# Migration and HIV related Risk and Vulnerability among Migrants from NEPAL 2011



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## Migration and HIV related Risk and Vulnerability among Migrants from NEPAL





### FOREWORD

The limited economic opportunities in Nepal, like in other countries in the region, continue to drive its citizens for better prospect outside the country. In 2011, the National Center for AIDS and STD Control (NCASC) estimated that around 1.3 million Nepalis had migrated out of the country. Although migration per se is not a risk factor for HIV infection but because they are in a vulnerable situation some of them would likely go into high-risk practices for HIV infection. The 2011 National Estimate of HIV infections in Nepal revealed that about 28% HIV infection was coming from the migrant population. Unfortunately, amidst the dollar remittances they sent back home, making the Nepal economy to a certain extent, strong, HIV and AIDS services for migrant workers have not been universal. Strategic information to assist the government in prioritizing services for migrant workers remains to be limited.

To help build up local evidences on HIV and migration, a systematic desk assessment of Nepali migrants to India and their risk and vulnerability to HIV/AIDS has been conducted. This assessment report has catalogued all districts with a risk index according to their risk and vulnerability to HIV. Additionally, it also reviews and consolidates the estimated size of Nepali migrants to India which is found in several, different documents. It is envisaged that this review report will add to the existing body of knowledge and evidences on the risks and vulnerabilities of migrants from Nepal for better programming, prioritization, advocacy and policy formulation.

Towards the end, let me thank all the organizations for their valuable contribution in this report, and likewise to Mr. Sharkar Talwar, the consultant, and Mr. Alankar Malviya, UNAIDS M & E advisor.

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### PREFACE

Nepal, traditionally being a major source of workforce in the South Asia region, depends upon remittances and a variety of push and pull factors provide a conducive environment for large-scale migration.

Externally originating infections are major contributors to the overall HIV situation in Nepal. These can be further classified into those which are brought by migrant workers and those brought by returnee sex workers of Nepali origin. The risk of acquiring HIV is dependent upon multiple factors, like availability and affordability of buying sex while abroad, prevalence of HIV among FSW at various destinations, behavioural parameters like condom use, etc. A little over one-fourth of the estimated infections are attributed to the migrant population, which in turn enhances the vulnerability of their spouses/partners. These women, vulnerable to this risk and thus infected, account for another one-fourth of total estimated infections.

There was a long felt need to put together numerous studies on the subject of the risk of acquiring HIV from external sources, in one comprehensive document that will allow policy makers and programme managers to get all the information in one pack. This was also needed for ensuring that district level implementation of programmes is done on the basis of an evidence informed scheme of geographic prioritization. In a fast shrinking resource scenario, better targeting of available resources is critical for the success of programmes.

The present document aims to put together all relevant researches, studies, and publications, along with their strengths and weaknesses and thus allow the readers to make their own judgment. A risk index for districts, based on migration patterns has also been conceptualized. The paper uses simple language to understand the logic used to calculate risk for a district because of migration. This document also provides a simple excel tool, which can be updated regularly as more data becomes available, and will allow programme managers to update/revise the list of high-risk index districts regularly.

It should be noted that the publication is based on a review of secondary datasets, and therefore carries effects of all limitations and assumptions made in the studies in which these results/ conclusions were derived.

We hope that this will be a first step towards de-mystifying the HIV aspect of migration and will offer programme managers a framework to plan and implement programmes in districts, based on prioritized geographies and efficiently allocated resources.

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## TABLE OF CONTENTS

Chapter 1. Background	1
Chapter 2. Methodology adopted	3
Chapter 3. Nepal – Land and People	5
Chapter 4. Migration from Nepal	7
4.1 Destination countries	8
4.2 Who is migrating to which country?	10
4.3 Nepali migration to India	13
4.4 From which region Nepalese migrate to India?	14
4.5 Where are they heading to in India?	15
Chapter 5. HIV risk and vulnerability	19
5.1 Sexual risk behavior among Nepali migrants	19
5.2 HIV prevalence among Nepali migrants	21
Chapter 6. Assessment of migration related HIV risk and vulnerability	23
6.1 Size estimation of migrants from Nepal	23
6.2 High risk sexual behavior	25
6.3 HIV prevalence	25
6.4 Vulnerable migrant population	26
6.5 Risk and vulnerability among women from Nepal	30
Chapter 7. HIV/AIDS programs among migrants from Nepali	31
7.1 Programs among migrants in Nepal	31
7.2 Cross-border interventions	31
Chapter 8. Implications for HIV intervention among migrants in Nepal	35
List of Table and Figures	
Table 1: Regional distribution of population in Nepal (Percent)	7
Table 2: Proportion of migrants in source and destination places	14
Figure 1: HIV prevalence among migrants from Nepal	21
Table 3: Estimated out-migration from Nepal	24
Table 4: Nepali migrants reporting sex with sex workers in India	25
Table 5: HIV prevalence among Nepali migrants	26
Table 6: Regional estimates of absentee to India, Census 2001	27
Table 7: Estimated vulnerable migrants with 25% reporting risk behavior	27
Table 8: HIV vulnerability risk index of districts in Nepal	28
Table 9: Source – destination estimates of migrants (from Nepal to India)	30

## BACKGROUND

A large proportion of estimated HIV infections in Nepal are attributed to migrants, although some recent studies have pointed out two-way flow of the virus through networks in the border districts. In 2009, National Centre for AIDS&STD Control (NCASC) estimated the adult (15-49 years) HIV prevalence of 0.39% in Nepal, amounting to a total of 63,528 people living with HIV (3,544 children 0-14 years, and 59,984 adults 15 years and above). Migrants accounted for 29.4% of all the adult HIV infections in Nepal. While migration in itself is not a risk factor, a study by New Era has revealed that 11% and 23% of the migrants in the Western and Mid-Far Western districts, respectively, had visited sex workers in India and Nepal (New Era, 2008).<sup>1</sup> Similarly, a study in *Sainik* Basti in Nepal, a traditional out-migration area, found high incidence of HIV among wives of migrants left behind.

Inspite of a strong evidence of HIV vulnerability, there have been no focused studies to estimate the size of migrant population. In 2001, the Nepal Population Census and Community Level Research carried out by CARE/FHI found that 27.5% of adult male in the Far-Western hill districts were absent for at least six months, and about 10% of adult men (out of total) were in India for at least six months. There are some studies where researchers tried to estimate the size of migration. However, these estimates vary greatly across studies. The problem of size estimation among migrants gets complicated due to the open border between India and Nepal. While some studies used Census data of Nepal (Government source), other estimates were based on

<sup>&</sup>lt;sup>1</sup> New Era, (2008), Integrated Biological and Behavioral Surveillance Survey among male labor migrants in 11 districts in Western and Mid to Far-Western regions of Nepal - Round II. Kathmandu, Nepal.

independent research. These independent studies were conducted either at source places to know how many were away from home at the time of study or at destination places (such as Mumbai, Delhi) to assess migration from Nepal.

It was felt that there was a strong need to review all the existing literature to know size of migrants from Nepal (to India) and their risk and vulnerability to HIV. Thus, the objective of this assessment was to generate evidence on HIV risks and vulnerabilities of migrants from Nepal to inform program planning under the NSP 2011-16.

The research is expected to feed into the following:

- The standard operating procedures for Targeted Interventions for migrants
- The upcoming joint UN proposal on migration in Nepal
- To inform NSP with evidence related to programming aimed at migrants.

## METHODOLOGY OF ASSESSMENT

A ssessment of migration and HIV related risk and vulnerability among migrants from Nepal was carried out by reviewing literature and analyzing Census data on migration. All the available literature on migration from Nepal was reviewed. While some of these studies were articles in peer reviewed journals, others were reports of organizations and articles in the newspapers. Review of literature was predominantly carried out using Google search and PubMed online review using search words – Migration from Nepal, HIV prevalence among Nepali migrants, Sexual behavior among Nepali migrants. Although more than 80 publications were initially identified through online search, about 60 relevant articles/reports were reviewed in detail. All the studies or reports reviewed have been listed in the current report.

Broadly data on migration from Nepal emerged from either Census reports or foreign exchange remittance studies. In order to get a regional perspective on out-migration from Nepal, district-wise Census data on absentee population in 2001 was obtained from the Census authorities in Nepal and analyzed.

## NEPAL – LAND AND PEOPLE

Nepal is a landlocked country with two neighbors, India and China. It is divided into three ecological zones - the Mountains, Hills, and Terai, and five development regions – East, Central, Western, Mid-Western, and Far-Western. Although Mountains cover 35.2% of the country's total area, it houses fewer than 7.8% of its population. On the other hand, the Hills (41.7% of total area) harbor 45.5% of the population while the Terai is the most populated, accommodating 46.7% of the population in just 23.1% of the area. Terai has the highest population growth rate and population density. Landholdings are particularly small in the Far and Mid-West and Central and Western Hills. Terai has 20 administrative districts. About 10 million people (43% of Nepal's population) live in the 39 Hill districts. The Mountains comprised of 16 districts, lining the border with Tibet.

Due to the ever increasing population, the average size of land holdings has reduced in recent years and unemployment has become a problem in Nepal, increasing from 42% in 2004 to 46% in 2008. The incidence of poverty was especially high in the Mid-West and Far-West but was less in the Central and Eastern Terai. According to the Census of Nepal, 2001, it's population was 23,151,423. The currently estimated population of Nepal is over 28 million, with a growth rate of 2.21% per year (WFP, 2010).<sup>2</sup>

<sup>&</sup>lt;sup>2</sup> World Food Program, (2010), The Food Security Atlas of Nepal. Food Security Monitoring Task Force, National Planning Commission, Government of Nepal.

## MIGRATION FROM NEPAL

Census of Nepal has revealed consecutive increase in the overall outmigration from the country from 402,977 in 1981 to 658,337 in 1991 and 762,181 in 2001. A large proportion of them (nearly 9 out of 11) went to India (89.2) (Bhattarai, 2007)<sup>3</sup>. Migration has been so common, that even during the main harvest season, 44% of the households across Nepal had one or more family members absent pursuing distant labor opportunities (WFP, 2008)<sup>4</sup>. Almost all the migrants abroad were men between the age of 15 and 44 years. The proportion of female migrants abroad was reported to be marginal (CBS, 2004).<sup>5</sup> Increased out-migration of Nepalese from both mountain and hill regions of the country was evident from the following Census data of Nepal (Table 1).

	Development Region	Census						
		1952/54	1961	1971	1981			
	Mountain region	-	-	9.9	8.7			
	Hill region	64.8	63.6	52.5	47.7			

35.2

100

#### TABLE 1 Regional distribution of population in Nepal

Source: Kanaskar, 2003

Terai region

Nepal (Overall)

36.4

100

37.6

100

43.6

100

**1991** 7.8 45.5

46.7

100

<sup>&</sup>lt;sup>3</sup> Bhattarai, R., (2007), Open borders, closed citizenships: Nepali labor migrants in Delhi <u>In</u> International migration, multi-local livelihoods and human security: Perspectives from Europe, Asia and Africa

<sup>&</sup>lt;sup>4</sup> World Food Program, (2008), Passage to India - Migration as a Coping Strategy in Times of Crisis in Nepal.

<sup>&</sup>lt;sup>5</sup> CBS, (2004): National living standard survey 2003/04, Central bureau of statistic, Kathmandu, Nepal

#### 4.1 Destination countries

#### **Migration beyond India**

8

Although India remained the most preferred destination, the proportion of migrants from Nepal to India has declined from 89.21% in 1991 to 77.28% in 2001. This indicates the increasing trend of out-migration of Nepalese beyond India into other countries. The second largest destination of the Nepalese emigrants was Saudi Arabia, which accounted for 8.85% of the total emigrants followed by Qatar and United Arab Emirates (UAE). The total number of Nepalese migrating to Gulf countries including other countries like Kuwait, UAE and Bahrain accounted for 16% of the total. Hong Kong was the fourth largest destination of the Nepalese emigrants followed by Japan, Korea and China and the Nepalese emigrants to these East Asian countries together accounted for 2.83% of the total emigrants. Malaysia represented the sixth largest destination of migrants from Nepal and the UK was the fifth largest destination (Kansakar, 2003).<sup>6</sup>

### Gap between Government and other estimations

Kollmair and others (2006) pointed out a glaring gap between the official and other estimations of Nepali migration. The most widely cited data on international migration in Nepal originated from the national census in 2001, where 762,181 persons were registered as being abroad. Estimates of figures on migration suggested that the real numbers were several times higher than that shown by official statistics. Seddon et al., (2001)<sup>7</sup> estimated approximately 1.3 million migrants from Nepal to be working in India. Nepalese immigrant associations in India estimated the number of Nepalese as being almost 3 million (Thieme, 2006).<sup>8</sup>

Comparing the government sources and other estimations, the number of migrants from Nepal was estimated to be about 2-5 times higher than the government statistics. Kollmair and others (2006) argument has been presented here. For migrants to Gulf States, official sources such as the national census indicate 110,000 migrants in 2001, while the Ministry of Labor and Transport registered slightly less than 104,000 migrants. Graner and Gurung (2003),9 however, suggested that 200,000 to 400,000 migrants were working in the Gulf countries. Considering the estimations for India and the Gulf countries, the percentage of overall migrants from Nepal would be between 6.5 % and 14.7 %, rather than the 3.3% recorded officially (Kollmair, et. al., 2006).<sup>10</sup>

### Nepal Living Standards Survey – More accurate estimates

Lokshin and others (2007) pointed out that the Nepal Living Standards Survey (NLSS) was the first and only data source to provide statistically accurate estimates of levels of and trends in international work-related migration from Nepal and on the amount of money sent home as remittances.<sup>11</sup> The sampling was a nationally representative with a random cross-section sample of 4,008 households from six explicit strata of the country, and a

<sup>&</sup>lt;sup>6</sup> Kansakar, V. S., (2003), International migration and citizenship in Nepal. <u>In</u> Population Monograph of Nepal, 2003, 1:85-119.

<sup>&</sup>lt;sup>7</sup> Seddon, D., Adhikari, J. and Gurung, G., (2002), Foreign Labor migration and the remittance economy of Nepal, Critical Asian Studies, 34 (1): 19–40.

Thieme, S., 2006, Social Networks and Migration: Far West Nepalese Migrants in Delhi. Culture, Society, Environment, 7, LIT Publishing House, Münster.

Graner, E. and G. Gurung, (2003), Arab Ko Lahure: Looking at Nepali labor migrants to Arabian countries, Contributions to Nepalese Studies, 30: 295-325.

Kollmair, M., Manandhar, S., Subedi, B. and Thieme, S., (2006), New figures for old stories: Migration and remittances in Nepal. Migration Letters, 3(2): 151 – 160.

<sup>&</sup>lt;sup>1</sup> Lokshin, M., Bontch-Osmolovski, Ml. and Glinskaya, E., (2003), Work related migration and poverty reduction in Nepal. World Bank Policy Research Working Paper 4231, May 2007.

panel sample of 1,232 households drawn from those households interviewed in the first round of the survey. However, the report did not provide data on migration as it was focused on remittances.

### Comparison of national statistical data and case studies

The 2001 census of Nepal indicated that 3.3 % or 762,181 persons were living outside Nepal. The more recent NLSS did not directly indicate a specific number or percentage of people absent abroad, but stated that 24.4% of all households (approximately 1,120,846) received remittances from abroad. Considering an average household size of 5.27 (NLSS, 2003/2004) and presuming that only one person per household was absent, Kollmair, et. al., (2006) estimated 4.63% of all inhabitants of Nepal absent in 2003.

Kollmair and others' (2006) calculations were based on nine case studies conducted under the NCCR North-South program supplemented by other local level case studies. These case studies showed the average percentage of absent persons was 4.8% at the village level, totaling to 1,154,576 persons on the national scale. Considering the share of migrants in different regions based on census data, the authors expect nearly 900,000 persons in India, 170,000 in the Gulf countries and 40,000 in Western countries (Europe, US, Japan, Australia).

#### Other destination countries

Most of the remittance studies that provided data on migration exclude India due to undocumented nature of migration from Nepal to India. Thus, if India was taken out of the picture, Gulf countries became the prime destination of Nepalese migrant workers, as indicated by Gartula (2009). According to DLEP, Malaysia (36%) remained to be the largest recipient as per the country-wise calculation till 2008, is followed by Qatar (29%), Saudi Arabia (19%), and United Arab Emirates (12%). As mentioned above, European and American countries are still out of access for the Nepalese migrant workers. Clearly, it should be noted that the data are entirely work-related migration, and did not include students, refugees, permanent emigrants, and the expatriates (Gartula, 2009).<sup>12</sup>

#### Migration to Malaysia too on decline

The trend of migration to Malaysia reduced since 2005/06 while it increased with Gulf countries. This was due to the relatively lower wages in Malaysia as compared to the Gulf countries. Newspaper survey by Gartula (2009) during June-July 2008 showed that the demand from Malaysia seemed to be only for working class laborers with the name "Production Workers" or "Production Operators" while in the Gulf countries the demand was more open. Furthermore, the demand for skilled and semi-skilled laborers, like masons, mechanics, salesmen/girls, security guards, and engineers from the Gulf States increased (Gartula, 2009).

#### Considerable disparity in estimations

There is considerable disparity in the estimate of the level of labor migration from Nepal, as pointed out by Gurung (2009). <sup>13</sup> According to the Economic Survey of the fiscal year 2004-05 published by the Ministry of Finance, the total number of people receiving institutional permission for foreign employment reached 536,500 in the first eight months of FY 2004-05. This number excluded migrant workers to

<sup>&</sup>lt;sup>12</sup> Gartula, H., (2009), International migration and local development in Nepal. Contributions to Nepalese Studies (Report)

<sup>&</sup>lt;sup>13</sup> Gurung, B., (2009), Migration and Remittance: Country Paper - Nepal 2008. FK World Blog at http://www.fk-world.com/en/ Blog/My-Blog/?userld=2828&entryld=19982

India because the Nepalese did not need official permission to work in India. The survey also stated that Malaysia was the major destination for foreign employment with 195,359 migrant workers, followed by Qatar (129,325) and Saudi Arabia (126,280). According to NIDS there were around 700,000 Nepalese working in foreign countries (excluding India) in 2003. Considering that there were about 1.5 million Nepali migrant workers in India, there were about 2.2 million Nepalese working in foreign countries in 2003 alone. Adding the workers who went abroad informally, Gurung (2009) argued that number would be even higher.

### 4.2. Who is migrating to which country?

As migration occurs between two spatial areas, the question of 'where do people migrate' is implicit to the question of choice of migration. Some migrate within the country, some to India, and some to other countries. Thus, the question, 'who choose where to migrate' is pertinent but less discussed in the literature. Choice of destination depends on linkages between the origin and destination. Migration systems theory stresses the linkages between countries, such as, security alliances, colonial ties, and flows of goods, services, information, and ideas. The linkages may be based on historical as well as cultural affinity. These linkages help to establish social networks and these networks are the basis for people to decide on where to migrate (Gurung, 2008).<sup>14</sup>

### *Resources and networks play important role in migration*

Migrant networks are interpersonal ties that connect migrants, former migrants, and non-migrants in origin and destination through ties of kinship, friendship, and shared community origin (Massey et al., 1993).<sup>15</sup> Social networks represent insurance for the prospective migrants by providing knowledge and awareness at the origin and by minimizing the costs and risks at the destination. When there are fellow villagers, relatives, or friends who have previously migrated to a destination, a network within destination is established. Predecessors help by passing information about the place, picking newcomers up from the airport/ bus stand, providing temporary house, helping them to find jobs and other local resources. In this way, a migration pattern is shaped for a given origin and destination. These networks are affected and formed by historical, social and cultural ties between origin and destination (Gurung, 2008).

#### Nepali migration - Some stereotypes

According to official statistics, about 6% of the population over the age of 15 is absent from Nepal. Migration to neighboring India has a long history. Migration to the Gulf and some Asian countries, Europe, or the USA only commenced about fifteen years ago. The choice of destination and the level of benefits and risks associated with migration vary significantly, and are dependent on economic and social resources and the status of potential migrants and their families. At the risk of over-generalizing, it can be stated that more-educated and more-skilled people with financial resources and access to information are more likely to

<sup>&</sup>lt;sup>14</sup> Gurung, Y. B., (2008), Migration from rural Nepal – A social exclusion framework. December 2008, Central Department of Population Studies, Thribhuvan University, Kathmandu, Nepal

<sup>&</sup>lt;sup>5</sup> Massey, D. S., J. Arango, G. H., Kouaouci, A., Pellegrino, A and Taylor, J. E., (1993), Theories of International Migration: A Review and Appraisal. Population and Development Review, 19(3): 431-466.

obtain well-paid jobs in the Gulf and Tiger States, as well as in Europe and the United States, although some of them also take risks, including the risk of illegal actions. In contrast, it is the poor, illiterate, and mostly unskilled people who have very little choice and therefore migrate to India. Sociocultural similarities and an open border have encouraged migration between the two countries for generations. Thieme (2007) lamented that Nepalese migrants in India were often not able to lift themselves out of poverty.<sup>16</sup>

Family Planning Association of Nepal (2002) estimated that about 800,000 people go to India as seasonal laborers and about 350,000 seasonal laborers migrate within the country in search of wage labor (Bal Kumar, 2003).<sup>17</sup>

#### Poor and rural Nepali men go to India

For the poor and food insecure, India is the most popular destination. The chances of migrating to India increase if the head of the household is illiterate and the household is predominantly dependent on agricultural wage employment and has smaller land holdings. India has plenty of work opportunities for unskilled labor, and is the cheapest destination. The migrants' main destinations in India include Delhi, Mumbai, Gujarat, Uttaranchal, Uttar Pradesh, Bihar and Kolkata (WFP, 2010).

#### Far Western men migrate to India

Migration of young males to India, especially those from the Far-Western

regions of Nepal has rapidly increased in recent years due to increased political instability for several years and lack of economic opportunities. Indeed, IBBS results have demonstrated that 59.7% and 67.8% of the males below the age of 20 from the Western and Mid-Far Western regions respectively, migrate to urban areas of Nepal, India, the Middle East and South-East Asia (New ERA, 2008). Migration to India is especially common, underscored by the easy open-border access. Work related migration is the highest in the Western, Mid Western and Far Western Hills. The Eastern Hills have the lowest proportion of migrants. Migrants are more likely to come from Terai and Hills as compared to the Mountains (WFP, 2010).

#### Educated and urban Nepali men go to Malaysia and Middle East

Although India remains the main destination, Nepalese have been migrating to other countries as well. Migration to Gulf and Tiger States, USA or Europe commenced only about 15 years ago. Most of the people from Nepal who have enough resource and are literate and skilled, migrate to the countries in Europe, America and Far East Asia. Others who are relatively less skilled and do not have enough resources migrate to south East Asian countries, mainly to Malaysia, and the Middle East. However, this phenomenon is still limited to the cities and towns and among population groups who have knowledge, are somewhat educated and have good access to information. But the first choice for a large proportion of illiterate or less educated, unskilled and marginal population of rural Nepal, which comprises of almost 80% of the whole population of Nepal, still migrates to India, its bigger and more developed neighbor (Bhattarai, 2007).

<sup>&</sup>lt;sup>16</sup> Thieme, (2007), Social networks and migration: Far West Nepalese labour migrants in Delhi. 2nd edition [2006], NCCR North-South Dialogue, 15. Bern, Switzerland: NCCR North-South.

<sup>&</sup>lt;sup>17</sup> Bal Kumar, K. C., (2003), Migration, poverty and development in Nepal. In - Economic and Social Commission for Asia and the Pacific. Ad hoc Expert Group Meeting on Migration and Development, 27-29 August 2003, Bangkok

#### Nepali sex workers in India

Earlier studies have indicated that between 5,000 and 7,000 girls from Nepal were 'trafficked' (transported for commercial gain) every year to India (Poudel and Carryer, 2000).<sup>18</sup> Further it was reported that about 100,000 to 200,000 Nepalese girls worked in Indian brothels. Some of these girls returned to Nepal when found to be infected with HIV (Seddon, 1998), especially if they were no longer able to support themselves through commercial sex work (Furber, et. al., 2002).<sup>19</sup>

Based on a study conducted in India, it was deducted that while Mumbai emerged as the leading destination for Nepalese women, Pune received the second largest number out of the 7,000 plus Nepalese girls/ women trafficked to the country every year. Such phenomenon seemed to have been confirmed by Tejaswi Sevekari of Saheli, the NGO that works in Budhwar Peth red light area for the betterment of sex workers. According to Sevekari, about 25% of the sex workers in Budhwar Peth were of Nepalese origin (Mehta, 2007).<sup>20</sup> According to another author, 12,000 girls under the age of 18 years are trafficked to India and abroad every year. About 200,000 Nepalese women and girls are said to be working in Indian brothels (Bal Kumar, 2003).

The greatest concentration of Nepalese sex workers was found in Mumbai where their estimated numbers ranged between 40,000–45,000 (Seddon, 1998) and 60,000 (Dahlburg, 1994).<sup>21</sup> The HIV prevalence amongst sex workers in Mumbai was among the highest in India for a long period. However, HIV prevalence among Mumbai sex workers has reduced significantly in the recent years. Latest sentinel surveillance survey conducted by ANCO indicted an overall HIV prevalence of 16% among sex workers. Large number of Nepali sex workers has also been reported to operate in other Indian cities (Seddon, 1998).<sup>22</sup>

In a random sample of 450 sex workers in 1992 in Calcutta, 15% were found to be from Nepal (Chakraborty et al., 1994).<sup>23</sup> There was evidence of Nepalese sex workers in Thailand, Philippines and Hong Kong, although their numbers were much smaller. Many Nepalese women were coerced into commercial sex work in India and there was evidence of 'organized crime' (Seddon, 1998). However, some women 'chose' to work in the Indian sex trade 'voluntarily', although out of economic necessity. Amongst the 300 sex workers surveyed in Kathmandu, nine had worked in India but only four of them said that they had been coerced into sex work. Similarly, of the 410 sex workers interviewed in Terai locations, only 21 out of 70 who had worked in India said they had been coerced. However, these figures may be subject to bias. Sex workers who have returned to Nepal from India but continue to undertake sex work may differ from those who remain in India or resettle in their own communities (Furber, et al., 2002).

<sup>&</sup>lt;sup>18</sup> Poudel, P. and J. Carryer, (2000), Girl-trafficking, HIV/ AIDS, and the position of women in Nepal. *Gender and Development*,

<sup>8: 74–79.</sup> 

<sup>&</sup>lt;sup>19</sup> Furber, A. S., Newell, J. N. and M. M. Lubben, (2002), A systematic review of current knowledge of HIV epidemiology and of sexual behaviour in Nepal. *Tropical Medicine and International Health*, 7(2): 140-148

<sup>&</sup>lt;sup>20</sup> Mehta, S., (2007), Pune second largest destination for trafficking of Nepalese girls: Harvard study. http://www. expressindia.com/latest-news/Pune-second-largestdestination-for-trafficking-of-Nepalese-girls-Harvardstudy/235044/

<sup>&</sup>lt;sup>21</sup> Dahlburg, J. T., (1994) Facing the peril of AIDS in Nepal. Los Angeles Times, August 03, Home Edition, page A-1.

<sup>&</sup>lt;sup>2</sup> Seddon, D., (1998), HIV-AIDS in Nepal: the coming crisis. Bulletin of Concerned Asian Scholars 30: 35–45.

<sup>&</sup>lt;sup>3</sup> Chakraborty, A. K., Jana, S., Das, A., Khodakevich, L., Chakraborty, M. S. and N. K. Pal, (1994), Community based survey of STD/HIV infection among commercial sex workers in Calcutta (India). Part 1. Some social features of commercial sex workers. *Journal of Communicable Diseases*, 26: 161–167.

#### 4.3 Nepali migration to India

#### Nepali migration to India is historical

Nepalese have a long history of migration to India. In the beginning of the 19th century, young hill men used to go to Lahore city of Northern Punjab to be recruited to the army of Ranjit Singh. These recruits were popularly called as Lahure. After the war between British East-India Company and Gurkha in 1814, British Army in India (1815-1816) started recruiting Nepalese men. After the independence of India, British took some regiments along and left some in India. Since then Nepalese men were continuously recruited in the Indian and British Army. At the same time, civilian migration also expanded to Darjeeling and Jalpaigudi districts and Sikkim, Assam, and Meghalaya for labor in tea estates (Gurung, 2008).

#### India – the most favored destination

There was a huge shift in the destination of Nepalese migrants from 1995-96 to 2003-04, with a decrease in the share of internal migration as well as migration to India and a corresponding increase in the amount of overseas migration. Nevertheless, among the international destinations, India remained the major destination for Nepalese labor migrants since the signing of the Peace and Friendship Treaty between India and Nepal in July 1950 (Shrestha, 2004).<sup>24</sup> Given the low costs of migrating due to open borders and free movement, along with common culture and proximity, Nepalese migrants in India are estimated to be one million by some and even as high as three million by others, although the current population census states that

less than 600,000 Nepalese reside in India (Bohra and Massey, 2009).<sup>25</sup>

#### Migration estimation -Lack of focused studies

There have been no scientific studies focused exclusively to estimate the size of migrants in the country. While it does not accurately identify the number of migrants, in 2001, the Nepal Population Census and Community Level Research carried out by CARE/FHI discovered that 27.5% of the adults males in the Far-Western hill districts were absent for at least six months and approximately 10% of adult men were residing in India for at least 6 months. In 2009, it was estimated that there were 1,485,499 migrants in the country (NCASC, 2010).<sup>26</sup>

#### Nepalese immigrants associations estimate higher number

With large number of Nepalese migrating to India through the open border, there is accurately documented data on migration. Officially, about 589,000 Nepalese work in India, 77% of all Nepali migrants. However, Nepalese immigrant associations estimate that there are between 1.3 and 3 million Nepalese in India (Seddon et. al., 2002; Thieme, 2007). In 2007, National Centre for AIDS and STD Control (NCASC) estimated about 65,000 HIV infections among adults in Nepal. Out of all the infections, about two out of five infections were among labor migrants, particularly those, who went to India for labor work. NCASC also estimated that 1,140,000 to 1,710,000 adult Nepali men migrated abroad in 2007. In the Far Western hill districts of Nepal,

<sup>24</sup> Shreshta, B., (2004), Foreign Employment and the Remittance Economy of Nepal. The Nepalese Economy: Towards Building a Strong Economic Nation-State. Tribhuvan University: Central Department of Economics (CEDECON)

Bohra, P., and Messey, D. S., (2009), Processes of Internal and International Migration from Chitwan, Nepal. International Migration Review, 43 (3): 621-651.

<sup>26</sup> NCASC, (2010), National Estimates of HIV Infections: 2009 Nepal. National Centre for AIDS and STD Control. Kathmandu, Nepal.

almost 80% adult men from about 80 to 90% of the households migrated to India for labor work (NCASC, 2008).<sup>27</sup>

Government data grossly underestimates the number of migrants in India who are from Nepal and the real value of remittances coming to Nepal since money is sent back home mainly by hand, carried by the wage earners themselves, or sent via their friends. According to some studies, the number of Nepalese working in India ranged from 0.5 to 1.3 million (Seddon et al., 2002). On the other hand, the Nepalese immigrant associations interviewed by the researchers in Delhi estimated that around 200,000 Nepalese worked in Delhi alone (Thieme and Muller-Boker, 2004).<sup>28</sup>

### 4.4 Source places of migration in Nepal

There are very few studies which have delineated the pattern of source and destination locations of migration between Nepal and India. Despite the importance of migration to India, it is remarkable how few studies exist concerning the situation of Nepalese migrants in India. One reason for the limited research on Nepalese migrants in India might be the common border shared by these countries and the longstanding history of Nepalese migration, so that this migration is often not perceived as 'foreign employment' (Thieme, 2007). In India places like Maharashtra, Mumbai and Delhi are high risk zones because HIV among sex workers at these places is much

TABLE 2 Proportion o	f migrants in source and	l destination places
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	Far West (%)	West Mid West (%)
Delhi	42	
Maharashtra	39	43
Punjab	10	9
UP	9	16
МР	8	
Gujarat		16
НР		14

Source: Acharya (2008)

higher compared to other parts of India. Data presented in the following table (Table 2) shows that a significant proportion of migrants go to Maharashtra from West to Far western Nepal (Acharya, 2008).<sup>29</sup>

Studies carried out (by the following authors) in two districts of Far West Nepal, from where 99.6 % of the out-migrants went to India, confirmed the national migration patterns outlined. Village case studies in the Bajura and Bajhaeg districts in the Far West revealed that, due to insufficient agricultural production and limited alternative sources of income, labor migration to India in general and to Delhi in particular was an important economic pillar for many people for generations (Kollmair et al., 2003<sup>30</sup>; Muller-Boker, 2003).<sup>31</sup>

Migration patterns, both within Nepal and internationally, provide opportunities for extensive sexual networking, both in terms of distance and frequency. The seasonal

<sup>27</sup> NCASC, (2008), National Estimates of HIV Infections: 2009 Nepal. National Centre for AIDS and STD Control. Kathmandu, Nepal.

<sup>28</sup> Thieme, S. and U. Muller-Boker, (2004), Financial self-help associations among Far West Nepalese labor migrants in Delhi, India. Asian and Pacific Migration Journal, 13(3): 339-361

<sup>29</sup> Acharya, L. B., (2008), Reproductive Health Services: An Entry Point to Reach Labor Migrants and Their Wives for Providing HIV and STI Services in Nepal. Third Himalayan Policy Research Conference at Madison, USA. http://hdl. handle.net/1928/6936

Kollmair, M. 2003. Pasture Management and Nature Conservation in the Khaptad National Park. In: Domroes, M. (Editor), Translating Development: The Case of Nepal. New Delhi: Social Science Press, pp. 158-166.

<sup>31</sup> Müller-Böker, U., (2003), Livelihood strategies in the buffer zone of the Khaptad National Park. In: Domroes, M. (Editor), Translating Development: The Case of Nepal. New Delhi: Social Science Press, pp. 166-177.

nature of subsistence agriculture and the opportunities for cash income from industries such as tourism encourages movement between districts, particularly for men. In a survey of school adolescents, 41% of the 986 participants reported having a family member leave their home district to work (Thapa and Devkota, 2001). A random sample survey in 11 districts of Mid and Far West Nepal indicated that 15% of the adult population migrate seasonally (Furber et. al., 2002).

Data from Doti district in the Far-West indicated that 83% of the households had at least one family member working outside the district and for 94% of them the destination was India. Most (84%) of these migrant workers were married. A previous study by Poudel on migration in Doti district in Nepal showed that approximately 50% of the households had at least one family member who had been to India as a migrant worker. The major destinations were Mumbai, Punjab and Chennai where HIV prevalence among sex workers was reported to be high (Poudel, et. al., 2003).<sup>32</sup>

Another study by the WFP provided a detailed account of migration routes from Nepal to India. The main destinations for migrants from the Central, Western, Mid-Western and Far-Western regions of Nepal were reported to be Maharashtra, Mumbai, Delhi, Himachal Pradesh, Uttaranchal and Ahmedabad. Migrants from the Eastern region, meanwhile, favored Meghalaya, Shillong, Assam, Delhi, Kashmir and Himachal Pradesh (WFP, 2008).<sup>33</sup> In a need assessment study conducted by FHI in Mumbai (before initiating SATHI Nepal initiative), about 20% of the respondents were from Achham followed by some from Surkhet (9%), Nawalparashi (9%), Doti (8%), Kailali (7%), Kaski (7%), Palpa (7%), and Syngja (7%) (FHI, 2003).<sup>34</sup>

### 4.5 Destination places in India

#### According to Indian Census

2001 Census of India reported that about half a million Nepali migrants lived in India. About half of them (261,451) were recent migrants (0-9 years). As per the 1991 India Census Report, there were 203,421 men, and 275,273 women in India who had migrated from Nepal. A greater number of Nepali men were found in UP (16% of 203,421) followed by Himachal Pradesh (11%), West Bengal (11%), Delhi (10%), and Maharashtra (7.3%). On the other hand, there were more Nepali women in Bihar (46.4%), Uttar Pradesh (22.2%), and West Bengal (7%). Interestingly, States like Delhi (3%), Himachal Pradesh (3.1%), and Maharashtra (2.5%) had fewer women when compared to men.

#### Nepali migrants in Delhi

According to Bhattarai, Nepali migrant factory workers in Delhi came from almost all the regions of Nepal. But a large majority of them were from the western region of the country (8,915 to 10,850 people). The western region comprised three zones namely, Gandaki, Lumbani and Dhaulagiri. A large number

<sup>32</sup> Poudel, K. C., Okumura, J., Sherchand, J. B., Jimba. M., Murakami. I. & S. Wakai, (2003), Mumbai disease in far western Nepal: HIV infection and syphilis among male migrant-returnees and non-migrants. *Tropical Medicine and International Health*, 8(10):933-9.

<sup>&</sup>lt;sup>33</sup> World Food Program, (2008), Passage to India – Migration as a coping strategy in times of crisis in Nepal. December 2008, World Food Program, Nepal.

<sup>&</sup>lt;sup>34</sup> Family Health International, (2003), An Assessment of migration and associated risk behavior among Nepali migrant men in Mumbai. November 2003, Family Health International, New Delhi.

of factory workers were mainly from the two zones, Gandaki and Lumbini, from the districts of Palpa, Syangja, Gulmi, Kapilvastu, Nawalparasi and Gorkha. Other important districts that supplied Nepali factory workers were Darchula and Baitadi of Mahakali zone in far western region of Nepal, Pyuthan, Salyan, Dang and Dailekh of Rapti zone in Middle Western Nepal. Almost all the watchmen came from the three districts of Seti zone in far western Nepal, namely Bajura, Bajhang and Achham (6,850 to 8,350 which included their family members as well). It was estimated that there were 15,000 to 20,000 migrant Nepali watchmen working in Delhi. Majority of them came from Bajura district. The trend was such that those from Bajura worked as watchmen in Delhi, while those from Achham and Bajhang worked in Mumbai and Bangalore, respectively, as watchmen (Bhattarai, 2007).

In the villages of Bajhang and Bajura districts in Far West Nepal, 86% of the male and 17% of the female population migrated periodically to India for labor. Some of them took their entire family along, and stayed for a few months to several years. Mapping in one village (Meltadi) in April 2000 showed that 15% of complete households were in India; and in addition 11% out of all households had one to four family members working in India. The main destination was Delhi; only some went to Bangalore or Mumbai (Muller-Boker & Thieme, 2007).<sup>35</sup> A situational assessment conducted by SARDI/FHI identified more than 65,000 Nepali workers in various places in Delhi including Okhla, Tehkhand, Harkeshnagar (more than 50,000), Gole Market, Shivaji Stadium, Cannaught Place, Pahar Ganj (more than 5,000); Mahipalpur, Mehrauli, Adhchini, Katwaria Sarai (more than 3,000); Vasant Gaon, RK Puram, Lado Sarai, Ber Sarai, Kusumpur Pahari (more than 5,000); and other major pockets including Rajendra Nagar, Laxmi Nagar, Kirti Nagar (SARDI, 2006).<sup>36</sup>

CARE India mapped Nepali migrants in Delhi as part of their cross border intervention. In all, 24,000 to 26,000 Nepali migrants were mapped in Delhi alone. About 6,000 to 7,000 had come from Achham and Kanchanpur, districts in the Far West. Among all the Nepalese mapped in Delhi, about 9,000 to 10,000 were single male migrants. Threefourth of all those mapped had come to India within the past five years. Mapping was also conducted at two transit points (Gauriphanta and Banbasa) over two month to know the flow of migration. About a guarter of migrants from Achham (21%) and Kanchanpur (23%) passing through these border points reported going to Delhi. About a third of migrants from Achham (30%) and other districts (28%) reported they were going to Mumbai. Interestingly, a large chunk of migrants from Achham (49%), Kanchanpur (74%), and other districts (45%) passing through these points reported going to other places in India, which indicated that Mumbai and Delhi are not the only popular destinations for Nepali migrants (CARE, 2011).37

<sup>&</sup>lt;sup>35</sup> Muller-Boker, U. and S. Thieme, (2007), Livelihood strategies in a marginal area of Nepal (Far West Nepal), with an emphasis on labour migration to India. In: Jones G, Leimgruber W, Nel E, editors. Issues in Geographical Marginality: Papers presented during the Meetings of the Commission on Evolving Issues of Geographical Marginality in the Early 21st Century World, 2001-2004. Grahamstown: Rhodes University.

<sup>&</sup>lt;sup>36</sup> SARDI, (2006), HIV/AIDS Care and Support Project for working with Nepali migrants in India and Nepal - A Situational Assessment Report. February-March 2006, Delhi, India

<sup>&</sup>lt;sup>37</sup> CARE, (2011), Personal communication. CARE India – New Delhi.

#### HV prevalence study in Kailali district, Nepal

This study was carried out to determine HIV/STI prevalence rates among both migrant and non-migrant males from two VDCs of Kailali district in far-western Nepal. Data for this study was collected from a total of 610 males who were from 800 randomly selected households. This sample represented a heterogeneous group of people of the area in terms of their migratory status, socio-demographic characteristics and behaviors. Half of them were international migrants who had migrated outside Nepal, specifically Uttaranchal and Maharashtra of India, while the other half were non-migrants who had no international migratory exposure but moved to other districts within the country for employment and/or for study purposes (New Era, 2002).38

The study revealed that about half (51%) of the total participants left their villages for India at least once in search of work and/or study. Uttar Pradesh was the most preferred destination (34%) followed by Maharashtra (26%), UP/Bihar (22%) and Himachal Pradesh (18%). About 11% of the migrants had gone to Mumbai. More than 55% of them stayed in India for one year or less, while 35 percent stayed out of Nepal for one to five years. The remaining 10% reported being out of Nepal for more than five years. Maharashtra was reported to be the most preferred destination for future migration. About 36% of the migrants interviewed in the study reported that their future destination of migration would be Maharashtra. This was followed by Uttar Pradesh (20%) and Uttaranchal (19%) (New Era, 2002).

#### Mumbai studies on Nepali migration

In the year 2002, FHI-India conducted mapping in four cities including Mumbai, Pune, Bangalore and Delhi. More than 5,000 Nepali migrants were identified in 24 geographical locations in Mumbai and its sub-urban areas (IMRB/FHI, 2002).<sup>39</sup> Further, this study explored the possibility of conducting HIV prevalence survey among Nepali single male migrants through a feasibility study in Mumbai.

CARE India also conducted exhaustive mapping in Mumbai in November-December 2010 before starting crossborder intervention among Nepali migrants in Mumbai. Approximately 30,000 to 40,000 Nepali migrants were estimated to live in all the identified clusters in Mumbai and Thane district urban areas. While about half of these migrants were reported to be from Achham district, about 2,500 to 4,000 were from Kanchanpur, and the remaining from other districts of Nepal.

#### 3<sup>rd</sup> round of IBBS among male labor migrants in Nepal

The third round of IBBS revealed that the most popular destinations, Mumbai (17%) and Delhi (14.6%), covered more than 30% of the migration destinations of the respondents. Ratnagiri (7.7%) in Maharashtra figured as the third popular destination among the labor migrants of the regions. Other popular destinations in India were Pune (4.9%), UP (3.6%) and Gujarat (2.9%) among others (SSO, 2010).<sup>40</sup>

<sup>&</sup>lt;sup>38</sup> New Era, (2002), HIV/STD Prevalence and Risk Factors among Migrant and Non-Migrant Males of Kailali Districts in Far-Western Nepal. Kathmandu, Nepal.

<sup>&</sup>lt;sup>39</sup> IMRB/FHI, (2002), Mapping Nepali Migrants in Mumbai, Pune, Delhi, and Bangalore for STI/HIV Prevalence Survey.

SSO, (2010), Integrated Biological and Behavioral Surveillance survey among male migrants in Mid and Far Western Regions. Round – II, IBBS Report 2010, Kathmandu, Nepal.

## HIV RISK AND VULNERABILITY

This section deals with high risk sexual behavior, HIV prevalence among the Nepali migrants, and assessment of HIV risk and vulnerability among the estimated population of Nepali migrants.

#### 5.1 Sexual risk behavior

Not all migrants visit sex workers while away and as such, the entire migrant population cannot be identified as a group at higher risk for acquiring and transmitting HIV. However, it has been reported that 11% and 23% in the Western and Mid-Far Western districts, respectively, visited sex workers in India and Nepal. This has tremendous implications on transmission patterns; as such behavior not only puts the migrants at an increased risk of acquiring HIV, but also significantly increases the probability of infecting the low-risk population groups – their spouses (NCASC, 2010).<sup>41</sup>

In a study in Doti district, 53 respondents from 4 VDCs were interviewed at source. They were of 15–50 years age; all had worked in India as migrant workers for at least 6 months; and 49 (92%) worked in Mumbai. Nineteen (36%) participants were planning to go back to India to continue their jobs within a month. Visiting brothels in India were reported to be very common among the respondent migrants. Reportedly almost all migrants visited brothels including a few who were living with their spouses. Condom use was uncommon during extramarital sex in India as the men perceived

<sup>&</sup>lt;sup>11</sup> NCASC, (2010), National Estimates of HIV Infections – 2009. National Centre for AIDS and STD Control, August, 2010, Kathmandu, Nepal.

low vulnerability to HIV/ STIs; alcohol consumption and the belief that condoms reduced sexual pleasure. The respondents also reported extramarital sex as common in the migrants' home villages in Nepal. Many stated that they began having extramarital sex only after they returned from India. Most participants did not see any reasons for using condoms with village women, as they were different from sex workers of Mumbai and therefore safe (Poudel, et. al., 2004).<sup>42</sup>

A study on HIV/STI prevalence and risk factors among migrant and non-migrant males of Kailali district in Far-Western Nepal indicated that in the past one year period also, the proportion involved in sex with sex worker was much higher among international migrants (20%) than among non-migrants (8%). Nearly two-third participants reported using condoms during their last sexual encounter with a sex worker. There was no variation in condom use between migrants (62%) and non-migrants (62%). However, HIV infection was found only among those who visited Mumbai and had sex with sex workers (New Era, 2002) because sex workers in Mumbai have reported high HIV prevalence.

In another study, a representative sample of 316 migrant men (210 internal migrants and 106 external migrants) were interviewed and tested for HIV infection between September 2001 and June 2003. HIV prevalence among migrants within Nepal was 2.3% as compared to 8.5% among migrants to India. 60% of the migrants within Nepal and 85% of the migrants to India had visited female sex workers (Gurubacharya and Gurubacharya, 2004).<sup>43</sup>

A need assessment among Nepali migrants in Mumbai before initiating cross-border intervention (FHI 2004) showed that out of 120 single male migrants, 30 respondents openly discussed about their visits to sex workers in Mumbai, while 71 indicated that they knew others who frequented brothels or they accompanied their friends to brothel but they did not have sex with sex workers. The remaining 19 respondents did not report any risk behavior whatsoever - about their friends or themselves. The study clearly indicated that more than a quarter of Nepali migrants were involved in high risk sexual behavior in Mumbai. Men with high risk behavior reported having bought sex from both Indian and Nepali sex workers in Mumbai. Many respondents mentioned that they had sex with sex workers at least once in 2-3 months (FHI, 2004).

The initial two rounds of IBBS among male migrant labor were conducted in 2006 and 2008 respectively. A small proportion of respondents from both regions in 2008 (from 17.2% to 9.7% in the Western region and from 26.9% to 21.7% in the Mid to Far Western region) reported ever having had sex with a female sex worker in India than the respondents who had reported on this in 2006 (New ERA/ SACTS/ NCASC, 2006 and 2008). In the third round of IBBS among male labor migrants in the West and Far West, it was found that 32.8% of the respondents had sexual intercourse abroad, which was three times higher than in Nepal (SSO, 2010).

In an informally arranged focus discussions with some 40 people living with HIV/AIDS, it was learnt that almost all the male population of the area migrated to India for work and that Nepalese migrants were concentrated in highly specific locations in India; commonly including Delhi, Bombay and Pune in Maharashtra, Punjab, and Gujarat (Bhatta, 2009). <sup>44</sup>

<sup>&</sup>lt;sup>42</sup> Poudel, K. C., Jimba, M., Okumura, J., Joshi, A. B and S. Wakai, (2004), Migrants' risky sexual behaviours in India and at home in far western Nepal. *Tropical Medicine and International Health*, 9 (8): 897-903.

<sup>&</sup>lt;sup>43</sup> Gurubacharya, D. L. and V. L. Gurubacharya, (2004), HIV prevalence among Nepalese migrant workers working in Nepal and Indian cities. *Journal of Nepal Medical Association*, 43(154):178-181.

<sup>&</sup>lt;sup>44</sup> Bhatta, A., (2009), Evaluation of "Reaching Across Borders" HIV Prevention Care and Treatment for Nepali Migrants at Source and Destination Communities In Nepal and India. Social Welfare Council and FHI, Nepal.

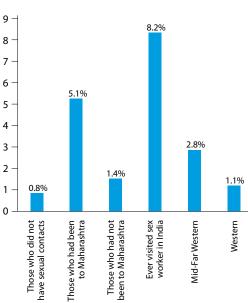
### 5.2 HIV prevalence among migrants from Nepali

Seasonal labor migration has emerged as a major factor driving the HIV epidemic in Nepal as in some other countries. Mobility and migration are not direct risk factors for HIV but create conditions that increase people's vulnerability to HIV. HIV transmission largely occurs through commercial sex which places both male clients and subsequently their wives at increased risk of infection from HIV. Recent data also showed that 27% of Nepali migrants engaged in high-risk sexual behaviors in India and as a result, this group accounts for 41% to 46% of all HIV infections in Nepal (NCASC, 2010).

A study was conducted in Doti district in the Far western Nepal among male migrantreturnees and non-migrant respondents aged 15–45 years. Among 137 respondents, 11 (8%) were positive for HIV and 10 of these were migrant-returnees from Mumbai. Thirty (22%) respondents tested positive for syphilis. The Syphilis prevalence was high among both the migrant-returnees and non-migrants (Poudel, et. al., 2003). In another study in Nepal, a total of 316 male migrant workers who visited or were referred to counseling and treatment clinic in SACTS for symptoms of sexually transmitted infections during September 2001 to June 2003 were interviewed. HIV prevalence among migrants within Nepal was 2.3% as compared to 8.5% among migrants to India (Gurubacharya and Gurubacharya, 2004).

Three rounds of IBBS (Integrated Behavioral and Biological Survey) were conducted among migrant labor in 11 districts of West, Mid and Far Western region of Nepal. In the first round of IBBS (2006), out of 360 returnee migrants participating in the study, 4 (1.1%) in Western and 10 (2.8%) in Mid-Far Western sample respectively tested positive for HIV. HIV prevalence among those respondents who had ever visited sex workers in India was 8.2 percent compared to 0.8 percent among those who did not have such sexual contacts. HIV prevalence rate among those returnee migrants who had been to Maharashtra was 5.1 percent while it was 1.4 percent among those who had not been there (figure below) (New Era, 2008).

Data from the 2008 IBBS survey estimated that 1.1% of the labor migrants to India from 11 Western and Mid to Far Western districts of Nepal were infected with HIV. Although HIV prevalence amongst the labor migrants to India dropped slightly from 1.9% in 2006 to 1.1% in 2008, this sub population bears the largest burden of HIV infections. This is primarily because of the large number of labor migrants estimated in the country. The 2008 IBBS study amongst Nepali migrants travelling to Indian cities for work found that approximately 16% of men engaged in high risk sexual behaviors while in India and frequently visited sex workers (New Era, 2008).



#### Figure 1: HIV prevalence among migrants from Nepal

In the third round of IBBS (2010), overall HIV prevalence among returnee migrants was 4.4% and much higher among those who reported visiting sex workers (9.1%) (SSO, 2010). Unlike the first one, the second round of IBBS was conducted among the wives of migrant laborers in Achham, Doti, Kanchanpur, and Kailali districts of Far-West Nepal. The wives of migrant laborers in the four districts of Far-Western Nepal had an HIV prevalence of 0.8 percent. Districtwise, the respondents in Doti had a slightly higher prevalence of HIV (2.6%) than those in Achham (0.7%) and Kailali (0.4%). None of the sampled wives of migrants in Kanchanpur district tested HIV positive. The HIV prevalence among the wives of migrants in the second round (0.8%) was much lower than that in the first round of the IBBS conducted in 2008 (3.3 %) (New Era, 2010). 45

With high HIV prevalence among migrants returning from places like Mumbai, health workers in Nepal were reported t be concerned about the epidemic in Achham, and female community health volunteers were desperately trying to reach every corner of the remote district to raise awareness and support people living with the virus. Between 2005 and 2006, nearly 20% of the 500 people who had come for testing at the local Voluntary Counseling and Testing (VCT) Centre in Achham were found to be HIV-positive, according to the Himalayan Association against STI and AIDS (HAASA), a local NGO that provided VCT facility (UN Integrated Regional Information Networks, 2007).46

A major challenge to HIV control is the trafficking of Nepalese girls and women into commercial sex work in India. As indicated by the World Bank, about 50% of Nepal's FSWs previously worked in Mumbai, and some 100,000 Nepalese women continued to work there. It was estimated that 50% of Nepalese sex workers in Mumbai brothels were HIV positive (World Bank, 2008).<sup>47</sup>

Silverman and others assessed the prevalence of HIV infection among repatriated Nepalese girls and women sex trafficked to brothels in India, as well as the role of trafficking related experiences in predicting such infection. Among 287 repatriated Nepalese sextrafficked girls and women, 109 (38.0%) tested positive for HIV. Compared with those trafficked at 18 years or higher, girls trafficked prior to the age of 15 years were at increased risk for HIV, with 20 of 33 (60.6%) infected among this youngest age group. Additional factors associated with HIV positivity included being trafficked to Mumbai and longer duration of forced prostitution; indicating increased risk per additional month of brothel servitude. Among sex workers surveyed in the Kathmandu Valley, HIV positivity was higher among Mumbai returnees (73%, n=12, in 2001) compared to India returnees as a whole (44%, n=9, in 1999/2000 and 42%, n=33, in 2001); and these rates were several-fold the prevalence of HIV (17% in 1999-2000 and 16% in 2000) in the overall samples of sex workers (Nepal, 2007).<sup>47</sup>

<sup>&</sup>lt;sup>45</sup> New Era, (2010), Integrated Biological and Behavioral Surveillance among wives of migrants in four districts of Far Western Nepal. Round II. Kathmandu, Nepal.

<sup>&</sup>lt;sup>46</sup> UN Integrated Regional Information Networks, (2007), NEPAL: Migration takes its toll on villages hit by AIDS. http://www.plusnews.org/Report.aspx?ReportID=72295.

<sup>&</sup>lt;sup>47</sup> World Bank, (2008), HIV/AIDS in Nepal. August 2008.

## SIZE ESTIMATION AND ASSESSMENT OF HIV RISK AND VULNERABILITY

Risk and vulnerability assessment was aimed at estimating the size of Nepali migrant population who were at the risk of HIV due to migration to India and high risk sexual behavior.

#### 6.1 Size Estimation of Nepal-India migration

Many researchers made attempts to estimate the size of Nepali emigrants using different sources of data. The predominant source of data on Nepali out-migration was the Census of Nepal conducted in the year 2001. Census data was considered to have limitations due to the nature of migration to India and other countries from Nepal. Migration between Nepal and India was often seasonal and undocumented. Therefore, the number of migrants depended upon the season of the year during which enumeration took place. More than that, due to the long and open border between these two countries, many people crossing the borders could be commuters. Similarly, a considerable portion of out-migration to countries other than India, such as the Gulf and Tiger states, was illegal and under-counted (Bastola, 2006). <sup>48</sup>

Various estimations of Nepali out-migration made by different authors have been summarized in the following table (Table 3). These estimates were reworked to the year 2010 using the estimated geometric growth rate of 2.2 as identified Census of Nepal. A simple geometric growth calculation formula

<sup>&</sup>lt;sup>48</sup> Batsola, T. S., (2006), One hundred years of Census taking in Nepal: The 2011 Census. Central Bureau of Statistics, Kathmandu, Nepal.

#### TABLE 3 Estimated out-migration from Nepal

	Source of Data	Estimation Year	Estimated out- migration	Estimated Out- migration 2010
Total out-migration from Nepal				
Total out-migration in Nepal, Census 2001 (3% of population)	Census 2001	2001	7,62,181	9,21,378
Absentee population, 2001 census (3.3% of 23 million population)	Thieme, 2005	2001	7,60,000	9,18,742
Total out-migration from Nepal estimated	Bal Kumar, 2003	2001	10,00,000	12,08,871
Nepalese working abroad (out-migration)	Seddon, et. al., 2002	2001	11,00,000	13,29,758
Estimated out-migration based on NIDS studies	Gurung & Adhikari, 2004	2003	22,00,000	25,49,740
Out-migration based on NLSS and 9 case studies	Kollmair et. al., 2006	2004	11,54,576	13,10,214
Absentee popln. estimate for 2009 by CBS (projection of 2001 Census)	NCASC, 2010	2009	14,85,499	15,17,140
Out-migration to India				
Nepal Census, 2001- 77% of all moved to India (out-migration)	Census, 2001	2001	5,86,879	7,09,461
Nepalese working in India (out-migration)	Seddon et. al., 2002	2001	13,00,000	15,71,532
NGO estimation of out-migration (quoting FPAN)	Bal Kumar, 2002	2001	8,00,000	9,67,096
Out-migration estimation based on average of various estimations & NIDS studies	Gurung and Adhikari, 2004	2003	15,00,000	17,38,459
Out-migration based on NLSS and 9 case studies	Kollmair et al., 2006	2004	9,00,000	10,21,321
Nepali sex workers in India				
Nepali sex workers in India	Seddon, et. al., 2002	2002	100-150,000	NA
Nepali sex workers in Mumbai	Seddon, 1998	1998	40-45,000	NA
Nepali sex workers in Mumbai	Dahlburg, 1994	1994	60,000	NA
Nepali girls trafficked every year to India	Seddon, 1998	1998	5,000- 7,000	NA
Nepali girls trafficked every year to India and abroad	Bal Kumar et al., 2001	2001	12,000	NA

NA – Not available

was used in working out the estimated population as on 2010. A geometric growth is represented by equation  $Y_t = Y_0(1+r)$ <sup>t</sup> where " $Y_0$ " is the initial population, "r" is the population growth rate and "t" is the number of years of growth (to 2010 level from the estimation year).

The estimated out-migrants in Nepal varied from slightly less than a million to 2.5 million as on 2010. While estimate of Census was the lowest at 941,003 Nepali out-migrants, the estimate made by Gurung and Adhikari (2004)<sup>49</sup> was highest at 2,549,740 as on 2010. Census data being the official estimate and most conservative number of Nepali out-migrants, all other estimates were based on researchers' own calculations. Census data was considered to be under-estimation due to a variety of reasons including undocumented and

<sup>&</sup>lt;sup>49</sup> Gurung, G. and J. Adhikari, (2004), The prospects and problems of foreign labour migration. In Pong-Sul Ahn (Ed), Migrant workers and human rights: Out-migration from South Asia (pp. 100-130). New Delhi: International Labour Organization, Sub-regional Office for South Asia.

Study	Respondent Groups	Reported Risk Behavior
New Era/FHI, 2002	Migrant and non-migrant males of Kailali district	20% of the international migrants reported having sex with sex workers in India
Poudel, et. al. 2004	Returned migrants study in 4 VDCs of Doti district	64% reported visiting sex workers (overall)
FHI, 2004	120 Nepali single male migrants in Mumbai	25% reported having sex with sex workers in Mumbai in in-depth interviews
New ERA/ SACTS/ NCASC, 2006	IBBS-1 among male labor migrants in the Mid and Fast Western Nepal	17.2% to in the Western region; and 26.9% in the Mid to Far Western region
New ERA/ SACTS/ NCASC, 2008	IBBS-2 among male labor migrants in the Mid and Fast Western Nepal	10% in the Western region and 22% in the Mid to Far Western region)
SSO, 2010	IBBS – 3 among male labor migrants in the Mid and Far Western Nepal	32.8 percentages of labor in mid and far western region had sexual intercourse abroad

#### TABLE 4 Nepali migrants reporting sex with sex workers in India

illegal nature of migration from Nepal. However, estimates by others indicating very high out-migration numbers were not based on large scale population based surveys to provide a reliable estimate.

Nepal Living Standards Survey (NLSS), a nation-wide population based survey, conducted using household random sampling approach, was considered to be a good estimate of migration from Nepal. According to NLSS there were 1,154,576 Nepali out-migrants as on 2004. Based on the 2001 Census data, CBS provided a projected estimate of 1,485,499 outmigrants for the year 2009. Thus, the size of estimated Nepali emigrants, in the year 2010, was in the range of 1.5 to 2.5 million. Similarly, the size of Nepali emigrants in India range from 0.7 million to 1.7 million, as on 2010.

#### 6.2 High risk sexual behavior

The review identified six studies conducted in Nepal and India to know the level of sexual risk behavior among Nepali migrants (Table 4). Most of these studies have been conducted in Nepal where the respondents were asked about their sexual behavior when they were in India, and whether they had sexual contact in Mumbai or Maharashtra. Most of the studies compared the levels of risk behavior and HIV prevalence of "returnee" migrants with those who did not travel abroad for work.

In general, about a quarter to one-third of the migrants from Nepal reported visiting sex workers while they were in India. As evident from these studies, the proportion of migrants reported having sex with sex workers in India was relatively high among migrants from the Mid to Far West when compared to those from the Western region. Thus, 25% level of sexual risk behavior was considered in the current analysis. Further, the studies reviewed have indicated that Nepali migrants had sex with sex workers in India at least once in two months.

#### **6.3 HIV prevalence level**

With about a third of the adult HIV infections in Nepal being reported among migrants, there was increased interest in studying HIV prevalence among migrant population in addition against other high risk groups, such as, sex workers, MSM and injecting drug users. Interestingly, a similar interest was not evinced in India, the largest recipient of Nepali migrants. Although sentinel surveillance is conducted among migrants in general, there is no data available to indicate what proportion of Nepali migrants in India was infected with HIV. Some of the studies conducted in Nepal among the so called "international migrants" or "returnee migrants," particularly in the West and Mid to Far West regions provided an indication of HIV prevalence among Nepali migrants (Table 5).

HIV prevalence among Nepali migrant labor ranged from less than one percent to almost 10% across studies in the last ten years. Although it was believed that there was a general decline of HIV among migrants, the latest IBBS (3rd round) has indicated close to 5% HIV prevalence among Nepali migrants in 11 districts in West and Mid to Far West. Further, as high as 10% of the migrants who reported

having sex with sex workers were found to be HIV positive. Considering that 25-50% of migrant frequent sex workers in India, about 2.5% to 5% of the Nepali migrants to India could be HIV positive.

#### **6.4 Vulnerable migrant** population

#### **Regional estimates**

In this study, vulnerability assessment of migrants from Nepal was carried out based on the estimated number of migrants from Nepal, their destinations in India, and the HIV prevalence in these locations. Estimation of Nepali migrants in India was based on the absentee population who went to India (as per 2001 Census) and other estimates made by different scholars. Thus, a range of estimated number of migrants from Nepal has been provided in this section. All the estimates were reworked to 2010 using geometric

Study	Year	HIV prevalence among Nepali migrants
Returnee migrants study in Doti district (Poudel, et. al., 2003)	2001/2003	8% overall prevalence
Study among clinic attendees at SACTS (Gurubacharan and Gurubacharan, 2004)	2004	8.5% among migrants to India
IBBS among returnee migrants in 11 districts in the West and Mid- and Far West	2006	1.9% Overall prevalence 1.1% in Western region 2.8% in Mid and Far Western region 8.2% among ever visited sex workers in India
IBBS among returnee migrants in 11 districts in the West and Mid- and Far West (Round II)	2008	1.1% Overall prevalence 1.4% among Western region 2.3% Western (returning from Mumbai) 0.8% among Mid and Far Western 2.4% in Mid and Far West (returning from Mumbai)
IBBS among returnee migrants in 11 districts in the West and Mid- and Far West (Round III)	2010	4.4% overall prevalence 9.1% among those having sex with FSW.
HIV prevalence among migrants at VCT in Nepal	2007	20% prevalence
Repatriated trafficked sex workers	2007	38% prevalence
IBBS among Wives of migrants	2008	3.3% Overall prevalence (4.5% Achham; 3% Doti; 2.5% Kailali; 1.1% Kanchanpur)
IBBS among Wives of migrants	2010	0.8% Overall prevalence
Returnee FSWs in Kathmandu	2001	42% overall (n=33)

#### **TABLE 5** HIV prevalence among Nepali migrants

Region	Population 2001	Absentee to India 2001	% Absentee to India 2001	Absentee to India – 2010	% to the Total – 2010
East	52,86,890	67,338	1.27	83,790	11.43
Central	79,88,612	63,508	0.79	79,025	10.78
Western	45,71,013	2,63,180	5.76	3,27,481	44.67
Mid Western	27,07,244	90,006	3.32	1,11,997	15.27
Far Western	21,83,175	1,05,018	4.81	1,30,677	17.82
Total	2,27,36,934	5,89,050	2.59	7,32,970	100.0

#### TABLE 6 Regional estimates of absentee to India, Census 2001

growth rate in order to enable comparison across estimates. Minimum and maximum estimates were arrived at on the estimated range of absentee population as on 2010. According to the estimates of 2010, there were 732,970 migrants from Nepal in India. Western region of Nepal contributed the maximum of absentee population to India both in absolute and relative terms. About 6% of the population who migrated to India from the Western region formed almost half of all the migrants from Nepal in India (45%). Far West (about 18%) and Mid West (15%) also contributed a substantial proportion of migrants from Nepal (Table 5).

Assessment of HIV vulnerability among Nepali migrants in India was extended to include both Census data (which were considered to be conservative estimates) and estimates provided by other studies, which were much high. Further, the vulnerability assessment considered a conservative level (25% migrants reporting accessing sex workers) of risk behavior among migrants from Nepal. Considering a conservative and most commonly reported risk behavior of 25% of the migrants accessing sex workers in India, there were 183,243 to 443,447 migrants from Nepal who were at the risk of HIV infection (Table 6).

#### HIV risk index of different districts

HIV risk index has been constructed for different districts of Nepal using the projected migration from Nepal to India, (particularly Mumbai, Delhi and Kolkata where HIV is considered to be high), proportion of migrant accessing sex workers, and the average HIV prevalence among sex workers in these locations.

#### TABLE 7 Estimated vulnerable migrants with 25% reported risk behavior

		ali out-migrants in lia 2010	with 25% repor	migrants – 2010 ting sex with FSWs in India
	Min	Min Max Mi		Max
East	83,790	2,02,772	20,948	50,693
Central	79,025	1,91,241	19,756	47,810
Western	3,27,481	7,92,504	81,870	1,98,126
Mid Western	1,11,997	2,71,033	27,999	67,758
Far Western	1,30,677	3,16,238	32,669	79,060
Total	7,32,970	17,73,787	1,83,243	4,43,447

About 92% of the migrants from Nepal came from 44 districts spread across different regions. However, only fifteen districts contributed more than half of all the migrants from Nepal. These districts were located mainly in the Western region (8), Far West (6) and Mid West (1). Based on the data on destination locations of migrants from Nepal in India, the number of migrants in Mumbai, Delhi, Kolkata and other places were calculated. Further, based on the data of IBBS and other studies, it was considered that about 20% of the migrants from Nepal accessed sex workers in India. Finally, the number of migrants in a particular location was multiplied by the number of HIV prevalence among sex workers in that location to arrive at an index (termed as 'calculated index' in the table below). HIV prevalence numbers used for calculation were 16 for Mumbai, 3 for Delhi, 4 for Kolkata, and 2.5 for other locations. Subsequently, calculated index of each district was divided by the total index to get a proportion of HIV risk index for a particular district, thus, providing a relative HIV risk of different districts of Nepal due to migration. Districts with high number of migrants in locations where HIV

prevalence among sex workers was high (such as Mumbai) had higher HIV risk index as indicated in the following table (Table 7).

As evident in the table, about one-third of the overall HIV risk among migrants from Nepal existed in six districts of Western region (Gulmi, Syngja, Baglung, Nawalparashi, Argakhanchi, and Palpa) and Achham in the Far West. Incidentally, these districts represent also represent about one-third of the migrant population from Nepal (240,633 out of 732,970). This calls for greater focus on the Western region while addressing the risk of HIV among migrant population. Other important districts with high HIV risk index in the Far West are Kailali, Baitadi, Doti, Bathang, and Kanchanpur. Other districts with high HIV risk index are Pyuthan (MW), Rupandehi (W), Tanahu (W), Surkhet (MW), Gorkha (W), Parbat (W), Dadeldhura (FW), Jhapa (E), Dang (MW), Bardiya (MW), Kaski (W), Rolpa (MW), and Morang (E). The following table provides details about the absentee population (projected to 2010), estimated migrant population at different destinations, calculated index and relative risk index (Table 7).

District	Absentee to	No. of	No. of migrants in de		Risk Index	
District	India 2010	Mumbai	Delhi	Kolkata	Others	nisk liidex
Gulmi	52,252	7,587	12,309	2,864	29,492	6.95
Syangja	41,493	6,025	9,775	2,274	23,420	5.52
Baglung	30,977	6,635	4,726	566	19,050	4.86
Nawalparasi	27,753	6,801	3,919	2,026	15,008	4.74
Arghakhanchi	32,827	4,766	7,733	1,799	18,528	4.37
Achham	26,896	4,789	2,322	-	19,785	3.80
Palpa	28,434	4,128	6,698	1,558	16,049	3.78
Kailali	21,769	5,414	2,418	-	13,938	3.67

#### TABLE 8 HIV vulnerability risk index of districts in Nepal

District	Absentee to	No. of migrants in destination locations			Diels Index	
District	India 2010	Mumbai	Delhi	Kolkata	Others	Risk Index
Baitadi	15,158	6,611	671	-	7,876	3.64
Doti	19,766	4,915	2,196	-	12,655	3.34
Pyuthan	28,702	2,372	2,372	-	23,958	3.00
Bajhang	16,821	4,183	1,868	-	10,769	2.84
Kanchanpur	10,521	4,588	466	-	5,466	2.53
Rupandehi	18,320	2,956	1,115	-	14,249	2.46
Tanahu	22,626	1,221	5,387	3,304	12,713	2.30
Surkhet	12,654	3,572	1,093	-	7,989	2.29
Gorkha	16,883	2,451	3,977	925	9,529	2.25
Parbat	16,378	2,378	3,858	898	9,244	2.18
Dadeldhura	8,389	3,659	372	-	4,359	2.01
Jhapa	17,545	1,405	1,405	4,438	10,296	2.00
Dang	18,879	1,560	1,560	-	15,759	1.97
Bardiya	9,741	2,749	841	-	6,150	1.77
Kaski	13,717	1,877	2,497	376	8,968	1.75
Rolpa	15,466	1,168	1,769	-	12,529	1.58
Morang	14,987	898	898	3,103	10,088	1.56
Lamjung	10,619	1,542	2,502	582	5,994	1.41
Chitwan	11,353	1,131	2,689	1,140	6,394	1.33
Kapilvastu	9,808	1,583	597	-	7,628	1.32
Dailekh	12,102	1,000	1,000	-	10,102	1.26
Bajura	6,405	1,593	711	-	4,100	1.08
Dhading	9,722	560	2,022	710	6,430	0.97
Dhanusha	7,799	772	1,088	576	5,364	0.89
Mahottari	6,530	1,054	397	-	5,079	0.88
Sunsari	7,654	609	609	1,856	4,580	0.87
Banke	7,030	903	903	-	5,225	0.86
Darchula	4,951	1,231	550	-	3,170	0.84
Bhojpur	6,004	481	481	1,519	3,523	0.69
Ramechhap	5,904	598	302	569	4,436	0.68
Sindhupalchok	6,106	330	1,454	892	3,431	0.62
Okhaldhunga	4,356	703	265	-	3,388	0.59
Sarlahi	4,894	527	732	357	3,278	0.58
Khotang	4,669	367	367	1,034	2,901	0.52
Nuwakot	3,772	448	448	1,182	1,693	0.50
llam	4,351	348	348	1,101	2,554	0.50
Total (44 districts)	6,72,983	1,10,487	99,710	35,648	4,27,138	93.50
Other 31 districts	59,986	4,424	8,387	8,093	39,082	6.50
Grand Total	7,32,970	1,14,911	1,08,097	43,741	4,66,220	100.0

With 30-39% of the migrants from Far Western region reported to migrate to states like Maharashtra with HIV prevalence among sex workers (especially Mumbai), we estimate as high as 49,512 to 119,818 migrants from the Far West are at increased risk to HIV infection (Table 8).

#### TABLE 9 Source – destination estimates of migrants (from Nepal to India)

	Study	Source – destination of migration
1	Acharya, 2008	From Far West – 42% to Delhi; and 39% to Maharashtra West, Mid-West – 43% to Maharashtra; 16% each to UP and Gujarat
2	Dahlburg, 1994	90,000 Nepalese were estimated to work in Mumbai in 1994
3	Poudel, et. al., 2003	Doti – 50% of households had at least one migrant labor in India. Major destinations were Mumbai, Punjab, and Chennai
4	Bhattarai, 2007	Western region – Delhi (about 8,915 to 10,850 factory workers, 6,850 to 8,350 watchmen mainly from Bajura, Bajhang and Achham) Other estimation - Bajhura – 15,000 to 20,000 in Delhi as watchmen
5	SARDI, 2006	65,000 Nepali migrants in Delhi
6	CARE, 2010	All Nepal – 24,000 to 26,000 in Delhi (Far West: Achham & Kanchanpur – 6,000 to 7,000 in Delhi) Border check post estimation: 21% from Achham and 23% from Kanchanpur – heading to Delhi 30% from Achham – heading to Mumbai 49% from Achham, 74% from Kanchanpur & 45% from other district – heading to various places in India
7	New Era/ FHI, 2002	Kailali district – 36% expressed intention to go to Maharashtra next time
8	FHI, 2002	Nepal – More than 5,000
9	FHI, 2004	Among 120 participants - about 20% were from Achham followed by some from Surkhet (9%), Nawalparashi (9%), Doti (8%), Kailali (7%), Kaski (7%), Palpa (7%), and Syngja (7%)
10	CARE, 2010	30,000 to 40,000 mapped in Mumbai (15,000 to 20,000 from Achham, 2,500 to 4,000 from Kanchanpur)
11	FHI, 2008 (IBBS, round 2)	Far West – 37% to Maharashtra, 44% to Delhi, 10% to Gujarat Mid to Far West – 34% to Maharashtra, 11% to Delhi, 23% to Gujarat, 20% to Uttaranchal
12	SSO, 2010 (IBBS – 3rd round)	Far West – 30% to Maharashtra (Mumbai, Ratnagiri, Pune), 25% to Delhi

#### 6.5 Risk and vulnerability among Women from Nepal

The proportion of Nepali female migrants abroad was reported to be marginal (CBS, 2004). However, trafficking of Nepali women to India and a large number of Nepali sex workers in Indian brothels have been the subject of discussion in the context of HIV/AIDS and human rights violation. There have been reports of 7,000 to 12,000 Nepali girls and women being trafficked into India every year for sex work in the brothels. Further, 150,000 to 200,000 Nepali sex workers were reported to be working in Indian brothels (Silverman, et. al., 2007; Bal Kumar, et. al., 2001).<sup>50</sup> Although there were several Nepali sex workers in India, there were no systematic studies focused on estimating the size of Nepali sex workers in India. Mumbai seemed to lead in the number of Nepali sex workers in the country followed by Pune. In Mumbai and Pune, Nepali sex workers were known to operate mainly from well known brothel areas, namely, Kamathipura, Bhandup Sonapur, Turbhe store, and Bhiwandi (in Mumbai), and Budhwar Peth (in Pune). According to a local official of the State AIDS control society, there were not more than ten thousand Nepali sex workers in Mumbai and Pune put together. Further, there was no information as to what proportion of Nepali sex worker returned to their country after working in India and continued to work as sex worker. During an informal discussion with Nepali sex workers in Bhandup, Sonapur in Mumbai, it was identified that about 10-15% sex workers returned to Nepal.

<sup>&</sup>lt;sup>50</sup> Bal Kumar, K. C., Subedi, G., Gurung, Y. B. and K. P. Adhikari, (2001), Trafficking of Girls in Nepal with special reference to prostitution-A Rapid Assessment. (A case Report submitted to the international Labour Organization programme, Kathmandu: Central Department of the population studies CDSP), T.U.

## HIV/AIDS PROGRAMS AMONG NEPALI MIGRANTS

#### 7.1 Programs among migrants in Nepal

Most programmatic efforts in Nepal were reported to have been directed at the Terai and highway districts. The main strategies included raising awareness on HIV through community orientation, district information centres and peer education program, condom promotion, STI services and VCT referral as a comprehensive package. Other strategies included pre-departure orientation along with safe travel kits (containing information leaflets, condoms, antiseptic cream), and integrating education on HIV and AIDS into the training programs of manpower recruitment organizations.

It is believed that a better understanding and acceptance had emerged on the need for intensified prevention among migrants and their families with better quality research available to guide prevention efforts. The relatively high HIV prevalence among migrants who go to India prompted the need to expand coverage in a strategic manner to address knowledge and risk behaviors among migrants and their families. Among all the groups, the coverage of services such as reach of VCT and STI treatment remained the highest among FSW and lowest among migrants (UNGASS, 2008).<sup>51</sup>

#### 7.2 Cross-border HIV/AIDS interventions

There were very few HIV/AIDS interventions among Nepali migrants originally aimed at reaching out to migrants both in Nepal and India. A brief discussion on these efforts is presented in this section.

<sup>&</sup>lt;sup>51</sup> UNGASS, (2008), UNGASS Country Progress Report – Nepal. January, 2008.

#### Reaching hard-to-reach migrants by letters: HIV/AIDS awareness program in Nepal

This program created opportunities for sending HIV/AIDS-related messages to the migrants in India, and encouraging them to practice safer sex. Initially, migrants received the messages only from the program, but later from their colleagues, spouses or other family members. They discussed the messages in groups, disseminated them, and sought more knowledge at their destinations. These findings indicated that using letters could be an effective way to reach inaccessible migrants at their destinations, and help them to improve their HIV/AIDSrelated knowledge, adopt safer sex practices.

#### Using local resources to fight HIV/AIDS in Nepal

General Welfare Pratisthan (GWP), a nongovernmental organization based in Kathmandu, is focused upon improving health, education, and the environment since its inception in 1991. The organization was wholly funded by General Paper Industry, a private, family-owned company which produced paper products and packaging materials from recycled paper and cloth materials. The first of several AIDS programs launched by GWP was an HIV/ AIDS information and condom distribution project at the police post on the Tribhuwan Highway at Thankot. GWP built a weatherproof building for the police and an adjacent post for the organization's outreach staff from which it could contact thousands of Nepalese and Indians crossing the shared border daily. In particular, the intervention was aimed at reaching a host of transient, poorly informed transport workers with AIDS prevention messages.

The program success has led to the recruitment of student volunteers from twenty-three college campuses in the Kathmandu Valley to serve as motivators at the post during the school holiday, free HIV/ AIDS advertisements in at least fifty cinemas nationwide, a national essay competition for secondary school students, the development of a similar border operation in the city of Bhairahawa, and possible workplace-based AIDS prevention programs in local industries (Bhattarai, 1994).<sup>52</sup>

### Following Nepalese Workers across Borders with HIV Prevention, Care, and Treatment

**Country offices of Family Health** International in Nepal and India implemented a pioneering cross-border initiative. The Reaching Across Borders (RAB) project, funded by the UK Department for International Development (DFID), provided continuous prevention, care, and treatment services, including access to antiretroviral medicines, to Nepali migrants and their families between "source communities" in far-western Nepal and "destination sites" in India. During its three-year life, RAB exceeded targets at the source as well as at the destination sites. Almost 171,000 people were reached with prevention activities and 14,000 migrants and family members received clinical services. In addition, over 600 HIV-positive migrants were given transfer documents and a two-month supply of antiretroviral drugs, thus insuring they could move between the countries for extended periods without a break in treatment (FHI, 2010).53

RAB also offered HIV prevention messages, referrals from outreach staff, and sponsored radio programs through a Radio Group in Surkhet. *Desh Pardesh* was a weekly satellite radio broadcast targeting migrant workers

<sup>52</sup> Bhattarai, M., (1994), Using local resources to fight HIV/ AIDS in Nepal. *Aidscaptions*, 1(3):13-5.

<sup>53</sup> Family Health International, (2010), Following Nepalese workers across borders with HIV prevention, care, and treatment. http://www.fhi.org/en/CountryProfiles/Nepal/ res\_RAB\_Migrant.htm

and their families on both sides of the border with information on HIV prevention, safe sexual behavior, condom use, and services available to those with HIV and other sexually transmitted infections. Health service clinics were a part of RAB. They gave care and provided information to potential migrants in Mumbai and Delhi. Community- and homebased care teams in Nepal and HIV-positive sathis (meaning friend) in India tended to the needs of people living with HIV through referrals, treatment adherence, and—equally important—psychological and emotional support. In RAB project area IBBS among male labor migrants to India showed around 1% HIV prevalence in 2008. Among those who had worked in Mumbai or those who had sexual contact with sex workers in India the rate of HIV prevalence was about 5%.

### Nepal Yatayat Mazdoor Sangh passed a resolution on HIV/AIDS during its national congress, 2009

Nepal Yatayat Mazdoor Sangh was reported to be involved in HIV/AIDS activities for some time and was helping its members in their fight against the disease. During its national congress, the union passed a resolution on HIV/AIDS. The organization had put an HIV/AIDS awareness stall in the congress venue and decorated it with posters from the ITF and ILO Nepal country office. Trained peer educators conducted education sessions and distributed HIV/ AIDS related material to around 300 congress participants (Asif, 2009).<sup>54</sup>

### Nepali community organizations associated with migrants in India

Several Nepali community organizations were identified by the field studies

conducted by SARDI and Family Health International in Delhi and Mumbai. These organizations were predominantly of sociopolitical and cultural nature. Some of these organizations were – *Nepali Pravasi Sangh*, *Nepali Chowkidar Shramik Sangh*, *Nepali Janadhikar Suraksha Samiti*, and *Nepali Ekta Samaj*. Although all the organizations indicated that they were associated with Nepali migrants, there was no strong evidence of them assisting migrants in migration related matters. Very few single male migrants interviewed in Mumbai indicated that they knew or sought help from any of these organizations.

#### Cross-border intervention by CARE – EMPHASIS project

Enhancing Mobile Populations' Access to HIV/AIDS Services, Information, and Support (EMPHASIS) is a 5-year initiative funded by the Big Lottery Fund, the largest distributor of National Lottery good cause funding in the United Kingdom. The program aimed to reduce the vulnerability of key mobile populations to HIV/AIDS along two mobility routes between Bangladesh/India and Nepal/India by delivering focused interventions at source, transit and destination points. The program also aimed to influence national and regional policies relating to safe mobility through evidence generated regionally. The project is being implemented in India, Nepal and Bangladesh along the following two routes with high rates of mobility from Achham and Kanchanpur in Western Nepal to Delhi and Mumbai in India. Similarly, migrants from Jessore and Sathkira in Bangladesh to Kolkata in West Bengal in India were also included.

<sup>54</sup> Asif, (2009), Nepal Yatayat Mazdoor Sangh passes a resolution on HIV/AIDS during its national congress. http://www.itfglobal.org/fusetalk/blog/blogpost. cfm?threadid=294&catid=138

## IMPLICATIONS HIV INTERVENTION AMONG MIGRANTS IN NEPAL

As evident in literature, some efforts had been made in the past to address the risks and vulnerabilities among Nepali migrants. However, there was no sufficient documentation of these experiences focused on which strategies worked well and which did not, particularly in the context of cross-border intervention. As such there was very little documented experience of conducting HIV/AIDS intervention among migrants at the source and transit points. All along there has been greater focus on intervention at migrant destinations where it was easy to get access to them.

- Some of the recent studies revealed that only 14% of all the migrants were covered under HIV/AIDS programs in Nepal, this needed to be expanded to cover entire high risk migrant population. There was a need for a strong source place strategy to cover a large number of migrants who migrated to India on a seasonal basis.
- Both West and Far West were the hotbed of seasonal migration to India. Studies indicated that these migrants frequented sex workers and did not use condom consistently. With very limited programmatic coverage of migrants in the West (5.6%) and Far West (8.3%), effective HIV prevention among migrants would not be an easy task.
- Often strategies used for core groups were employed to address HIV risks and vulnerabilities among migrants. The migrants' risk of HIV was enhanced due to their vulnerabilities. These vulnerabilities could be related to their socio-economic background, travel, working and living

at their destination places. Therefore, there was a need for strong intervention strategy that addressed both HIV risks and vulnerabilities.

- Some of the strategies that were used in the past and were known to work (for example, reaching migrants through their spouse at source places) should be replicated. Different strategies for reaching migrants, spouse of migrants, potential migrants were required
- It was believed that Nepalese faced problems in getting ART services if they did not have ID proof. Therefore, there was a need for sensitization at various levels including national and regional program. Important states in both source and destination should be sensitized on a priority basis.
- For a seasonal migrant labor from Nepal, Mumbai and Delhi were not the only preferred places to migrate anymore. More than 50% from the West and Far West were traveling to various other places in India, including small towns like Ratnagiri in Maharashtra in search of jobs. It was possible that small towns offer better living conditions and paid equally well. Migration to various small towns had implications for the need to reach out more and more migrants at transit points instead of dispersing efforts at various locations in source and destinations.
- The vulnerabilities at the source (spousal transmission, and local sexual

networks of migrant men) and the part time presence of migrants at the source need to be addressed programmatically.

- There is a strong need for sensitizing service providers at destinations (outpatient wards of public hospitals, ART centres, etc.) on the need for providing HIV/AIDs services to the infected. Providing IDs to those who need services would go a long way in facilitating service provision.
- There was a great opportunity for transit intervention among migrants with most migrations occurring along known routes. Programs could utilize and expand pre-departure orientation and counseling on arrival.
- Migrant interventions should be taken up on equal footing in comparison to core group interventions (such as, sex workers) with all components including HIV prevention, care and support for seasonal and long term migrants.
- It is very essential to link HIV/AIDS programs at source, transit, and destinations for migrant interventions to be successful.
- At destinations there was a poor connection between socio-cultural organization of Nepali migrant population and seasonal migrants. Efforts should be made to build the capacity of these organization in providing HIV/AIDS services to the recent migrants.

The Joint United Nations Programme on HIV/AIDS (UNAIDS) brings together ten UN agencies in a common effort to fight the epidemic: the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Food Programme (WFP), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the United Nations Office on Drugs and Crime (UNODC), the International Labour Organization (ILO), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO), and the World Bank.

UNAIDS, as a cosponsored programme, unites the responses to the epidemic of its ten cosponsoring organizations and supplements these efforts with special initiatives. Its purpose is to lead and assist an expansion of the international response to HIV/AIDS on all fronts. UNAIDS works with a broad range of partners – governmental and nongovernmental, business, scientifi c and lay – to share knowledge, skills and best practices across boundaries.



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