

PERCEIVED SEXUAL RISK BEHAVIOUR OF HIV/AIDS AMONG MEN MIGRANT WORKERS IN MUMBAI

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ABSTRACT

Globally, the epidemiology of HIV/AIDS is closely linked to the process of migration and Migrant men in their active age are more vulnerable for HIV infection because as majority of them migrate leaving their families in search of livelihood in the same way Andhra Pradesh is one of the most HIV prevalence state with high out migration. Generally as social control sexual relationships are at home often limited but in migrant communities, often possible. So it becomes essential to understand the role of migrants in Indian context. An attempt has been made, 'to understanding the risky sexual behaviours and substance abuse of among Andhra Pradesh male migrant workers. The present is based on the qualitative data of 30 in-depth interviews collected from who migrated from Andhra Pradesh to Bhiwandi city area of Mumbai. These in-depth interviews were conducted after completing the main survey data collection, after noticing some risky sexual behaviour. Ten migrant respondents from each category, i.e, who never married, married and not staying with wife, married and staying with wife were interviewed. The study reveals that, migrants who have been staying in Bhiwandi for fairly longer duration are more likely to have sexual relations with commercial sex workers as well as other women/girls (non-CSW). Unsafe sexual habits, watching blue films, and substance use are more prevalent among migrants of all categories in the study community. Therefore, to enhance healthy sexual behaviour and reduce prevalence of substance abuse among the migrants areas government should be make concerted efforts.

KEYWORDS: Migrants, Substance Abuse, Risk Sexual Behaviour, HIV/AIDS, Andhra Pradesh

INTRODUCTION

With almost 2.5 million HIV infections, India is at the edge in developing various awareness and educational campaigns to promote HIV education among general population. However, the programs are being shifted from target population to general population, the need to understand the role of migrants has become essential to understand in Indian context. HIV/AIDS strikes most heavily in the 15-49 age groups, the very people on whom every country relies heavily for economic growth and development. The prevalence of HIV/AIDS is pronounced among some occupational groups, in which sex-workers and their clients are significant. The twin plague of HIV and AIDS certainly spreads through high-risk population to low risk population. Migrant men in their active age are more vulnerable for HIV infection and as majority of them migrate leaving their families in search of livelihood. Andhra Pradesh is one of the most HIV prevalence state with high out migration.

It is increasingly recognized that young people and migrants are sub-populations that are at significant risk of contracting and transmitting HIV. Studies of youth suggest that a large percentage of young people practise risky sexual behavior. Evidence also suggests that migrants are a group at risk of HIV as a result of their sexual behavior at their

destination points and on return to their place of origin. Understanding the sexual behavior patterns of young migrants, an underserved yet high-risk group that serves as a bridge population between high and low risk populations, will have an important bearing on the course of the epidemic. However, little is known about the situation of migrant youth in India, their knowledge of transmission and prevention of HIV or the risk behavior that makes migrants, in particular young migrants, vulnerable to HIV infection, and the policies and programmes to address them.

In India, especially South India, the epidemic is largely driven by heterosexual transmission, which accounts for more than 86% of reported infections (National AIDS Control Organization (NACO) 2003). Many have identified migration and mobility within and between states in India as a major potential risk factor for HIV transmission (Gupta and Singh 2002). However, these issues have been poorly studied and understood (World Bank 2002). It is evident that not all migrants are at equal risk of HIV/AIDS. Moreover, it is not population mobility per se that is related to HIV transmission, but the fact that mobility increases the number of sexual partners, the likelihood of unsafe sex, and the connectivity of otherwise geographically delimited/closed sexual networks (Skeldon 2000, Guest 2002). Male migrant workers leaving behind their families and spouses at their place of origin dominate internal migration in India. In recent years, there have been a few small-scale studies on single male migrant workers particularly in the industrial townships of Surat, Ahmedabad (Singh et al. 2003), and Mumbai (Gupta and Singh 2002). Young men migrate to earn money and accumulate domestic goods, and since their income is generally higher than that of those who stay at home, they become a major attraction to rural women (Gupta and Singh 2002). As a result, returning migrants may have more than one sexual partner.

Males from Andhra Pradesh migrate to most other major states in India; their most popular destinations are Karnataka, Maharashtra, Tamil Nadu, and Orissa. Andhra Pradesh ranks third nationally in the proportion of total migrants. Maharashtra and Uttar Pradesh rank first and second respectively (Registrar General of India 2001). There is a growing consensus among policymakers and program managers in Andhra Pradesh that migration could be a major contributor to the spread of HIV in the state (APSACS 2006). A recently conducted study in the southern states of India of male migrants at their place of destination found that more than 30 percent had sex with women who were not their married partner in the place of origin and about 10 percent had sex with sex workers. These results suggest that sex with sex workers is not limited to the city/town where migrant men work; rather such practices also exist in the place of origin; however, it is not known whether these men initiate such risky behaviors in the place of destination or the place of origin.

In a study conducted at an HIV-testing clinic in south India, for example, being a migrant, or having a migrant spouse was a significant risk factor for HIV-positive status [Solomon et al 2000]. In addition, data from integrated counselling and testing centres (ICTCs) in destination areas such as Thane District of Maharashtra State and Surat of Gujarat State have shown high prevalence of HIV among migrants. The HIV-positivity rate among male migrants from UP tested in Thane ICTCs was 9.1% and female migrants was 7.9%. Similarly, the male migrants from Andhra Pradesh tested in Thane ICTC had a prevalence of 23.8% and female migrants were 16.4%. Likewise, the Ganjam migrants tested in Surat ICTC also showed high HIV prevalence with 2.3% among male and 3.5% among female migrants. The high prevalence among migrants reported in ICTCs in the destination states is worrisome as it could spiral an epidemic in their places of origin, which are currently low prevalence (Saggurti, 2011). Studies have also shown that migrants per se are not at risk but it is the conditions and the environment that puts them at risk of acquiring HIV infections. Evidence from various studies has shown that over 30% reported sex with either a sex worker or non-spousal unpaid female partner in their places of destination.

A study of Ateka (2001) has revealed that, being away from their wives or partners for prolonged periods, migrants are forced to meet their psychological needs through high risk behaviour. Studies have also shown that the environment in which migrants live and work also acts as an important determinant for risk behaviour among them. Bhende (1998), in a study, has found that most of the workers live under impoverished and inhuman conditions. Working conditions are even more stressful. Productivity rather than well-being seems to be the main concern of the employers which in turn lead to the high risk behaviour among the workers. Social networks also play an important role in risk behaviour. Human beings being social create their own social networks and relationships making them more vulnerable to peer-group pressures and acts. Gupta and Singh (2002), on the basis of a study among migrant workers in Surat have found that the cultural heterogeneity of people from different areas maintains anonymity of the relationships with the realistic possibility of unsafe sex due to drunkenness or drug abuse that are known to weaken self control. Most of the behavioral studies done so far are among high-risk groups, and very little is known about the sexual behavior pattern among HIV-infected individuals. This main objective of the paper is to understand the exposure to various sex outlets and the risky behavioural traits of migrants from Andhra Pradesh.

STUDY AREA

Bhiwandi is a city, in the district of Thane, in the western state of Maharashtra, in India, located 20 km to the north-east of Mumbai and 15 km to the north-east of Thane city. The city is considered a part of the Greater Mumbai Metropolitan Agglomeration, along with Navi Mumbai. The exact location of Bhiwandi is 19.296664°N latitude and 73.063121°E longitude. It is one of the most industrialized cities of India, with one of the fastest population growth rate due to immigration from various parts of the country. The Power loom industry is the main reason for huge number of floating population.

Migrant workers especially from Uttar Pradesh, Bihar, Andhra Pradesh, Orissa, Gujarat and Rajasthan came in droves to find work at these centers. Bhiwandi became the 2nd largest power loom centre in the country after Surat city power loom. Most of the Power looms are operated in residential area. In a congested area the power looms are operated and these create a health and sanitation issue of power loom operators. Some of the major issues are as follows.

- Very less income make them compulsory for some adjustment like Living of 10 – 12 workers in 100 sqft. Room that too in shifts.
- Poor quality of food they are eating in *Bhishi*. (A common mess where monthly two times meal is available).
- Generally most of these workers are not coming with their families; this is one of the health hazards for spreading of diseases like AIDS.
- Huge no. of power loom operators are putting load on public sanitation facility as generally these are not available in the loom in which they are working.
- Twelve hours of working in loom with all fibers and dust around leads to TB and which may even spread.
- Noise pollution because of power looms.
- Fibrous solid waste generated in power loom industry is another issue of concern for solid waste management point of view.

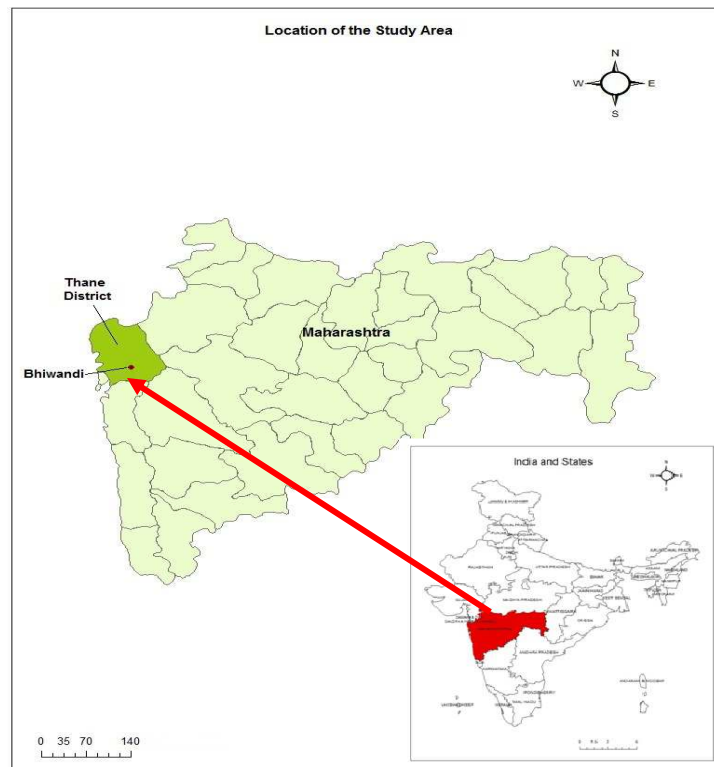


Figure: 1 Location of the Study Area: Bhiwandi

OBJECTIVES OF THE STUDY

The main objective of this study is ‘to understanding the risky sexual behaviours and substance abuse of among Andhra Pradesh male migrant workers’

DATA AND METHODOLOGY

For this study qualitative data collection was done in 2012 at two phases; pre-survey phase and post survey phase. In pre-survey phase, key informants were identified and interviewed. The key informants are the persons who have comprehensive knowledge about the migrants from Andhra Pradesh and their activities. In post survey phase, in-depth interviews were carried out with the selected migrants. Migrants who were identified during main survey, based on their risky sexual behaviours

Key Informant Interviews

In order to get macro perspectives of the life style and living arrangements of the migrant workers from Andhra Pradesh, informant interviews were conducted. These key informants are basically community level stakeholders from both working and residential places of migrants in Bhiwandi area. Ten key informants were interviewed to collect the information on where about of migrant population and their lifestyles. The key informants were, shop keeper (1), pan shop keepers (1), persons working in video parlor (1), NGO program staff (2), auto driver (1), power loom owners (2), Bar and restaurant owners (2).

In-Depth Interviews

Individual in-depth interviews were conducted with selected migrants. The migrants were identified based on their risk behaviour associated to vulnerability to HIV/STI infections. A separate guideline was canvassed to collect the in-depth information on migrants history, duration and living arrangements, frequency of consumption of alcohol, visiting

commercial sex workers, sexual relations with multiple partners, income and behaviour of expenditure, remittances etc. A total of thirty migrants; never married (10), married and not staying with wife (10), married and staying with wife (10) were interviewed.

Analysis

The data has been analyzed by using Atlas-ti software package. All the interviews were assigned to Atlas-ti package and pre defined codes are assigned to the proper text from each interview.

RESULTS AND DISCUSSIONS

Socio Demographic Characteristics

Almost all respondents are from rural areas of Andhra Pradesh, predominantly from Telangana region of Andhra Pradesh. Majority of them belong to below age 35 years. None of them completed secondary education level and do not have any agriculture land at their native place. Almost every respondent has dependents at their native place. The mean duration of migrants in Bhiwandi is 5 years. Nearly half of them have multiple migratory movements. Friends, villagers, and relatives are the main source of information about the job opportunities in Bhiwandi area. Majority of them reported that, they visit their native places at least twice in a year. The majority of them are from other backward castes. The migrants who are not married and the migrants who are married but not staying with their wives, are living in shared accommodation along with other migrants. Majority of these accommodations are in close proximity of their work place, which are not having minimal living arrangements.

SUBSTANCE ABUSE

Tobacco and Alcohol

Almost all of them work in shift basis and hence have to work in nighttime's at least fifteen days in a month. Either smoking or consuming smokeless tobacco products are commonly reported. The reported smokeless tobacco is in the form of pan with tobacco, misri, Khaini, snus, gutkha, etc.

“During this period I picked up the habit of Gutkha, alcohol, and smoke daily, I used to have 8-10 Gutkha.”

Age 30 years, Power loom labour, married but not with wife, staying in Bhiwandi since 7 years.

Alcohol consumption is widely reported among migrants, however it is commonly reported among the unmarried and married but not staying with family. Migrants who are staying with family reported occasional drinking while others reported regular drinking. Only three migrants reported no alcohol consumption. Alcohol consumption is mainly during night times and off days along with friends or coworkers. Few of them reported that due to heavy workload and long duration in power looms makes them tired and hence consuming alcohol.

“I made friendship with two friends; they used to give me gutkha and some time liquor. When I was 18 years old I use to have gutkha and I had liquor two to three times in month only as I feared of brother that they would come to know. Because I was staying with brothers and that is why I used to have fear about watching video, eating gutkha.”

Age 23 years, Landry work, unmarried, staying in Bhiwandi since 6 years.

Exposure and Accessibility to Pornography

The easy accessibility to adult movies in bhiwandi city area, as reported majority of them watches pornography movies at least once in a month, especially on holidays. Watching adult movies along with friends is widely reported.

These are mainly after consumption of alcohol in the late evenings; the migrants are reported to go to video parlors to watch such movies. Few of them reported that, they do watch pornography material in their mobile phones.

“Yes! Near my workshop, there was Video parlor and whenever I used to get time, I use to go for movies. They screened the Hindi movies. In addition, sometimes adult movies also”

Age 28 years, Power loom labour, unmarried staying in Bhiwandi since 6 years.

“At that time, i use to watch Hindi movie and blue film in the hall. And also I used to see Blue film sometimes in the T.V also.”

Age 37 years, Power loom labour, married not wife, staying in Bhiwandi since 8 years.

“I watching blue film, sometime on mobile too.”

Age 26 years, Power loom labour, unmarried, staying in Bhiwandi since 9 years.

EXPOSURE TO SEXUAL OUTLETS

Two types of opportunities are available for sexual relations to the migrants, a well established red-light area in Bhiwandi city, and the women or girls who offer sex in exchange of cash or kind within the location of workplace.

Exposure to Commercial Sexual Outlets

Majority of migrants were aware about the red-light areas in Bhiwandi and other commercial sexual outlets. These red-light areas are mainly brothel based sex workers provide sex for cash. Few bar and restaurants are also reported as the source of commercial sexual outlets. Visiting red -light areas is commonly reported by majority of the married migrants, few in unmarried and none in case of married and living with family. The commercial sex workers charge between Rs 200/- to Rs 500/- per visit depend on the brothel head. The sexual services for whole night, they charge from 500 to 1000/- . In bar and restaurants, they charge more than 1000 for each visit.

“Now, for having sex and i goes to red light area once in two months. There sex worker did not allow sex without using condom. Now i used condom regularly while having sex. In this area HIV testing Van comes, i had tested there, and the result is negative.”

Age 22 years, Beem filling in loom, unmarried, staying in Bhiwandi since 4 years

“I use to go with my friends to drink and roam with them in red light area. I started going twice or thrice in a fifteen days and many time I use to book at night and I use to stay back there only the whole night and they the charge were Rs. 1000/- for that night. I never use to use condom when I use to have sex with sex workers or even with my wife.”

Age 35 years, Beem filling in loom, married with wife, staying in Bhiwandi since 9 years

“Since I kept my wife at his native place, I started having party’s friends as I was earning well. After party, they use to come in mood and started visiting red light area. There we (friends) use to stay for whole night and this way I was doing this for two years. I use to go to red light area two times in a month.”

Age 33 years, Loom mechanic, married not with wife, staying in Bhiwandi since 6 years

“Once I was having Rs. 2000/- so I went to beer bar, called a girl to my table, and asked her how much she will take to come with me. She told me Rs. 1500/- then I took that girl and book the room for two hours. She herself wore condom to me. I did enjoy sex with her. She likes my way of sex, she encourages me a lot, and she gave me her mobile

number, and told me to call again. I had a sex with her for three times. My wife is staying with me but I am enjoying sex with other women. My wife do not allow me to do sex the way I wanted”

Age 32 years, Construction labour, married with wife, staying in Bhiwandi since 4 years

One of my friend told that if you want good girl then let us go to beer bar. Then he took me to beer bar. He booked one girl for both of us and turn by turn, we had sex with her. I had visited six times to that beer bar.

Age 30 years, Power loom labour, married but not with wife, staying in Bhiwandi since 7 years

Exposure to Non- Commercial Sexual Relations

Few of them admitted that, they do have sexual relations with the women residing in the MIDC area and mostly working in the same locality. These relations are not commercial and exist with mutual consent. Majority of such women are also migrants from other areas and working in the locality.

“She brought beer for me. I drank that. She took her children in another room; after they slept, she came to me. I did not think that this will happen and even I was not carrying condom at that time. On that night, I had sex with her three times. Next day I left for home and after ten days, I came to Bhiwandi.”

Age 29 years, Power Loom Supervisor, Unmarried, staying in Bhiwandi since 5 years

“I use to visit one family, which is from my native village. Nearby there is one girl is staying. Gradually I developed relation with her and started talking to her over mobile. Then I told that girl that now we will go to lodge. She told I do not want to come. Then I make her agreed to come. We both went to the lodge in auto and i booked the lodge. I kissed to her cheek and then i put her on the bed and then had intercourse. This was the first sexual relation experience I had. After this, we use to meet by some reasons and had sexual intercourse twice in a month.”

Age 19 years, Beem filling in loom, unmarried, staying in Bhiwandi since 3 years

RISKY SEXUAL BEHAVIOUR

The sexual relations after alcohol consumption are reported among migrants. While returning from the work place in the late evenings, they visit bars or wine shops and after drinking alcohol, they visit sex workers in red-light areas. Such behavior is commonly observed among the migrants of unmarried and married but not living with family. The knowledge about commercial sex outlets outside the community is popularly known among single male migrants. The migrants who are staying with the family are having relatively less exposure to alcohol and almost negligible exposure to sexual outlets. The sexual relations with multiple partners, both, heterosexual and homosexual relations were reported by few of the respondents.

“When we start seeing blue films that was the first time that’s why it’s disturbed more me up to one week we have seen blue films, then one day we decided to go along with my friends to Hanuman Tekdi. I visited their first time and friend also, we were frightened. I went to sex worker and I paid her Rs. 500/- at that time. She took me inside but my penis was not erected. I was scared and sex worker gave me very bad word. I ran away from there, and then we went to our workshop. But I could not concentrate on work as that seen use to come in front of my eyes. After three days, I have decided and went alone. This time I was not that scare and I enjoyed the sex first time like anything. I started going there two to three times in a week.”

27 years, Power loom labour, married not with wife, staying in Bhiwandi since 6 years

“She used to have beer with me and whenever she drinks beer, we use to enjoy a lot in sex. Sometimes she uses to take my penis in her mouth”.

Age 28 years, Power loom labour, married not with wife, staying in Bhiwandi since 3 years

“I earn Rs 8000/- in a month and send Rs 3000/- to my family. For my living expenses I need Rs 2500/- and the remaining money I spent for smoking, pan chewing and visiting sex workers. I visit sex workers Hunuman tekhri for sexual satisfaction. I visit two sex workers there frequently and I am a regular customer for them. Almost every Sunday I visit there. For one time I have to pay Rs 200/-”.

Age 22 years, Beem filling labour, unmarried, staying in Bhiwandi since 4 years

CONSISTENT CONDOM USE

Almost all of them are aware about the usefulness Condom use widely reported during their sexual relations. However, few of them reported that they do not use condom during oral sex.

“Then one day my friend and myself went to have liquor, at that time my friend told me, come I will show you the heavens of life. He straight took me to the red light area and he only paid for me. He told me that you go and sit outside. After going inside I was confused what to do with the CSW and like that, I had sex without condom with her. Then we came out from there. Then onwards whenever I feel lack of my wife, I started going to red light are to have sex with CSW. At that time, I was not much awareness about the condom. Whenever I feel lack of my wife, and every Friday, I use to visit CSW”

Age 34 years, Power loom labour, married but not with wife, staying in Bhiwandi since 10 years

“I told her I would come next time on Friday for whole night. She told me the charge of Rs. 100/. I booked her and told her I am not enjoying with condom. Then she refused, I insisted her. I told her I will pay Rs. 100/- Then she told do you have sex with other woman? I told her not yet had sex with other woman. After hearing this, she agreed and we slept on bed. Whatever I saw in blue film, I indulge in sexual relations. I did not use condom so enjoyed a lot compare to earlier events. I had sex three times in that night and I came to workshop by 5 am.”

Age 20 years, Power loom labour, unmarried, staying in Bhiwandi since 5years

“She kissed me, I was so excited, and I kissed her. Then she told me to put condom and have sex. I thrown the condom and inserted penis in her vagina. I enjoyed a lot with her. Like this, I went there for three months.”

Age 26 years, Power loom labour, married with wife, staying in Bhiwandi since 6 years

Few incidents reported about non-use of condom with their partners, as they do believe that no risk involved in that. Non-use of condom is among the partners known to each other, mainly with the women who are staying in their places or working together at same place.

“I got friendly with one woman in our area. Whenever her husband goes for work at night, she used to phone me. I had sex with her. I used to kiss her; I enjoyed a lot of sex with her. That woman sometime takes Rs. 100/- from me. And also I had sex with many girls at brothel area. Most of the times I am not used a condom.”

Age 33 years, Power loom labour, married not with wife, staying in Bhiwandi since 3 years

“I am having sex with one woman who is 29 years old and from my native village and stays adjacent to my room. Her husband is so alcoholic. Whenever I get opportunity, then do sex with her. I do not use condom with her as she is married and I think there is no problem. She also never insisted to use condom.”

Age 28 years, Power loom labour, unmarried, staying in Bhiwandi since 7 years

The risk perception among single male migrants and never migrants is low towards the sexual transmitted infections and hence are more vulnerable. Almost all of them are aware about HIV/AIDS. The single male migrants are not having comprehensive knowledge about HIV/AIDS, STDs compared to never married migrants and migrants staying with the family.

SUMMARY AND CONCLUSIONS

Even two decades after the clinical identification of the Human Immune deficiency Virus (HIV) that causes AIDS, the health status of infected people challenges humanity. The principal mode of HIV transmission is through unprotected sexual practices, leading to a greater impact among individuals in the productive age group of 15-49 years. As sexual practices are private decisions, it makes control of the epidemic complex, with a high chance of multiple infections in the same household, leading to catastrophic social and economic consequences.

According to findings from several studies, prolonged separation from family, spouse and socio-cultural norms, together with isolation and loneliness and a sense of anonymity can lead to social and sexual practices, which make migrant and mobile workers more susceptible to exposure to HIV infection. It is this infection that is carried back to their families, the intended beneficiaries of the income from migration. Risky sexual behaviors among single male migrants are still at greater risk despite many intervention programmes at various cities and hence the greater need to understand their role in preventing the possible infections to their partners.

The study reveals that, majority of the single male migrants (married but not staying with family) have greater exposure to sexual outlets in and around the study community while the never married migrants are have only outside the community. This discussion holds very much true as regards to involvement in both the types of sexual behavior is concerned.

Those who are unmarried and staying alone or with friends are more likely to involve into such behaviors than those who are staying with family or with relatives. After getting settled in the place of destination, as the duration of settlement increases the migrants gets acquainted with various recreational avenues and one of them is avenue for sexual satisfaction. The study findings clearly justify that these migrant who have been staying in Bhiwandi for fairly longer duration i.e, above three years are more likely to have sexual relations with commercial sex workers as well as other women/girls (non-CSW).

Findings showed that unsafe sexual habits or Irregular use of condom, watching blue films, alcohol and substance use are more prevalent among migrants of all categories in the study community. Therefore, to enhance healthy sexual behaviour among the migrants areas government should made concerted efforts like...

- Counseling to reduce substance abuse
- Educate them as sensitization of people to the dangers of interfacing alcohol and sex.
- Strengthening IEC components through peer education and media

- Removal of stigma and discrimination to involved in deviant behaviour.
- Awareness raising activities on HIV/AIDS
- Behaviour Change Communication (BCC) program for helping them change their risky sexual behaviours and other preventive actions like promotion of condom use, easy access to condom
- Counseling and testing services need to be taken in the places of origin, addressing both male and female prospective.
- Strengthening the community based organizations for social services (CBOs) working particularly for targeted groups.

In addition to this, migrant workers or their labor unions also should be actively involved in these preventive programs for improving their quality of life and good working conditions.

REFERENCES

1. *Migration, Youth and HIV Risk: A Study of Young Men in Rural Jharkhand*. Author (s): Mrinalika Dhapola, Mona Sharan, Bharat Shah Reviewed work (s): Source: Economic and Political Weekly, Vol. 42, No. 48 (Dec. 1 - 7, 2007), pp. 40-47.
2. *National AIDS Control Organization (NACO) (2003) Revised Operational Guidelines for Establishing Voluntary Counseling and Testing Centers*, National AIDS Control Organization, Government of India, Ministry of Health and Family Welfare, New Delhi, India.
3. Gupta, K. and Singh, S. K. (2002) *Social networking, knowledge of HIV/Aids and risk-taking behaviour among migrant workers*, Paper presented in the Regional Conference of IUSSP, Bangkok.
4. *World Bank (2002) Better health systems for India's poor: findings, analysis, and options*, Human Development Network, Health, Nutrition and Population Series, World Bank, Washington
5. Skeldon, R. (2000) *Population Mobility and HIV Vulnerability in South East Asia: An Assessment and Analysis* (Bangkok, Thailand: UNDP).
6. Guest, P.(2002) *Migration and the spread of HIV/AIDS*, Population Council, Bangkok, Thailand.
7. Singh, S. K., Mondol, S. and Gupta, K. (2003). *The pattern of single male migration and risk behaviour to HIV/AIDS among factory workers in Surat (Mumbai: International Institute for Population Sciences)*.
8. *Migration and HIV Transmission in Rural South India: An Ethnographic Study*. Author (s): Shiva S. Halli, James Blanchard, Dayanand G. Satihal, Stephen Moses Reviewed work(s):Source: Culture, Health & Sexuality, Vol. 9, No. 1 (Jan. - Feb., 2007), pp. 85-94
9. *Registrar General of India, 2001. Census of India: 1 Andhra Pradesh. D series (migration tables)*
10. APSACS (Andhra Pradesh State AIDS Control Society), 2006, HIV Prevention, <<http://www.apsacs.org/english/hivprevention.htm>>. Accessed 9 October 2006.
11. *Patterns and Implications of Male Migration for HIV Prevention Strategies in Andhra Pradesh*, Ravi K. Verma, Niranjana Saggurti, Madhumita Das, Saumya Rama Rao, and Anrudh Jain.

12. *Male migration and risky sexual behavior in rural India: is the place of origin critical for HIV prevention programs*; Niranjana Saggurthi*, Bidhubhusan Mahapatra¹, Suvakanta N Swain¹, Anrudh K Jain²; Saggurthi et al. BMC Public Health 2011, 11(Suppl 6):S6 <http://www.biomedcentral.com/1471-2458/11/S6/S6>
13. Solomon, S, A Ganesh, M Ekstrand et al (2000): *High HIV Seropositivity at an Anonymous Testing Site in Chennai, India: Client Profile and Trends over Time*, AIDS and Behaviour, 4(1), pp 71-81.
14. *Migrant Intervention Strategy for National AIDS Control Program IV*, Dr. Yesudan- TISS TIs from Karnataka and Maharashtra.
15. *HIV Infection, Genital Symptoms and Sexual Risk Behavior among Indian Truck Drivers from a Large Transportation Company in South India*. Annie Dude,¹ Ganesh Oruganti,² Vinod Kumar,³ Kenneth H Mayer,⁴ Vijay Yeldandi,² and John A Schneider⁵; Articles from Journal of Global Infections Diseases.
16. Ateka, G.K. 2001. *Factors in HIV/AIDS transmission in sub-Saharan Africa*. In: Bulletin of the World Health Organization, Vol. 79, No. 12, p. 1168.
17. *Bhiwandi nizam pur city municipal corporation city sanitation report-2012*; http://www.urbanindia.nic.in/programme/uwss/CSP/Draft_CSP/Bhiwandi_CSP.pdf 20-07-2014; 1:16 PM;
18. www.en.wikipedia.org/Bhiwandi/#Economy; 20-07-2014; 1:20 PM;
19. Bhende A and Jenkins C 1998 *Sexual Culture and Risk Environment of HIV/AIDS*. In: AIDS Vol. 12: 51-58.

APPENDICES

Table 1: Background Characteristics of the Respondents

Id.No	Marital Status	Age	Education	Occupation	Caste	Duration of Stay in Bhiwandi (Years)
1	1	19	9	Beem filling	OBC	3
2	1	22	7	Loom Supervisor	OBC	4
3	1	26	8	Power loom labour	OBC	9
4	1	22	9	Beem filling	OBC	4
5	1	20	5	Power loom labour	OBC	5
6	1	23	8	Landry work	OBC	6
7	1	29	6	Loom Supervisor	OBC	5
8	2	36	0	Beem filling	OBC	4
9	1	28	7	Beem filling	OBC	7
10	1	18	8	Folding cloths	OBC	1
11	1	21	9	Power loom labour	OBC	2
12	2	37	2	Power loom labour	SC	8
13	2	34	9	Power loom labour	OBC	10
14	2	30	5	Power loom labour	OBC	7
15	2	27	8	Power loom labour	OBC	6
16	2	41	5	Power loom labour	OBC	5
17	2	33	0	Power loom labour	OBC	3
18	2	37	3	Power loom labour	OBC	10
19	2	30	6	Power loom labour	SC	7
20	2	28	4	Power loom labour	OBC	3
21	3	35	5	Power loom labour	OBC	8
22	3	30	7	Power loom labour	OBC	7
23	3	33	7	Loom mechanic	SC	6
24	3	26	8	Beem filling	SC	6
25	3	30	5	Beem filling	OBC	5

Table 1: Contd.,

26	3	35	6	Beem filling	OBC	9
27	3	32	7	Loom Supervisor	OBC	4
28	3	24	8	Loom mechanic	OBC	5
29	3	32	5	Construction labour	Others	4
30	3	25	5	Power loom labour	Others	2

Note: Marital status=Unmarried-1, married but not staying with wife-2, married staying with wife-3



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