AIDS. Many people still have wrong concept that there is medicine for the treatment of HIV/AIDS. A campaign in generating awareness on HIV/AIDS has to be conducted asking Rickshaw pullers to be involved in it to remove wrong thinking from their mind.

**Table-35:** Distribution of Respondents on Availability of Medicine.

	Respondents	Percent
Yes	42	28.00
No	46	30.70
Don't know	62	41.30
Total	150	100.00

Source: Field Survey 2006

Table 35 shows 28 percent of the respondents told there is medicine 30.7 percent told there in no medicine and 41.3 percent didn't know.

**Table- 36:** Relationship between Literacy and Medicine

		Yes	No	Don't know	Total
Literacy	Read only	2	1	4	7
	Read & write	17	37	28	82
	Illiterate	21	10	30	61
Total		40	48	62	150

Source: Field Survey 2006

Table 36 shows 37 out of 82 (i.e. 45.12%) respondent who could read and write told there is no medicine but only 10 on 60 (i.e. 16.39%) of Illiterate respondent told there is no medicine for it. So literate people have more knowledge than illiterate

### **5.9. Knowledge of the Name of Contraceptive that Can be Used to Prevent AIDS Transmission**

**Table-37:** Distribution of Respondent on Contraceptives

	Respondents	Percent
Condom	102	68.00
Don't Know	46	30.66
Doesn't Believe	2	1.34
Total	150	100.00

Source: Field Survey 2006

Table 37 shows a large number of people (68%) told condom is the contraceptive which can prevent HIV/AIDS transmission 30.66 percent did not know. It was also found 1.34 percent of the respondents who did not believe in any of the contraceptive, which used to avoid HIV/AIDS transmission.

### 5.10. Knowledge about Being safe for AIDS

In the absence of any treatment, we mostly look prevention as our main way for overcoming this disease. The most important to prevent the spreading of AIDS should be in people is to ensure that their sexual behavior does not put by themselves at risk. Two major sexual changes are needed; the reduction is the number of sexual partners and move from high risk to low risk sexual activities. To find out the knowledge about the method to be safe from HIV/AIDS some question to the each respondent were asked.

**Table-38:** Distribution of Respondent on Knowledge to be Safe from AIDS

	Respondents	Percent
Medicine	16	10.66
Awareness	7	4.66
Avoid sex with many partners	92	61.33
Don't know	35	23.33
Total	150	100.00

Source: Field Survey 2006

Table 38 shows 61.33 percent of the respondents told to avoid sexual intercourse with many partners. Only 4.66 percent told awareness in fact awareness is the most important things to be safe from AIDS. 10.66 percent of the respondent told to use medicine despite the fact there is no medicine found for the treatment of the disease.



### 5.11. HIV/AIDS Program at Local Level

The WHO has launched a "Global Program on AIDS" on February 1, 1987 to provide a global leadership and to support the development of National AIDS Program.

There are any programs related to AIDS are being conducted by NGOs and NGOs in the country. Realizing the gravity o situations "National AIDS Control" has been setup under the chairmanship of Prime minister in our country. A question was asked the entire respondent if there were any programs in their area related to AIDS. Most of the respondent told either no or didn't know.

**Table-39:** Distribution of Respondents on HIV/AIDS Program in Local Level

	Respondents	Percent
Yes	20	13.33
No	95	63.33
Don't Know	35	23.33
Total	150	100.00

Source: Field Survey 2006

Table 39 shows a large number of people are not aware of any program conducted about AIDS in Butwal Municipality. There are 63.3 percent respondents who say there is no any program related to HIV/AIDS. Only 13.33 percent respondent told some programs were conducted about HIV/AIDS.

### 5.12 Sexual Intercourse with Commercial Sex Workers

Although it is very difficult to get actual number of people involved in it, a large number of people from our country are found to be engaged in commercial sex work. Many uneducated girls are sometime found satisfying their clients in restaurant and hotels in Kathmandu who have come to valley in search of jobs from Kavre, Trisuli, Nuwakot. Many women along the highway have taken it as their main profession.

Bus and Truck drivers are their main clients. Since prostitution is not legalized in the country, many jobless women are found/seen in major parts of cities waiting for the clients hiding from the security forces. Migrat workers are found to be going with them.

So, there was a question to the Rickshaw pullers if they have had sex with any commercial sex workers the distribution is as follows.

**Table-40:** Sexual Intercourse in Commercial Sex Workers

	Respondents	Percent
Yes	18	12.0
No	132	88.00
Total	150	100.00

Source: Field Survey 2006

Table 40 shows 88 percent of the total respondents have not had sex with commercial sex workers. It could be nice and encouraging information to the researchers on HIV/AIDS, as many migrant workers have not had sex with commercial sex workers. If they have had, they used condom during the intercourse. Only 12 percent of the respondents were found to be involved with commercial sex workers.

**Table-41:** Relationship between Age and Commercial sex workers

Age	Commercial		Total
	Yes	No	
10-15	3	1	4
15-20	3	17	20
20-25	9	30	39
25-30		21	21
30-35		15	15
35-40		28	28
40-45	3	6	6
45-50		6	9
above 50		8	8
Total	18	132	150

Source: Field Survey 2006

Table 41 shows that many people of age group 20-25 (i.e. 9 on 39) have had sex with commercial sex workers. This is a age group which is

mostly affected by HIV/AIDS. So they need counseling about it. We did not find any person of age group 25-30, 30-35, 35-40,40-45 and above 50 having sex with commercial sex workers.

### 5.13. Attitudes Towards Aids Victims

There could be a large number of people suffering from AIDS in our country and it is said many of them want to hide the facts as they are afraid of social status or hatred or fear of divorced. During the study, respondents were asked their attitude towards AIDS victims many respondents were found to be positive towards AIDS victims.

Table 42 Distributions of Respondents on Attitudes Towards AIDS Victims

	Frequency	Percent
Positive	119	79.3
Negative	19	12.7
No response	12	8.0
Total	150	100.00

Source: Field Survey 2006

The table 42 shows that 79.3 percent of the respondents are positive towards AIDS victims. And 12.7 percent of the respondents found to be negative towards AIDS victims. It could be because of their conservative culture. Only 8 percent of the respondents did not response about it.

**Table-43:** Relationship between Literacy and Attitudes

Literacy	Positive	Negative	No response	Total
Read-only	7			7
Read Write	70	12		82
Illiterate	42	7	12	61
Total	119	19	12	150

Source: Field Survey 2006

The table 43 shows that literate people are more positive towards AIDS victims than illiterate people. It is found 77 out of 89 literate people were positive towards AIDS victims. And 42 out of 61 illiterate people found to be positive towards AIDS victims.

## CHAPTER - VI

### SUMMARY AND CONCLUSION

#### 6.1. Summary

Using primary data collected in April 2006 has carried out the study on knowledge and awareness of HIV/AIDS among the Rickshaw Pullers of Butwal Municipality. The main objective of this study is to know the knowledge and misconception of HIV/AIDS prevailing among the targeted sample population. The Purposive sampling technique was used to select the study area and the sample size. Altogether 150 respondents' interview was taken during the study period.

Out of 150 Rickshaw pullers interview, about 39.33 percent of the respondents were young age group of 15-25. The 85.3 percent were married and 12.7 were unmarried.

About 22.6 percent were of Brahmin/Chhetri, 19.33 percent were Chaudhary, 14 percent B.K. 12 Percent Darjee, 4 percent Kumal, 8 Percent Lama 6 percent Muslim. Regarding the education, 54.66 percent of the respondents could read and write 40.66 percent illiterate and 4.66 percent could only read. About the level passed 42.4 percent of total 66 respondent (having passed some level) have passed primary level, 15.2 percent have passed class 5-8 and 42.4 percent have passed class 8-10.

Regarding the duration of work, 32 percent have worked above 5 years, followed by 32 percent only for less than six months; 16 percent have worked 6 months to one year, 14 percent 1 year and 6 percent three year to six years. About the daily earning, 38 percent respondents could earn Rs. 150 to 200 followed by 32 percent could earn Rs 100 to 150, 16 percent Rs 200 to 250 and remaining 14 percent above Rs 250.

Regarding the House and Land 123 has their own house and 127 do not have their house. Similarly 62.66 percent have their own land and 37.33 percent do not have their own land.

- 82 percent of the respondent has heard about HIV/AIDS and 18 percent have not heard about it. Many respondents who have not heard about AIDS are Chaudhary and of age group (35-40) 100 percent of respondent who have been working since 3 to 5 years have heard about AIDS. Similarly all the respondents earning Rs 150 to 200 have heard about AIDS.
- 43.9 percent of the total heard respondents were informed about AIDS by Radio. So radio is the main source of information. Similarly 31.7 percent had heard it from their friends. Only 11.7 percent of the respondents had heard it from the T.V.
- 80 Percent of the respondent was careful about it.
- Regarding the modes of transmission, no one could tell all 4 modes of transmission of them told by sexual intercourse only educated people could tell it is transmitted through infected blood and infected syringe. No one told it is transmitted through birth from infected mother. We found about 17 percent of the heard respondents did not know any modes of transmission.
- Regarding the misconception 51.33% of the respondents told AIDS is transmitted through mosquito bites only 12.66 percent of the percent of the respondents told it is not transmitted through mosquito bites. Many Chaudhary respondents told it is transmitted through mosquito bites.
- 22 percent of the respondents told AIDS is cured and 44 percent answered it is not cured. Brahmin/Chhetri has more knowledge and Chaudhary has less knowledge on the cure of HIV/AIDS.

- On the reply of question, 32 percent told to use condom during intercourse, 30 percent told not to have sex with many partners. 10 percent replied not to have sex at all in preventing AIDS transmission.
- While mentioning the name of contraceptives that can be used to prevent AIDS transmission 68 percent told condom and 30.66 percent did not know.
- Answering a question whether there is any medicine or not for the treatment of AIDS 28 percent of the respondents told there is medicine, 30.7 percent told there is no medicine and 41.3 percent did not know.
- Regarding the question what has to be done to be safe from AIDS 61.33 percent told avoid sex with many partners, 10.66 percent told use medicine and only 4.66 percent told to generate awareness.
- Regarding a question HIV/AIDS programme in level 63.33 percent of the respondent told there was no any such programme conducted in local level.
- 88 percent of the respondents were found not having sexual intercourse with commercial sex workers.
- 79.3 percent of the respondents were found quite positive towards AIDS victims.

## **6.2. Conclusion**

- Many economically productive and young people involved in pulling rickshaw.
- Married people have the majority in rickshaw pulling
- Even the literate people are found in this job.
- Daily earning of Rickshaw puller is very low.
- Tharu has the less knowledge about HIV/AIDS.

- Many young people have heard about HIV/AIDS.
- FM Radio is the most commonly cited source of knowledge.
- More than 2/3rd of the respondents know at least one mode of transmission.
- Among the different option, sexual intercourse was mostly reported.
- Literate respondents have more knowledge as compared to the illiterate.
- Majority (88%) of the respondents were found not having sexual intercourse with commercial sex workers.
- Misconception regarding the mode of transmission was high in both illiterate and literate respondents.
- Many respondents think the AIDS is curable and has medicine for it.

### **Recommendations**

FM Radio is the recommended media for educating people about HIV/AIDS since the Radio is found to be the major source of information for the most of the respondent. Different radio programme should be broadcasted and misconception must be addressed.

- Friends are found to be the second major source of information among the respondents. Face to face or interpersonal communication channels like peer education and group discussion seem to be another effective means of disseminating information.
- Although the respondents are aware on same HIV/AIDS related issue to some extent, they have certain misconception about the modes of transmission, preventive measures, availability of



medicine and cure of HIV/AIDS. Future programs are recommended to focus in eliminating such misconception.

### **Recommendation for Further Research**

This study has mainly focused on the knowledge and awareness of HIV/AIDS among the Rickshaw Pullers. It has mainly studied whether they have knowledge it or not, whether they know the modes of transmission, any misconception prevailing with them, name of contraceptive that can be used to avoid HIV/AIDS transmission and effective source of information but it has not studied sexual behavior of Rickshaw Pullers such as age at first sex, extra marital sexual behavior, number sexual partners, condom used, propose of condom used which can be examined by another study.

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## QUESTIONNAIRE

### Individual and Household Information

1. Name of the respondents .....

Caste ..... ethnicity .....

2. Do you have your own house?

a. Yes                      b. No

3. What type of house do you have?

a. Pakki    b. Kachchi    c. Others

4. What type of your family?

a. Nuclear                  b. Joint

5. What is your current age? (Completed)

.....

6. Can you read and write?

a. Read only

b. Read and write

c. Illiterate

7. Have you got any formal education?

a. yes                      b. No.

8. If yes, level passed

.....

9. Marital status

a. Married

b. Unmarried

c. Re-married

d. Divorced

10. What is the reason for marrying the next?

- a. Infertile
- b. Could not give birth to son
- c. Sick
- d. Unemployment
- e. Others

11. Do you have your own land?

- a. Yes
- b. NO

12. If yes how much?

.....

13. Working period as rickshaw pullers?

#### **Information on the Knowledge of Aids**

14. Have you heard about AIDS?

- a. Yes
- b. NO

15. From, which source, have you heard about AIDS for the first time?

- a. Radio
- b. T.V.
- c. Newspaper
- d. Friends
- e. Poster and Pamphlets
- f. Parents
- g. Health workers

16. Who is vulnerable for it?

- a. Male
- b. Female
- c. Both

17. Are you careful about it?

- a. Yes                      b. No

18. What are the modes of transmission?

- a. Sexual intercourse
- b. Infected syringe
- c. Infected blood
- d. Birth from infected mothers
- e. By insects
- f. Don't know

19. In your opinion whether mosquito transfers this disease or not.

- a. Yes                      b. No                      c. Don't know

20. In your opinion which of the following models is true in preventing AIDS transmission?

- a. Not to have sex at all.
- b. Use condom during intercourse
- c. Not to have sex with many partners
- d. By avoiding sharing bloods
- e. Use sterilized surgical instruments only
- f. Not sitting together with AIDS patients

21. What is the name of contraceptive that can be used to prevent AIDS transmission?

- a. Condoms
- b. Pills
- c. IUD
- d. Depo provera
- e. Others

22. Can AIDS be cured?

- a. Yes                      b. No                      c. Don't know

23. Have you attended any programmes?

- a. Yes
- b. No

24. If yes, name the programme organizer.

.....

25. What has to be done to be safe from AIDS?

- a. Use medicine
- b. Awareness
- c. Avoid sexual intercourse with many partners
- d. Don't know

26. Is there any medicine for AIDS?

- a. Yes
- b. No
- c. Don't know

27. If you know any of your friends suffering from AIDS, Do you help them?

- a. Yes
- b. No

28. Have you had sex with any commercial sex workers?

- a. Yes
- b. No