

**OUTREACH FOR HIV PREVENTION COUNSELING:
AN INTERVENTION TO REDUCE UNSAFE SEXUAL
BEHAVIORS AMONG TRANSPORT WORKERS IN
NEPAL**

Program

Health Systems Development

Thesis Advisor

Nantavarn Vichit-Vadakan, M.S., M.P.H., Dr.P.H.



Navin Kumar Pyakuryal

วิทยาลัยวิทยาศาสตร์สาธารณสุข

จุฬาลงกรณ์มหาวิทยาลัย

COLLEGE OF PUBLIC HEALTH SCIENCES

CHULALONGKORN UNIVERSITY

A Thesis Submitted in Partial Fulfillment of the Requirements
for the Degree of Master of Public Health
Health System Development Program
Chulalongkorn University, College of Public Health
Academic Year 1998

ISBN 974-639-654-4

© Chulalongkorn University, College of Public Health
Bangkok, Thailand

ABSTRACT

More than a hundred thousands long distance transport workers in Nepal are at high risk of HIV infection due to unsafe sex, which is caused by several social, psychological and accessibility factors. As the overall adult HIV prevalence rate has increased from 0.01 to 0.24 percent recently, a ten times higher rate of one to two percent has been assumed for the transport workers. As indicated by studies in Africa, Thailand and India, the transport workers in Nepal are potentially bridging the virus by sexual mixing between the core such as CSWs to non-core population such as rural women. Adoption of safer sex becomes difficult for them because of several emotive-cognitive and behavioral influences in all three stages of change: labeling, commitment and enactment. Earlier interventions related to accessibility of prevention services, counselling and AIDS education could not reach the transport workers and antibody testing is not available. Prevention counselling can be most effective to facilitate adoption of safer sex amongst them because of its potential to apply client specific cognitive and emotive support.

SCUS through a partner NGO, ICH will implement an HIV prevention counselling intervention for the transport workers in the Kailali district from April 1999. An implementation committee chaired by DACC and including DHO, DTA, ICH and SCUS will ensure successful implementation and sustainability. Study design includes three phases: formative research, outreach counselling service, and evaluation. Key informant interviews, rapid ethnographic observation of truck stops and focus group discussions will yield information to guide the development of other phases. ICH

will hire and train four indigenous counselors to provide counselling as an outreach service on the highway. The training will cover content related to behavioral theories and counselling techniques. The counselors will provide theory based counselling service following a standard protocol. In total 260 transport workers will receive a minimum of four sessions of the counselling in the one year period. The quality of counselling will be assessed and maintained through routine supervision, case discussions and observation by simulated clients. Effectiveness of the counselling in reducing unsafe behaviors will be measured through pre and post written tests. The test will include questions related to reduction in unsafe sex behaviors and changes in knowledge and attitude.

All the methodologies and instruments of the study are based on standard materials. A small data exercise using observation and FGD methods was carried out in Ayutthaya, Thailand. The aim was to gain some experience on the proposed methodology and to pre-test the instruments. They have been modified on the basis of lessons learned during that exercise. However, for cultural adaptation all the instruments will again be pre-tested in Nepal and modified accordingly.

วิทยาลัยพยาบาลสาธารณสุข
จุฬาลงกรณ์มหาวิทยาลัย
COLLEGE OF PUBLIC HEALTH SCIENCES
CHULALONGKORN UNIVERSITY

I also wish to express my special thanks to Ajarn Wachana Tangsomit for the help she provided in reviewing and advising in sampling techniques, instrument design and data exercise. Ajarn Ratanu Somroangthong provided me good insight into