

## CHAPTER VI

### ANNOTATED BIBLIOGRAPHY

1. Rao, A; Sundaraman, R; Shrestha B (1995). Report of the study team for the assessment of the situation of HIV/AIDS on the trucking routes between Nepal, India and Bangladesh, AIDSCAP/FHI, Kathmandu.

This is the first report in Nepal about the trucking route. Following the rapid ethnographic approach, the researchers have vividly described about truckstops, brothels and border towns on the highway routes from Kathmandu to Calcutta. They have also described the behaviors of truck drivers and their assistants, and government and non government interventions both in India and Nepal. Methodology followed are review of secondary data, observation, interviews with truckers and their assistants, CSWs, consultation with local officials and FGDs with project clients. It consists of rich information regarding the behaviors of truckers related to sex seeking, substance, alcohol use and risky sex acts. The limitation of this study is a very short duration for such assessment and relatively less information about the highway routes on the Nepal side.

2. Public Health Reports (1996). Special issue on behavioral science. Journal of the US Public Health Service, vol. 111, supplement 1. Boston, USA.

This issue of the Public health report contains articles related to behavioral science in HIV prevention. Twenty-two articles by prominent researchers give a complete insight into the effectiveness of various theory based interventions such as community level programs, community networks, peer networks, role model stories, street outreach and counseling. It also includes research findings on the use of instruments for different study aspects such as quality assurance, monitoring and surveillance and measurement of costs. Most of the articles are based on the Stages of Change Model by Prochaska and DiClemente. The only limitation of this issue that I found, is that all the articles are from the USA and may not be applicable in the context of developing countries.

3. WHO/GPA (1993). Guidelines for implementing HIV/AIDS counseling. Geneva.

This is presented in the form of a manual and covers all aspects for the implementation of HIV/AIDS counseling. The intended audience are district level planners and managers of care and counseling services in developing countries. Though its primary focus is secondary prevention and hence the people living with HIV/AIDS, the implementation and evaluation process presented are equally applicable for the prevention counseling. It includes important issues on HIV/AIDS counseling such as definition, development of counseling activities, maintenance of counseling activities and evaluation in five chapters. Procedures given in special boxes and algorithms.

4. Catania, J.A.; Kegeles S.M.; Coates T.J.(1990). Towards an understanding of risk behavior: An AIDS Risk Reduction Model (ARRM). Health education quarterly, vol.17 (1): 53-72.

This report presents a stage change model for behavioral change related to risk reduction. It shows that people's effort to reduce risk have three stages; labeling, commitment and enactment, which are influenced by various social, cognitive and emotive factors. It has very clearly described each stage and their influences as well as movement from one stage to another. It shows that individuals in different stages of change require different influences to reduce risk. It is very much applicable to counseling.

5. World Health organizations (1994). An orientation to HIV/AIDS counseling, A guide for trainer. New Delhi.

The importance and place of counseling in AIDS prevention programs can not be ignored. WHO, SEARO developed this as a manual for trainers. This manual is designed to train nurses and social workers in hospitals, health centers and other welfare facilities both in governmental and non-governmental sectors. The seven modules in this manual cover all relevant information in the form of session plans as well as supplementary readings. The methodology is participatory and includes methods such as games, role plays, counseling practice and written exercises. This manual has covered contents such as goals of counseling, stages, qualities and skills of effective counselors, risk assessment and basic HIV/AIDS information.