

RAPID ASSESSMENT 2011 - 2012

Rapid Assessment Study

Of

Parishram Parimal Charitable Trust – NGO

Working for Targeted Intervention amongst Migrants

**Report of the Rapid Assessment Project submitted to
Ahmedabad Municipal Corporation AIDS Control Society
(AMCACS)**

By-

**Department of Community Medicine,
AMC MET Medical College, Maninagar, Ahmedabad**

Baseline needs assessment study

For

Parishram Parimal Public Charitable Trust

NGO working for Targeted Intervention

Amongst

SMMs(Single Male Migrants)

Report of the research project submitted to Ahmedabad

Municipal Corporation AIDS Control Society(AMCACS)

By:

Department of Community Medicine,

AMC MET Medical College Ahmedabad.

Sample size

Representative sample of 750 from Migrant-TI was drawn with adequate representative to the Single- Male – Migrants , Married Migrants , Female Migrants with High- risk behavior (HRBs) and like wise , based on the estimated targets and working areas of the concerned TIs .

Methodology

The data- collectors were trained by the investigators from the Dept of Community Medicine of AMC MET Medical College. Data-collectors were given the names of TI sites to be covered by them and the number of persons to be interviewed from that site. The information from the respondents was collected by personal interviews after obtaining written consent from the person. Roughly 75 persons were interviewed by the data collector Five percent sample was cross-checked by the investigators and feedback was given to the data collectors.

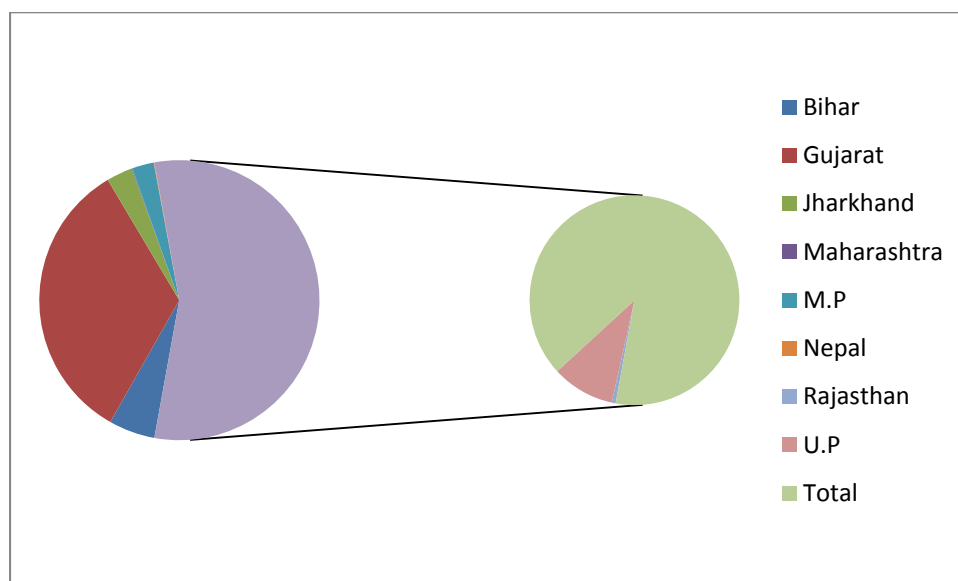
Study period

It was extending for a period of 30 days from the date of data collection.

Personal information of respondents

Original residence-wise break-up

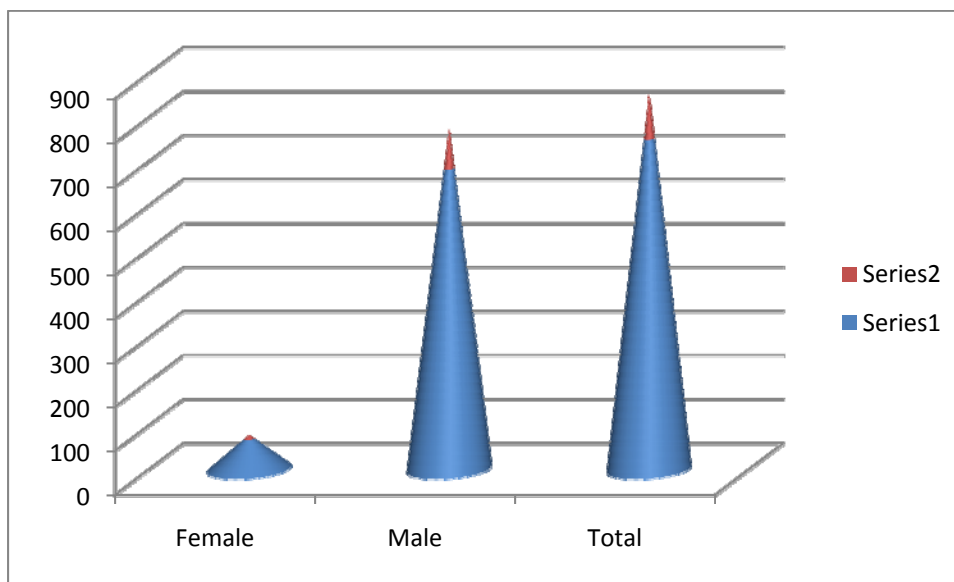
State	No.	Percentage(%)
Bihar	80	10.7
Gujarat	499	66.5
Jharkhand	45	6.0
Maharashtra	1	0.1
M.P	38	5.1
Nepal	1	0.1
Rajasthan	5	0.7
U.P	81	10.8
Total	750	100



It shows that two third (66.5%) of migrants were from Gujarat while least (0.1%) were from Maharashtra and Nepal.

Gender-wise distribution of respondents.

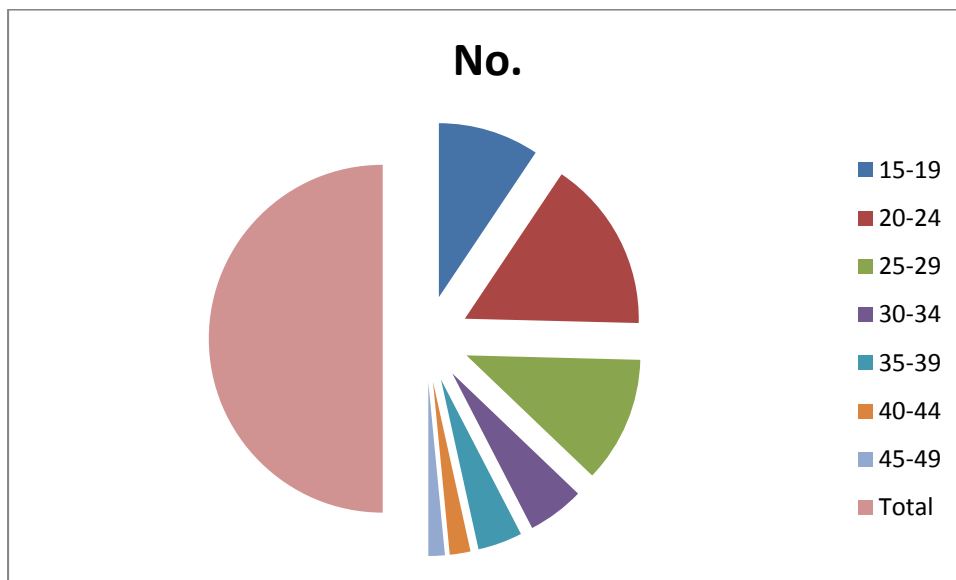
Gender	No.	Percentage(%)
Female	68	9.1
Male	682	90.9
Total	750	100



Gender-wise break-up suggested that majority of the participants (90.9%) were males.

Age –wise distribution of respondents

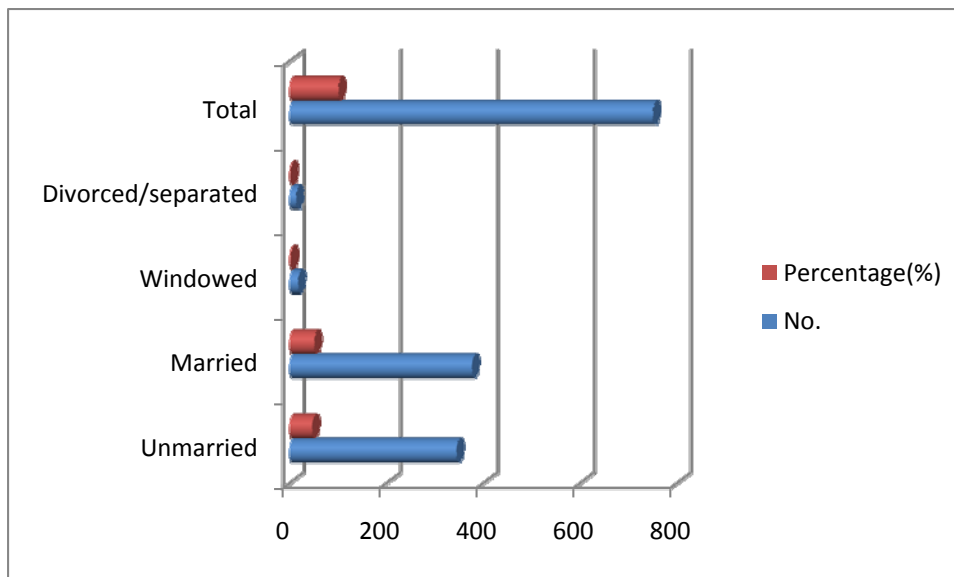
<i>Age Group</i>	<i>No.</i>	<i>Percentage(%)</i>
15-19	141	18.8
20-24	240	32
25-29	176	23.5
30-34	79	10.5
35-39	62	8.3
40-44	29	3.9
45-49	23	3.1
Total	750	100



Almost one third (32%) of the subjects belonged to the age group between 20 to 24 years of age while 23.5% of the subjects were of 25 to 29 years of age followed by the age bracket of 15 to 19 years(18.8%)

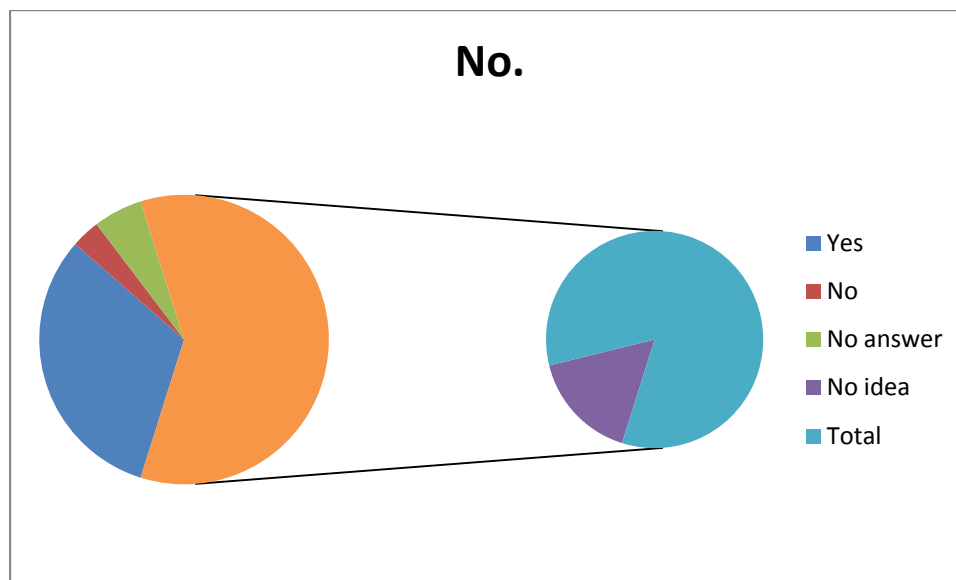
Marital status-wise distribution of respondents

Marital status	No.	Percentage(%)
Unmarried	344	45.9
Married	376	50.1
Windowed	17	2.3
Divorced/separated	13	1.7
Total	750	100



Knowledge regarding meaning of HIV positive status.

Knowledge	No.	Percentage(%)
Yes	474	63.2
No	48	6.4
No answer	82	10.9
No idea	146	19.5
Total	750	100

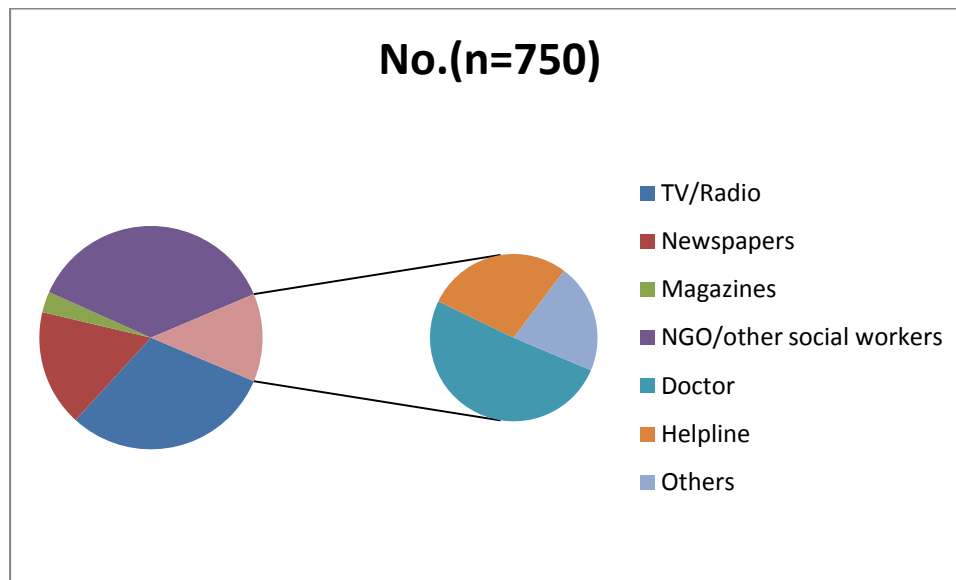


More than 60% of the subjects knew the meaning of being HIV positive while almost 1/4th of the study subjects did not have any idea about HIV status and 10.9% subjects refrained from answering.

Source of information for knowledge regarding HIV/AIDS

Source of information	No.(n=750)	Percentage(%)
TV/Radio	475	63.3
Newspapers	264	35.2
Magazines	47	6.3
NGO/other social workers	577	76.9
Doctor	101	13.5
Helpline	56	7.5
Others	42	5.6

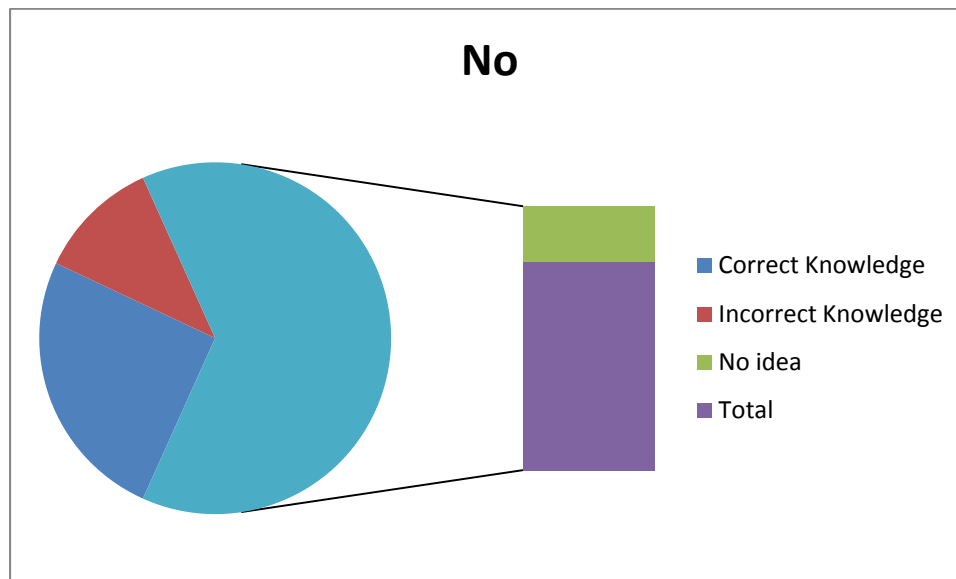
[Multiple responses allowed]



NGO and other social workers in the area were the main source of information for HIV/AIDS for more than $\frac{3}{4}$ more than $\frac{3}{4}$ th of the respondents (76.9%) followed by TV/Radio (63.3%) and newspapers (35.2%)

Knowledge regarding relationship between HIV and AIDS

Knowledge	No	Percentage(%)
Correct Knowledge	379	50.5
Incorrect Knowledge	169	22.5
No idea	202	26.9
Total	750	100

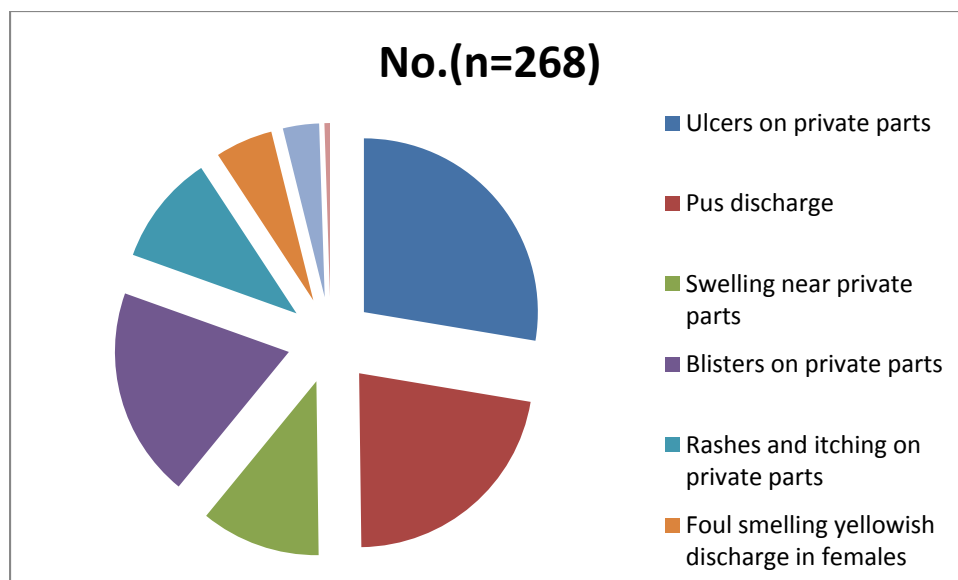


More than 50% of the respondents had correct knowledge of HIV being a virus and AIDS being the result of that virus.

Knowledge regarding symptoms of STI/RTI respondents

Symptoms of STI/RTI	No.(n=268)	Percentage(%)
Ulcers on private parts	263	98.1
Pus discharge	211	78.7
Swelling near private parts	106	39.6
Blisters on private parts	186	69.4
Rashes and itching on private parts	98	36.6
Foul smelling yellowish discharge in females	51	19.0
Pelvic pain	32	11.9
No idea	5	1.9

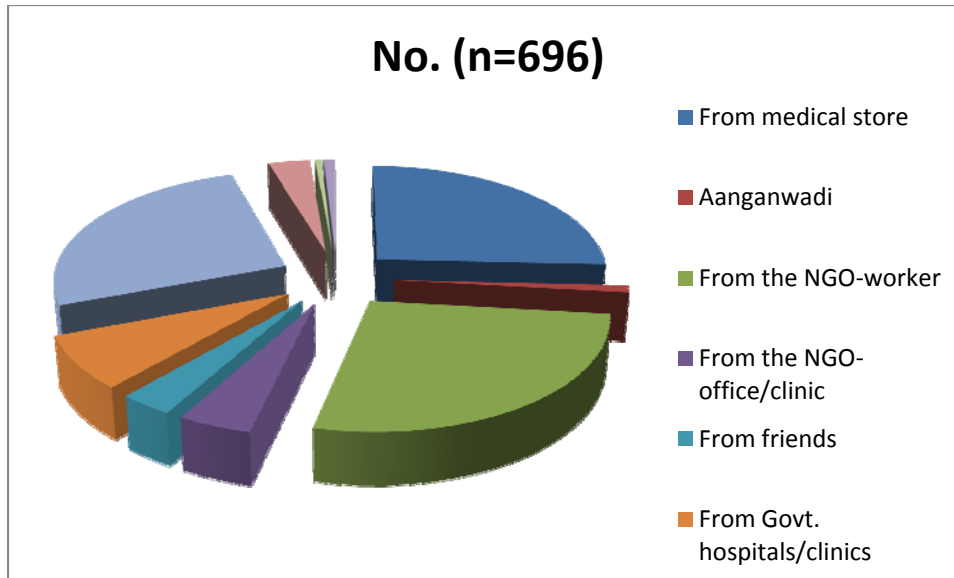
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Commonest symptoms of STI/RTI reported were ulcers on private parts (98.1%) followed by pus discharge (78.7%) and blisters on the private parts(69.4%) 1.9% of the respondents had no idea of symptoms of STI/RTI.

Break-up of source of condom..

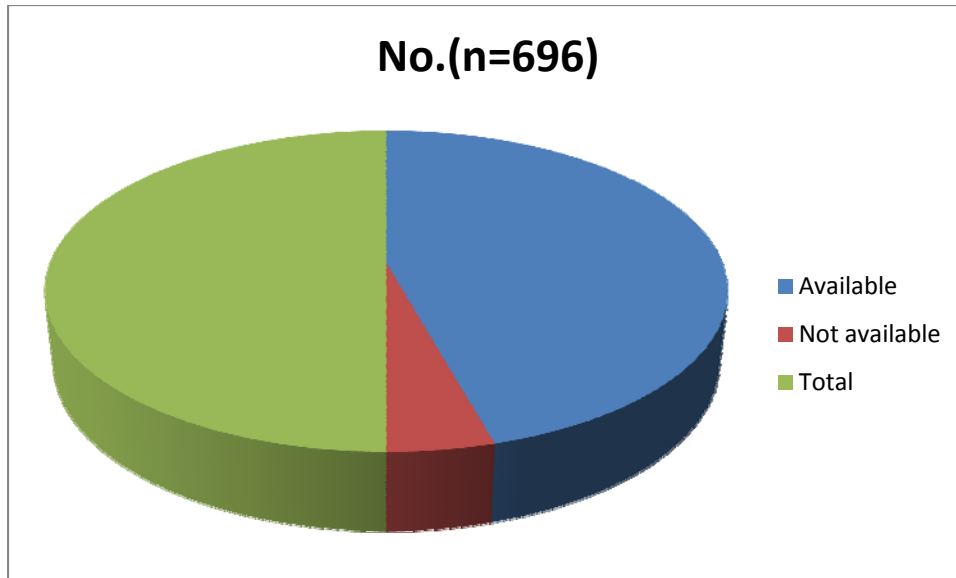
Sources of condom	No. (n=696)	Percentage(%)
From medical store	470	67.5
Aanganwadi	19	2.7
From the NGO-worker	491	70.5
From the NGO-office/clinic	82	11.8
From friends	60	8.6
From Govt. hospitals/clinics	142	20.4
Condom depots	477	68.5
Partner brings it	60	8.6
Not sure	9	1.3
Not applicable	16	2.3



Major source of procuring condoms were NGO workers (70.5%), Condom deports (68.5%) and from medical store(67.5%)

If the condoms are available whenever required of not

Availability of condoms when required	No.(n=696)	Percentage(%)
Available	636	91.4
Not available	60	8.6
Total	696	100



91.4% of the respondents said that condoms were available whenever they required them.

Summary

It shows that two third (66.5%) of migrants were from Gujarat least (0.1%) were from Maharastra and Nepal.

Gender-wise break-up suggested that majority of the participants (90.9%) were males.

Almost one third (32%) of the subjects belonged to the age group between 20-24 years of age while 23.5% of the subjects were of 25-29 years of age followed by the age bracket of 15-19 years (18.8%)

More than one third (42.5%) of the subjects were having primary education while 31.9% of the subjects had studied till secondary school.

13.9% of the subjects were completely illiterate while 0.4 % of the subjects could read but not write.

More than half of the study population was married (50.1%) while widowed ,divorced or separated subjects were not even more than 5% of total population studied.

In the case of married Migrants , almost 60% of the Migrants used to visit their wives in their natives twice a year while $1/4^{\text{th}}$ of the Migrants visited them thrice a year (25.5%) .

Almost 10% of migrants visited their wives every once a year.

More than 60% of the subjects knew the meaning of being HIV positive while almost $1/4^{\text{th}}$ of the study subjects did not have any idea about HIV status and 10.9% subjects refrained from answering.

Similar results were seen when they were asked about AIDS later on. More than 60% of them could exhibit correct knowledge about AIDS while almost 20% comprised the population that either did not answer or did not have any idea about AIDS.

However, almost $3/4^{\text{th}}$ of the population (72.9%) had the correct knowledge regarding the HIV/AIDS terms and their infective potential.

As many as 77.5% respondents knew about unsafe sex being one of the reasons for transmission of HIV/AIDS. Other major reasons were infected needle/ syringes (69.1%), followed by use of infected blood (56.7%) and vertical transmission from HIV positive mother to her child (22.5%).

Shaking hands with HIV positive person was one of the most known factors which was not responsible for transmission of the virus

according to the respondents (72.0%), followed by sharing of space or food (61.1%), sharing of clothes (53.3%) and daily casual contact with HIV positive person (45.3%). Other common toilets, sharing the same swimming pool, and mosquito bites.

Majority of the responses towards the most effective preventive steps for prevention of HIV were deferral from unprotected sex (68.8%), being faithful to one physical partner (56.9%), constant and proper use of condoms (49.9%).

As many as 79.6% of the respondents had incorrect knowledge regarding curative part (possibility) of HIV/AIDS.

71.2% of the respondents showed incorrect knowledge towards existence of any vaccine for HIV/AIDS in the market. Almost 1/4th of the respondents did not have any idea at all about the issue.

NGO and other social workers in the area were the main source of information for HIV/AIDS for more than 3/4th of the respondents (76.9%) followed by TV/Radio (63.3%) and newspapers(35.2%).

More than 50% of the respondents had correct knowledge of HIV being a virus and AIDS being the result of that virus.

More than one fourth of the respondents (32.8%) of the respondents were ever-tested for HIV. Almost 67.2% of the respondents did not respond in favour of such history .

As many as 3/4th of the total respondents (73.1%) were knowing their zero-negative status of HIV while none of the respondents was known HIV positive. For almost 14.1% the respondents, the status was still unknown and 12.8% did not want to answer the same.

35.7% of the respondents were aware about sexually transmitted or reproductive tract infection while 41.7% of the respondents were not aware regarding STIs/RTIs.

Commonest symptoms of STI/RTI reported were ulcers on private parts (98.1%) followed by pus discharge (78.7%) and blisters on the private parts (69.4%). 1.9% of the respondents had no idea of symptoms of STI/RTI.

Only 7.7% of the respondents gave positive history regarding having symptoms of STI/RTI.

As many as 65.7% of the respondents believed that the partner of the sufferer of STI/RTI should undergo complete treatment for STI/RTI. This shows very good awareness levels amongst the key population regarding the core area.

Almost 80% of the respondents stated that they used condoms during sexual intercourse with a person suffering from STI/RTI to prevent the transmission of the same.

12.1% of the respondents had never-visited STI clinic.

More than 90% of the respondents knew about condoms.

Condom was available with 29.6% of the respondents at the time of project.

More than half of the respondents (50.9%) used condoms only with commercial sex workers. While 24.3% were using condoms during every sexual act regardless of the partner.

Major sources of procuring condoms were NGO workers (70.5%) condoms depots (68.5%) and from medical store (67.5%).

91.4% of the respondents said that the condoms were available whenever they required them.

Perceptions of the respondents for non-usage of condoms during physical acts were varied. More than one third of them stated self unwillingness to be the reason for the same (39.8%) while time constraints was another such reason(32.6%).

Quality of condom mattered to majority of the respondents (64.4%). 32.2% of the respondents preferred flavored condoms while 31.3% preferred plain condoms. Only 11.6% stated that quality of gel was a preference.

Types of physical acts with females when condoms were not used were mainly during masturbation (63.1%) followed by breast sex (52.3%) and oral sex (42.1%).

Almost $2/3^{\text{rd}}$ of the total respondents had the tobacco chewing habit while $1/3^{\text{rd}}$ of the respondents smoked tobacco. Only 6.7% of the total subjects did not report to have any kind of addiction.

In case of married migrant respondents, none of the family member was staying with the male member in 84.3% of the subjects. 6.4% of the respondents were staying with the wives.

Sexual encounters usually took place in the adjacent areas where the migrant stayed (73.2%).The preferred choices then were the same areas (44.7%).

Respondents preferred visiting private practitioners (59.3%) over govt. doctors (53.5%). 55.7% of the respondents sought services of the doctors provided by the NGO.

More than 70% of the respondents were sometimes engaged in open talks about sexual infections with their sexual partners while 22% of the respondents never discussed these issues.

Respondents regarding perceptions towards the closed ones availing treatment for STI/RTI varied. Commonest perception was the feeling of helping such person out properly (25.1%) which is a welcome sign. It was followed by other perception like get curious in 21.5% while 29.2% of respondents didn't replied.

83.5% of the respondents knew about the agency of NGO that was working in their area for HIV/AIDS.

Almost half of the respondents stated that agency-workers visited their area more than twice a month.

The appointed person by the NGO who was visiting the area was from the same area as stated by 89.8% of the respondents. Such person was from the migrants in 31.8% responses.

The IEC material which was distributed was in the Hindi language as stated by majority of the respondents (93.8%). Which more than 40% of the subjects stated that the IEC material they got was in local language of the area.

