

# Prevention of HIV/AIDS Among Migrant Workers in Thailand Project (PHAMIT): The Impact Survey 2008

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Aphichat Chamrathirong  
Wathinee Boonchalaksi



Institute for Population and Research, Mahidol University  
Puttamonthon 4 Road, Salaya, Nakhon Pathom 73170, Thailand  
Telephone: 0-2441-0201, 0-2441-9666  
Fax: 0-2441-9333  
Website: [www.ipsr.mahidol.ac.th](http://www.ipsr.mahidol.ac.th)

Institute for Population and Social Research  
Mahidol University

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Partners in the Prevention of HIV/AIDS among Migrant Workers in Thailand Project



***Prevention of HIV/AIDS among  
Migrant Workers in Thailand Project  
(PHAMIT)***

***The Impact Survey 2008***

***Aphichat Chamrathirong  
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in Thailand Project*

***under the coordination of  
The Raks Thai Foundation***

## **Prevention of HIV/AIDS among Migrant Workers in Thailand Project (PHAMIT) : The Impact Survey 2008**

Aphichat Chamratrithirong  
Wathinee Boonchalaksi

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Fax : 66 2 441-9333  
E-mail: directpr@mahidol.ac.th  
Website: www.ipsr.mahidol.ac.th

## INTRODUCTION

Thailand has experienced some degree of success in preventing uncontrolled spread of HIV, and in providing effective care for persons living with HIV/AIDS (PLHA). Nevertheless, HIV transmission is still occurring, especially among those less fortunate who migrate to seek economic opportunity. A prime example of this are the lower-income populations of some of Thailand's neighbors who come to work on fishing boats or in the fishery industry of Thailand. The vulnerability of these populations comes from their relative lack of knowledge and understanding of HIV prevention and tendency to engage in higher risk sexual behavior than when in their home communities of origin.

To address these vulnerabilities, the Prevention of HIV/AIDS among Migrant Workers in Thailand Project (PHAMIT) was conceived and implemented by the Raks Thai Foundation in collaboration with six NGO partners including: Empower Foundation, the Foundation for AIDS Rights (FAR), World Vision Foundation/Thailand, the Stella Maris Seafarers Center, the MAP Foundation, and the Pattanarak Foundation. Funding for the Project was provided by the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) with the goal to lower the incidence of HIV among foreign migrant workers in Thailand through communication strategies to reduce risk behaviors and support access from migrants to general health and reproductive health services. The Project was implemented during 2003-2008.

In order to independently assess the performance of the PHAMIT Project compared to its targets and objectives, the Raks Thai Foundation contracted with the Institute for Population and Social Research (IPSR) of Mahidol University to conduct a final Project evaluation in 2008.

IPSR would like to express its gratitude to Mr. Promboon Panitchapakdi, Executive Director of the Raks Thai Foundation for entrusting this important evaluation to the researchers of IPSR. It is our hope that the findings of this evaluation will be of benefit to the Project implementers, the PHAMIT partners in the field who will continue to deliver the interventions, and to any persons interested in conducting evaluation research of this type.

*S. Punpuing*

Associate Professor Dr. Sureporn Punpuing  
Director, Institute for Population and Social Research  
Mahidol University



## PREFACE

The Prevention of HIV/AIDS among Migrant Workers in Thailand Program known as “PHAMIT,” was funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) with the aim to reduce new HIV infection among migrant workers in Thailand. The program started in 2003 and ended in 2008.

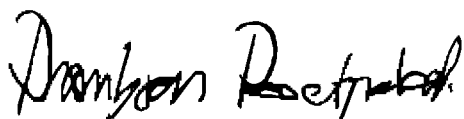
An impact evaluation study of PHAMIT assessed the work done by Raks Thai Foundation, the Principal Recipient of the GFATM grant, seven non-governmental partner organizations and the Ministry of Public Health. The study was conducted by the Institute of Population and Social Research, Mahidol University. The leader of this study was Professor Emeritus Dr. Aphichat Chamratitthirong and Associate Professor Dr. Wathinee Boonchalaksi, who had also conducted the baseline study and mid-term evaluation for the program.

The impact evaluation study focused on the quality of program interventions, the coverage of activities, and effectiveness in promoting HIV prevention related behavior change and support for migrant workers, their families and communities. The year- five evaluation data compared results with the baseline study to identify the achievements and lessons-learned from the program’s interventions. The study’s results will be used for future improvements.

The data from interviewing program managers, program staff and migrant workers clearly indicates that PHAMIT’s behavior change communication interventions are effective. The program beneficiaries are satisfied with the messages and information on preventing HIV and STIs, as well as on teaching correct condom use, and how to access health services. On the other hand, the program needs to increase program staff understanding about the development of government health service systems, and improve collaboration in planning and implementation among government, private, and non-governmental organizations.

On behalf of the PHAMIT program, I would like to thank all program staff, migrant workers and interviewees that provided significant support, information and recommendations to this impact evaluation study. I would also like to thank the research team of the Institute of Population and Social Research, Mahidol University for being key to the functioning of the evaluation process throughout, and for being dedicated to taking the time to complete this impact evaluation report. I hope that the impact evaluation study report will provide an example to others on the development and implementation of health promotion and HIV prevention among migrant workers into the future.

Best Wishes,



Promboon Panitchapakdi  
Executive Director of Raks Thai Foundation  
And Representative of “PHAMIT”:  
The Prevention of HIV/AIDS among Migrant Workers in Thailand Program

## ACKNOWLEDGEMENT

The research team who conducted the evaluation of the Prevention of HIV/AIDS among Migrant Workers in Thailand Project or PHAMIT Project would like to express their thanks to The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) for their support for the evaluation. The team would also like to thank Mr. Promboon Panitchapakdi, Executive Director of the Raks Thai Foundation for entrusting this external evaluation to the Institute for Population and Social Research (IPSR) of Mahidol University. We would like to express our gratitude to Ms. Thongphit Pinyosinwat for her help with coordination and valuable comments and suggestions regarding the data collection and the analysis.

The team is grateful to the foreign migrants who voluntarily agreed to participate in the survey to evaluate PHAMIT Project, and for sacrificing their valuable time in responding to so many questions with attention and sincerity. This cooperation helped the research team to gather high quality data on current knowledge and behavior related to prevention of AIDS in this population of migrants. These data will surely benefit program interventions to support prevention efforts in Thailand and its neighbors in the coming years so that migrants and the Thai populations that interact with them experience long-term benefits to their general and reproductive health.

The research team also thanks the staff and partner agencies in the provinces with PHAMIT implementation including Raks Thai staff in Samut Sakorn, Samut Prakan, Samut Songkram, Chanthaburi, Trad, Chumporn, Surathani, Nakorn Si Thammarat, Foundation for AIDS Rights (FAR) staff in Choburi, and Rayong, World Vision Foundation/Thailand) staff in Ranong, Phuket, Phanga, and Tak, Stella Maris Seafarers Center staff in Songkla, MAP Foundation staff in Chiang Mai and Tak. Their support and coordination throughout the data collection process enabled the research team to conduct the evaluation thoroughly and with high quality.

Importantly, the research team extends deep gratitude to the Office of Population Technical Assistance Team (OPTA), Ms. Rachitta Na Phattalung and the entire membership of the OPTA field teams.

We sincerely thank Mr. Nyi Nyi and Ms. Khaing Khaing Soe for their assistance in translating the questionnaire into Burmese and help pre-test the questionnaire in Samut Sakorn. We also thank Mr. Chourn Thou for his assistance in translating the questionnaire into Cambodia language. Thanks go to Ms. Kanya Apipornchaisakul and Ms. Waewdao Nambut for their assistance with the data tabulation, and to Mr. Phongsak Muensakda for his help in training interviewers, and to Ms. Patama Yempeka who served as the research project secretary and coordinator. The research team would like to express sincere gratitude to Mr. Anthony Bennett who assisted in the translation of the English report and to Mr. Brahm Press for the editing of the English report.

Finally, the research team would like to express our deep gratitude to the Director of IPSR, Associate Professor Dr. Sureeporn Punpuing for her fully administrative support for this evaluation research activity.

*Aphichat Chamrathirong  
Wathinee Boonchalaksi*



## **ABSTRACT**

As part of the Evaluation of the Prevention of HIV/AIDS among Migrants Workers in Thailand (PHAMIT Project), the Baseline Survey and the Impact Survey were carried out in 2004 and 2008 respectively. These evaluation studies are supported by the Raks Thai Foundation and the Global Fund to Fight AIDS, Tuberculosis, and Malaria (GFATM): The Global Fund/Program on AIDS (GPA). The sample survey of the baseline study was conducted during April – June 2004. It covered 3,374 male and female migrant workers from Myanmar and Cambodia. The sample represents the total target populations in the 22 provinces/sites of the PHAMIT Project. The population is based on the registered and estimated migrant workers as documented in the “Statistical Data of Irregular Migrant Worker Registration under the Resolution of the Cabinet 2001” and the “Estimates of Undocumented Marine Fisheries” by the Raks Thai Foundation. As for the impact survey in 2008, the same sampling procedure and sample size were employed in order that the comparison before and after the five-year project intervention can be made.

In both surveys, the selection of sites, nationality and by major occupational group was undertaken using a stratified sampling design and PPS method of selection of provinces for each of the stratified groups. At the provincial level, chain – referral methods, also known as snowball sampling, was used to recruit migrants from the selected migrants’ settlement quarters and occupational groups.

The baseline survey in 2004 resulted in 3,374 completed interviews, including 2,590 male and 773 female migrant workers aged 15-49. The report focuses on 2,423 migrants from Myanmar (2,026 men and 397 women) who work in the coastal provinces, 466 Cambodian migrants (428 men and 38 women) who work in the coastal provinces, and 485 migrants from Myanmar (258 men and 226 women) who work in the two inland provinces of Chiang Mai and Tak.

The impact survey in 2008 was also purposively designed to collect the comparable data of 3,387 completed interviews (2,731 male and 656 female). These cases included 2,436 migrants from Myanmar (2,045 men and 391 women) who work in the coastal provinces, 466 Cambodian migrants (428 men and 38 women) who work in the coastal provinces, and 485 migrants from Myanmar (258 men and 227 women) who work in the two inland provinces of Chiang Mai and Tak.

The investigation describes socio-economic and demographic characteristics and highlights key outcome indicators important to the PHAMIT Project. The analysis covers migrants’ knowledge of HIV/AIDS and routes of transmission, attitudes related to HIV/AIDS, sexuality and sexual partners, condom use, life skills, awareness of right of access to health services, use of contraceptive methods, reproductive health status and access to services. The baseline and the impact surveys can describe changes in the situation at the beginning of the PHAMIT Project and after its comprehensive implementation programs had been going for five years during 2004-2008.

The majority of migrants in the coastal provinces work in the fishery industry as seafarers (all men) or fish processing labor (mostly women). In contrast, migrants in Chiang Mai and Tak have jobs in factories, agricultural areas and in market places. A large proportion of migrants does not have work permits and are considered illegal migrant workers. This is

especially true for male migrants particularly in 2008. In 2004 migrant wages range only from 100 to 150 baht per day, much lower than the Thai minimum wage. However, in 2008 male migrants from Myanmar working in the coastal provinces earned much more. The majority of them earned 200-300 baht per day.

Most of migrants from Myanmar have been moving to Thailand for longer time, comparing to those from Cambodia. Most of the migrants, especially from Myanmar, have their relatives in Thailand and can speak Thai.

The general knowledge of HIV/AIDS, which was at a very high level in 2004, increased even more in 2008. More comprehensive knowledge on the prevention, transmission and correct conception of HIV/AIDS among migrants is found to increase consistently from 2004 to 2008. For example, percent of migrants who know the use of condom as HIV prevention rose from 79 to 89 percent and from 76 to 95 percent among seafarers and female migrant workers from Myanmar working in the coastal provinces.

In 2004, there remained certain gaps in knowledge of places of HIV testing and trust in the confidentiality of the results of testing. However in 2008, the majority of migrants knew places of HIV testing to a larger extent than in 2004, for example, among migrants in Chiang Mai and Tak 79 percent knew places of HIV testing in 2008 as compared to only 57 percent in 2004. Trust in the confidentiality of the results of testing also increased markedly during the period.

Change in behavior of condom use is an important indicator investigated in this evaluation study. Regarding condom use with regular partner in the last sexual relation, in 2004, ever use of condom with regular partner was only 1.6 percent among male migrants. But the figure increased significantly to 7 percent in 2008. However, this level of condom use among regular partners was still modest.

On the other hand, it is encouraging to find that in 2008, condom use in the last sex with non-regular partners increased markedly from 42 to 90 percent for all male migrants. Similarly, migrants also use condom more consistently when they have sex with sex workers. Ninety-one percent of migrants used condom in the last sex with sex workers in 2004 as compared to 97 percent in 2008.

Knowledge of STIs among migrants was not comprehensive in 2004. In 2008, the situation clearly improved. For example, percent of migrants from Myanmar who ever heard of STIs apart from HIV/AIDS increased manifestly from 56 to 85 or 87 percent during the period 2004-2008. Unfortunately, the proportion of migrants who were infected with STIs but did not receive correct treatment slightly emerged to 3 percent. However, during 2004-2008, many migrants especially males, came to understand more about the increased risk of contracting HIV resulting from the linkage between STIs and HIV/AIDS (from 77 to 87 percent). In general, the prevalence of STIs among males, also declined during the implementation period from about 2.7 to 1.2 percent, although the marginal increase was observed among women.

As illustrated above, the implementation of PHAMIT project on HIV prevention had generated a number of outcomes at satisfactory level. This is evident in report that a good number of information and services have been accessed by migrants. Their level of knowledge about the local NGOs providing information and services related to HIV and condom use was evidently high, approximately 77 percent, and especially high among



Cambodian migrants (93 percent) and Myanmar migrants living in Chaing Mai and Tak provinces (87 percent). Almost all of these migrants were very well familiar with the implementing agencies of PHAMIT project. For those who might not know about these agencies, at least they knew foreign staffs / migrant health volunteers for example almost as high as 60 percent of female migrants from Myanmar who were living in Chaing Mai and Tak provinces reported that they knew about foreign staffs / migrant health volunteers though they may not know about the PHAMIT implementing agencies.

Among those who knew about PHAMIT implementing agencies, many have ever used PHAMIT drop in centers or offices or clinics situated in their areas. Especially, almost 100 percent of migrants from Cambodia reported ever used the services, as well as the very high percentage of migrants from Myanmar in Chaing Mai and Tak using the service, though in less number than Cambodians. Two out of three of male migrants from Myanmar reported ever use the service. As for Myanmar migrants in the coastal provinces, females used the services more than male migrants, 71 percent and 37 percent respectively.

As mentioned above, the migrants had been served with a variety of services – including, general medical services (56 percent), counseling on HIV and AIDS (54 percent), counseling on sexually transmitted infections (45 percent), condom distribution (32 percent), treatment on sexually transmitted infections (11 percent), pre- and post-natal care for female migrants (12-14 percent).

Apart from the services mentioned, almost all of those migrants (approximately 90 percent) who knew about PHAMIT project had been provided with a set of important knowledge, mostly on HIV and AIDS prevention, living with HIV-positive people, STIs, condom use, and others. These information and knowledge had been provided both face-to-face by PHAMIT staff (90 percent) and through the project targeted media (74 percent).

Most importantly, majority of migrant workers reported that the services provided by PHAMIT projects in their communities were extensively useful for them (82 percent), and also understood that the availability of these health-related and other services were the result of PHAMIT implementation on the sites (90 percent). One - third of these migrants realized that their sexual behavior had been changed to be more safe since they received these services—for example, using condom more consistently, less changes in sexual partner—and they also believed that the changes in their behaviors were directly the results of PHAMIT project.

In conclusion, the Impact Survey 2008 and its comparison to the Baseline Survey 2004 have provided a comprehensive picture of the achievement of the PHAMIT implementation program. Based on the key outcome indicators investigated above, PHAMIT project, with its rigorous and well-coordinated implementation effort has successfully reached migrant worker population who had the greatest vulnerability. To a great extent, the Project has progressed toward the fulfillment of its ultimate objective of the reduction of HIV/AIDS pandemic among migrant workers and related population in Thailand and the Subregion.

## TABLE OF CONTENTS

	<b>Page</b>
<b>Introduction</b>	<b>A</b>
<b>Preface</b>	<b>B</b>
<b>Acknowledgement</b>	<b>C</b>
<b>Abstract</b>	<b>D</b>
<b>Table of Contents</b>	<b>G</b>
<b>List of Figures</b>	<b>J</b>
<b>Chapter 1 Introduction</b>	<b>1</b>
1.1 Background and rationale	1
1.2 Objectives of impact Project evaluation	2
<b>Chapter 2 Background of the PHAMIT Project</b>	<b>3</b>
2.1 Rationale for PHAMIT	3
2.2 Objectives and expected results	5
<b>Chapter 3 Methodology</b>	<b>11</b>
3.1 Target population	11
3.2 Sampling methodology and selection of respondents	11
3.3 Questionnaire development	13
3.4 Data collection	14
3.5 Data tabulation and analysis	14
<b>Chapter 4 General characteristics of the migrant workers</b>	<b>15</b>
4.1 Age and sex distribution	15
4.2 Marital status	16
4.3 Ethnicity and religion	16
4.4 Education	14
4.5 Occupation	17
4.6 Possession of a work permit	17
4.7 Duration of current employment	17
4.8 Salary and wages	18
4.9 Duration of stay in Thailand and current province	19
4.10 Migration during the past year	20
4.11 Housing and living arrangements of the migrants	20
4.12 Mixing and interaction with the local Thai community	20
<b>Chapter 5 Knowledge, opinions, attitudes regarding HIV/AIDS, condoms and STIs</b>	<b>21</b>
5.1 Knowledge, understanding, and attitudes toward HIV/AIDS	21
5.2 Level of risk for contracting/transmitting HIV	25
5.3 Knowledge, acceptance and attitude toward condoms	25
5.4 Knowledge, prevalence, and treatment of STIs	29



	<b>Page</b>
<b>Chapter 6 Migrant sexual behavior and condom use</b>	<b>33</b>
6.1 Sexual behavior	33
6.2 Age at first sex	34
6.3 Current sex partners: regular, non-regular, commercial	34
6.3.1 Regular sex partner(s)	34
6.3.2 Non-regular sex partner(s)	35
6.3.3 Commercial sex partner(s)	35
6.4 Consistency of condom use in the past 12 months with regular, non-regular and commercial sex partners	37
6.5 Access to condoms	39
6.5.1 Source of condom supply	39
6.5.2 Speed of access to condoms when needed	40
6.5.3 Ease of access to condoms each time needed	40
6.6 Factors affecting failure to use condoms	40
6.6.1 Use of alcohol or other drugs prior to sex	40
6.6.2 Preference for sex without condoms	42
6.6.3 Skill in persuading sex partner(s) to use condoms	42
<b>Chapter 7 Migrant access to general health services, family planning and reproductive health services</b>	<b>45</b>
7.1 Access to health care when ill or needing treatment	45
7.2 Sense of quality of the health care services	47
7.3 Right to access health care	48
7.4 Use of contraception	48
7.4.1 Knowledge of modern contraception	48
7.4.2 Ever use of contraception	49
7.4.3 Current use of contraception	49
7.5 Reproductive health of migrants aged 15 - 49	51
7.5.1 Size and formation of families	51
7.5.2 Birth delivery in Thailand and country of origin	52
7.5.3 Complications of delivery in Thailand	52
7.5.4 Ante-natal care for women delivering in Thailand	53
7.5.5 Post-natal care for women delivering in Thailand	53
7.5.6 Access to formal education for children	53
7.5.7 Access to health care for children	54
<b>Chapter 8 Information and knowledge about HIV/AIDS and condom use</b>	<b>55</b>
8.1 Information from general sources: TV, radio, newspaper	55
8.2 Information and knowledge on HIV/AIDS gained before migrating to Thailand	57
8.3 Sources of knowledge about becoming infected with HIV and/or STIs	57
8.4 Experience in gaining AIDS knowledge	57
8.5 Experience in gaining knowledge about condom use	58
8.6 Experience in participating in HIV/AIDS/STIs awareness campaigns or meetings	59
8.7 Ever screened for STIs	59
8.8 Knowledge of HIV test sites and experience with HIV testing	59
8.9 Knowledge of anti-retroviral drugs for treating AIDS (ARV)	61
8.1 Participation in blood donation campaign	61

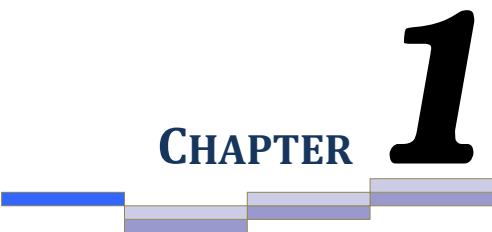
	<b>Page</b>
<b>Chapter 9 Knowledge of service outlets or NGOs in the neighborhood</b>	<b>63</b>
9.1 Knowledge of service outlets, organizations, or personnel, and knowledge of the service providers' name	63
9.2 Duration of knowledge of the organization or service provider in the neighborhood	64
9.3 Source or channel of access to knowledge about the local service provider	64
9.4 Experience of using the services of the local organization or service provider	65
9.5 Services used by the migrants	65
9.6 Services which the migrants would like to see added	66
9.7 Experience of receiving knowledge from the service provider, NGO, or personnel, and the nature of the knowledge received	66
9.8 Print media received from the local service provider or NGO	68
9.9 Services received from the local organization or NGO	68
9.10 Were services the result of the local organization or NGO?	69
9.11 Recommendations for improvement	69
9.12 Sexual behavior modification	69
<b>Chapter 10 Summary</b>	<b>73</b>
10.1 Methodology	73
10.2 General characteristics of the migrant workers	74
10.3 Knowledge, opinions, attitudes regarding HIV/AIDS, condoms and STIs	74
10.4 Migrant sexual behavior and condom use	75
10.5 Migrant access to general health services, family planning and reproductive health services	76
10.6 Information and knowledge about HIV/AIDS and condom use	78
10.7 Knowledge of service outlets or NGOs in the neighborhood	79
10.8 Recommendations	80
<b>Appendix</b>	
Appendix A List of Tables	83
Appendix B Questionnaire	229

## LIST OF FIGURES

	<b>Page</b>
<b>Figure 3.1:</b>	PHAMIT implementation areas: 22 provinces 11
<b>Figure 3.2:</b>	Sampled provinces for the impact evaluation of PHAMIT: 17 provinces 12
<b>Figure 4.1:</b>	Average daily wage of migrants by ethnicity 18
<b>Figure 5.1:</b>	Knowledge of AIDS and ever known someone who died of AIDS 22
<b>Figure 5.2:</b>	Knowledge of prevention of HIV/AIDS 23
<b>Figure 5.3:</b>	Correct knowledge of five UNGASS indicators 24
<b>Figure 5.4:</b>	Knowledge of condoms 26
<b>Figure 5.5.1:</b>	Opinion of migrant access to condoms and correct condom use 28
<b>Figure 5.5.2:</b>	Using condoms correctly for every sex episode can prevent HIV 28
<b>Figure 5.6:</b>	Believe that only men should carry condoms 29
<b>Figure 5.7:</b>	Knowledge of STIs among migrants 30
<b>Figure 6.1:</b>	Percent of migrants age 15-49 who had commercial sex in the past 12 months 36
<b>Figure 6.2:</b>	Used a condom at last sex in past year with regular, non-regular and commercial sex partners 38
<b>Figure 6.3:</b>	Used a condom during last sex with a non-regular partners and commercial sex partner by nationality 38
<b>Figure 6.4:</b>	Migrant use of alcohol and other drugs prior to sex with regular, non-regular and commercial sex partners 41
<b>Figure 7.1:</b>	Reasons for not using government services or visiting the local government hospital 46
<b>Figure 7.2:</b>	Attitudes of migrants toward convenience and satisfaction with health services 47
<b>Figure 7.3:</b>	Knowledge of migrants' rights to access health care services 48
<b>Figure 7.4:</b>	Use of modern contraception among married migrant women and method(s) used 50
<b>Figure 8.1:</b>	Migrants' access to TV, radio and newspapers in the past month 56
<b>Figure 8.2:</b>	Migrants' lack of access to TV, radio, and newspapers in the past month 56
<b>Figure 8.3:</b>	Migrants' source of knowledge about HIV and STI transmission 57
<b>Figure 9.1:</b>	Migrants' history of ever using the services at the Project drop-in center, local service provider outlets, clinics, or NGOs 65
<b>Figure 9.2:</b>	Attitude of migrants that PHAMIT Project services are beneficial for them 68
<b>Figure 9.3:</b>	Services from the agencies/Project have a positive effect on sexual behavior of the target population 70
<b>Figure 9.4:</b>	Change in sex behavior attributable to the PHAMIT Project efforts 71







# CHAPTER 1

## Introduction

### 1.1 Background and rationale

In 2002, the Thai government signed an agreement with the United Nations to develop a national plan for prevention of HIV/AIDS among foreign migrant workers in Thailand --- both legal and illegal. The origin countries of focus of the agreement were Myanmar, Cambodia, and Lao P.D.R., which all share an extensive land border with Thailand. To operationalize this agreement, Thailand requested funds from The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) to fund the project entitled The Prevention of HIV/AIDS Among Migrant Workers in Thailand, or PHAMIT Project. The Raks Thai Foundation was the principal recipient of the grant, and was joined by six implementing NGO partners including Empower Foundation, the Center for AIDS Rights (CAR), World Vision Foundation of Thailand, Stella Maris Seafarers Center, MAP Foundation, and Pattanarak Foundation.

The goal of the PHAMIT Project was to lower the incidence of HIV among foreign migrant workers in Thailand, and to reduce HIV/AIDS among migrant workers origin communities in Myanmar and Cambodia. PHAMIT used a variety of communication strategies to modify risk behaviors among migrants, increase access to general and reproductive health services, augment these services, and advocate for policies to promote the health of migrant workers in Thailand. The objectives of PHAMIT include the following: (1) increase condom use and reproductive health practices among migrant workers and related populations.; (2) make the health system favorable for migrant workers to receive suitable health prevention and treatment services.; (3) assist in the development of a supportive psychosocial environment and community strengthening for migrant workers and their families; and (4) promote a political environment at the national and inter-country level that supports migrant workers' right to health and treatment.

The evaluation survey of migrant workers' behavior at the Project's conclusion was a key aspect of assessing the overall outcomes and was intended to inform future prevention programming. To be credible, the evaluation needed to be conducted by an external agency (i.e., one that was not involved in implementation). The Institute for Population and Social Research of Mahidol University was selected to be the independent evaluator for the PHAMIT Project.

A sample survey was conducted using a questionnaire which focused on outcome and impact variables whose change in value could be attributable to PHAMIT interventions. The evaluation data could also be used to assess how well PHAMIT achieved its targets according to the agreement with the donor agency, the GFATM. This quantitative impact assessment was done by comparing the baseline survey data collected in 2004 with the data collected in 2008.

Given the amount of funds and material support provided to PHAMIT by the GFATM, it was anticipated that the target beneficiary population of migrant workers and related individuals would demonstrate improvements in behavior such as condom use, and have better access to health services. These improvements would, in turn, be reflected in favorable trends in the evaluation indicators such as percent of condom use (upward) and rates of infection with STI (downwards). These changes would also be correlated with gains in migrant workers' knowledge about risks of HIV and STIs, and gains in knowledge about health rights and access to subsidized health services. These and other such indicators should form the basis to judge the impact attributable to the PHAMIT Project.

## **1.2 Objectives of the Impact evaluation**

The objective of the final Project evaluation was to assess the outcomes and impact of PHAMIT among the target population of migrant workers from Myanmar and Cambodia from comparisons between the baseline measurements in 2004 and the follow-up survey.



# Background of the PHAMIT Project

## 2.1 Rationale for PHAMIT

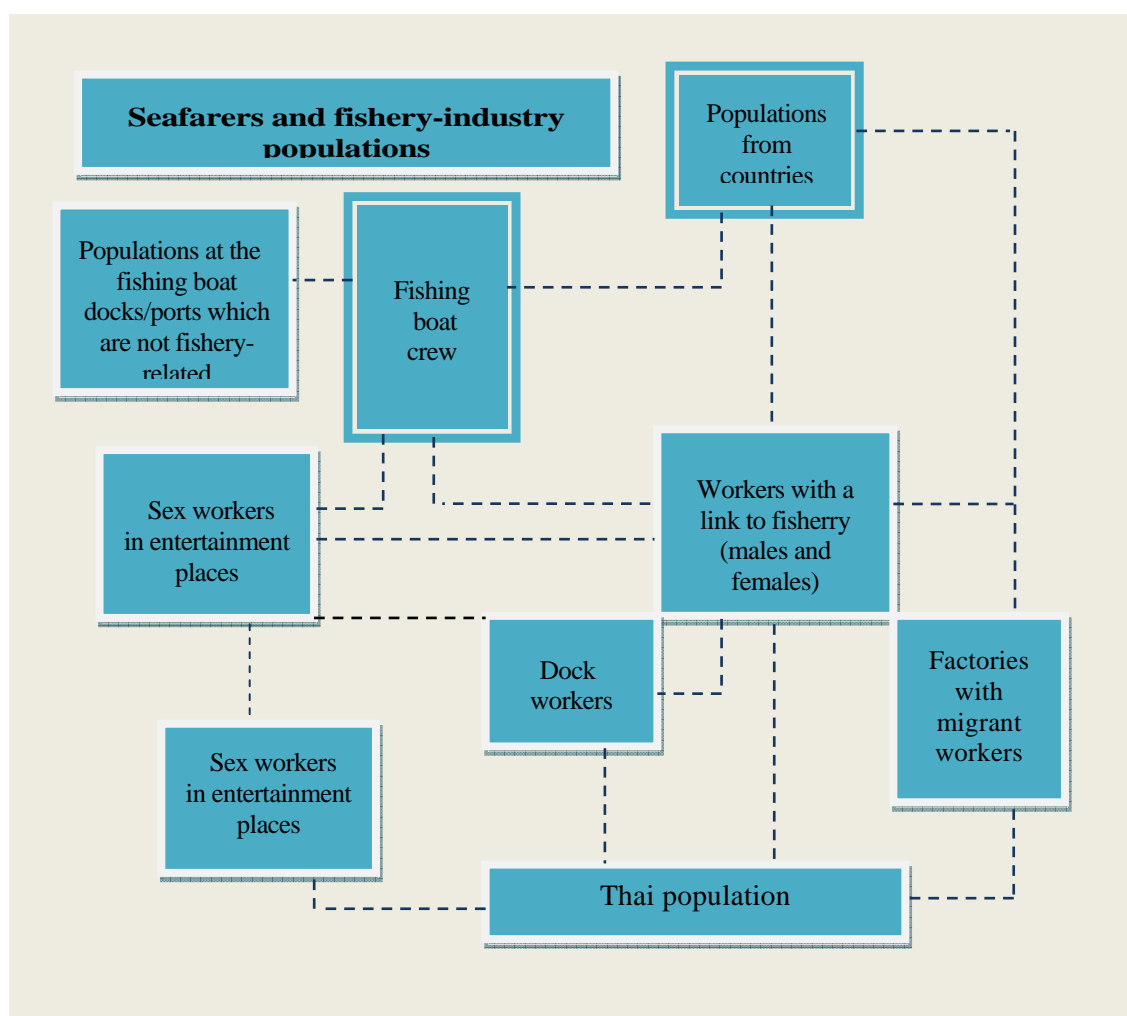
The PHAMIT Project recognized the fragile situation of the foreign migrant workers in Thailand and their vulnerability to HIV. At the time of the launch of PHAMIT, there were an estimated 2.5 million migrant workers in Thailand who had come from one of Thailand's three lower-income neighbors: Myanmar, Cambodia and Lao P.D.R. Of this total, only about 500,000 were legally registered to work in Thailand. Even though these migrant workers could receive some information about health services, there were obstacles to fully accessing these services. Some of these barriers included communication difficulty, cultural differences, and the inhibiting context of the work environment. Thus, lack of full understanding of HIV transmission dynamics combined with limited access to prevention services led to increases in HIV incidence among the population of migrant workers at a time when Thailand was experiencing declines in incidence and prevalence. For example, in Trad Province, HIV monitoring detected increased infections in migrant workers from Cambodia, and surveillance in Samut Sakorn found increased numbers of Burmese AIDS patient caseloads.

The PHAMIT Project aimed to increase access to migrant workers who might have behaviors that put them at risk of HIV including migrants working in the fisheries industry in 19 coastal provinces, and two provinces in the north and one province in the west region of Thailand that all have a border with Myanmar and a large number of migrants working in factories and agriculture.

Prevention of HIV through applied behavior change communication was the principle strategy of PHAMIT in the 22 intervention provinces, and was implemented in collaboration with the six partner NGO agencies, who had already been providing development services to migrants several years prior to joining PHAMIT. The total target number of beneficiaries of PHAMIT was 500,000 persons over five years of implementation during 2004-2008.

At the same time that the six NGO partners were promoting demand for HIV prevention services under PHAMIT, the public and private sector needed to

build capacity for delivering these services to a growing clientele of migrants. Health staff had to be trained or undergo practicums. In addition, services and information needed to be provided in the local language of the migrants. Local policy makers needed to give increased attention and importance to HIV prevention and health services for migrants. In addition, PHAMIT reviewed existing policies that influenced health and social services for migrants in order to recommend modifications to align Thai policies to be more in accordance with international standards regarding the treatment of migrants.



### Indicators of achievement

1. Incidence of HIV during the period of PHAMIT implement will decrease 35% starting from the inception of the Project (or an average of 7 percentage points per year in the population of fishing boat crew; up to 7 percentage points in other population sub-groups with a connection with the fishing boat crew).
2. Reports of sexually transmitted infections (STIs) in the prior 12 months will decline 10% among migrant laborers.
3. Sex partners of migrant laborers and sexually active adolescents will have increased knowledge of reproductive health and will increase their use of



temporary contraception by 30% (above the baseline level of contraceptive prevalence).

#### **Indicators of system change**

1. There will be government policies and guidelines for long-term implementation that are socially acceptable and conform to principles of human rights.

## **2.2 Objectives and expected results**

The objectives and expected results depend on the problem analysis because the PHAMIT Project specified a set of four priority objectives to address the final or ultimate target of reducing the prevalence of HIV.

### **Objectives**

1. Migrant laborers and related populations use condoms in every episode of sex with non-regular sex partners, and will have greater access to reproductive health services.
2. Migrant laborers have increased access to prevention and appropriate treatment.
3. There is strong psycho-social support for migrants and their families.
4. There are supportive policies and appropriate actions to advance the health and living conditions for migrant laborers.

### **Coverage**

PHAMIT was implemented in 22 provinces of Thailand. These provinces include 19 that have ocean access and had an estimated 410,796 migrant laborers working at or connected to the ports; two provinces in the north of Thailand with an estimated 126,048 migrants working in factories and agriculture; and one province in the east region of Thailand with an estimated 15,963 migrants working in the agriculture sector. (This last province was added to the PHAMIT portfolio in the 2nd year of implementation.)

PHAMIT focused primarily on migrants in the reproductive age populations, including family members and communities in the neighborhoods where the migrants lived. A secondary focus included female service workers (i.e., sex workers) in every entertainment establishment in/around the communities where the migrants lived and worked -- especially migrants working in fishing boats and related fisheries industry work sites, agriculture and factories.

In addition, PHAMIT also worked closely with gatekeeper populations such as those controlling access to the migrant laborers or to the sex workers, site bosses, establishment owners, landlords of residences where migrants lived, provincial health and hospital staff (public and private), health center and clinic staff.

## **Objective 1: Migrant laborers and related populations increase condom use**

### **Indicator of success/coverage**

1. Fishing boat crew (condom use)
  - 1.1 Migrant laborers received information and are motivated to use condoms.
  - 1.2 There are condom supply outlets in the work site and entertainment establishments.
  - 1.3 There are condoms at the work site and entertainment establishments.
  - 1.4 There are services for STI diagnosis and treatment near the work site.
2. Women, both in and outside the workforce, receive reproductive health services and maternal child health care.
  - 2.1 Woman practice voluntary contraception.
3. Women working in entertainment establishments receive information and know how to negotiate condom use.

### ***Objective 1: Nature of activities***

PHAMIT employed a set of behavior change communication (BCC) interventions to reduce the HIV risk behavior of migrants and related populations involved in the fisheries industry. Most of the migrants had not previously been exposed to any BCC activities on HIV/STI prevention since they came from poor rural areas of the countries of origin. This made communication of some of the prevention principles problematic. Thus, PHAMIT had to build upon the development work of its NGO partners who had been working with migrants for a number of years. These NGOs included World Vision of Thailand, Center for AIDS Rights, MAP Foundation, EMPOWER Foundation, Stella Maris Seafarers Center, and Pattanarak Foundation.

Some of the activities included inter-personal communication such as small training sessions among peers, using materials and media to convey knowledge, and free condom supplies. In order to access female migrant workers (such as in the factories in the fisheries industry, or in entertainment establishments) and sexually active adolescents, PHAMIT organized information sharing sessions and linkages to reproductive health services (e.g., voluntary family planning with temporary modern contraceptive methods). In addition, PHAMIT arranged activities for women working in the entertainment establishments covering a wide range of topics including HIV prevention and life skills.

PHAMIT covered the group of migrant employers and employers' associations in their role as gatekeepers of the migrants to allow access by PHAMIT to deliver the interventions. PHAMIT made a point of including the employers/bosses in the activities such as those on the topic of prevention STIs and HIV.

## **Objective 2: Develop the health system to facilitate migrants' access to and use of appropriate health care services**

### **Indicators of success/coverage**

- 2.1 Government hospitals/health centers deliver health services for migrants.
  - 2.1.1 Government health outlets provide prevention and care services for migrants.
- 2.2 Private hospitals/pharmacies participate in providing health services for migrants.

***Objective 2: Nature of activities***

In the past 4 to 5 years NGOs have played a leading role in providing HIV prevention services to migrants including such organizations as the World Vision Foundation of Thailand, Raks Thai Foundation, Center for AIDS Rights, MAP Foundation, and Pattanarak Foundation. These NGOs have an advantage in providing services since they have field offices near where the migrants live and they often employ individuals who are from the same countries as migrants' to be a link with service providers. The NGOs organize activities and are fully equipped to increase knowledge of the beneficiaries. The government does not have a policy to directly provide health services and HIV prevention for foreign migrant laborers. Thus, one of the aims of PHAMIT was to formulate policies for government adoption, especially in the area of health, both in terms of care and information dissemination for migrants that contributed to greater utilization of the health insurance that each migrant pays 1,300 baht per year for since 2001.

An important step in delivering quality services was to raise the capacity of the government service providers to deliver appropriate information and services for migrants. This included helping the health service providers understand and consider how they treat migrants, the language they use, the provision of mobile unit service for better access to/by the migrants in the workplaces, and how to support NGOs to participate in the service delivery process.

**Objective 3: Create a supportive psychosocial environment and community strengthening for migrant workers and their families****Indicators of success/coverage**

- 3.1 Children of migrants receive training in health care and life skills.
- 3.2 Migrants are aware of their rights to health

***Objective 3: Nature of activities***

PHAMIT held the principle or hypothesis that good health in migrants was related to their level of security and living conditions (social and economic). Thus, the Project provided inputs to strengthen social support systems to improve the living conditions of migrants, initially through the organization of awareness meetings and other community activities such as ways to promote savings. PHAMIT also arranged activities for local youth to build life skills and promote HIV prevention. The Project also facilitated learning activities for the children of migrants.

**Objective 4: Promote a political environment at the national and inter-country level that supports migrant workers' right to health and treatment.****Indicators of success/coverage**

- 4.1 Governments implement health policies favorable to migrants
- 4.2 Government officials, employers and media representatives that received orientation to government policies regarding health and migrant workers.

***Objective 4: Nature of activities***

PHAMIT arranged activities to encourage government personnel at the provincial level to provide health services for migrants. They became more knowledgeable about existing policies about health and rights for migrants, and they reviewed specific policies to increase services to migrants.

In Thailand, government and private agencies who work with migrants convened meetings to exchange experience and discuss challenges, obstacles, and success of past and on-going efforts to provide services to international migrant populations. The Project used media channels to improve understanding of migrants as a contributor to Thai society and economic growth.

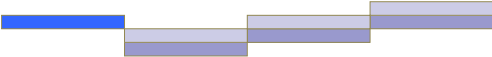
Finally, PHAMIT directed, monitored, evaluated and distilled lessons learned that are documented and can be shared and exchanged to improve knowledge and understanding of providing services to migrants among agencies or other interested parties both in Thailand or internationally.

The PHAMIT Project had the stated objective to evaluate the activities of the NGO partners who delivered services to prevent HIV/AIDS and improve reproductive health of migrants, especially those migrants working as fishing boat crew and related occupations. The evaluation took into consideration the policy environment that influenced the provision of health services and activities to prevent HIV among migrants, and specific policy trends toward registration of migrants in Thailand.



# 3

## CHAPTER



# Methodology

### **Design of the impact evaluation survey**

In order to directly access the intended beneficiaries of the PHAMIT Project in order to assess the final outcome, the research team conducted a sample survey of migrants in a way that the results could be compared with the baseline survey of migrants in 2004.

### **3.1 Target population**

The PHAMIT Project was implemented in 22 provinces of Thailand with funding from the GFATM. The intended Project beneficiaries who were also the focus of this final evaluation survey included registered and unregistered migrants from Myanmar and Cambodia. The sample was selected from small, medium and large migrant work sites.

### **3.2 Sampling methodology and selection of respondents**

The sample site locations were chosen in consideration of the different nationalities and occupations of the migrants. The selection of provinces to be included in the sample was based on probability proportional to size (PPS) of estimated migrant population residing within the Project area, covering 17 provinces.

This sample survey was a three-stage process, identical to the method used in the 2004 baseline survey. In 2004 a total of 3,374 persons were interviewed including 2,712 males and 662 females between the ages of 15 and 49. Of these, 2,423 were from Myanmar (2,026 males and 397 females) and lived/worked in coastal provinces of Thailand; 466 were from Cambodia (428 males and 38 females) who also lived/worked in coastal provinces; and 485 were from Myanmar (258 males and 227 females) and lived/worked in the two northern provinces of Chiang Mai and Tak.

For the follow-up round in 2008 the same methodology was used as in 2004. A total of 3,387 interviews were completed including 2,731 males and 656 females aged between 15 and 49. Of these 2,436 were from Myanmar (2,045 males and 391 females) who lived/worked in coastal provinces of Thailand; 466 were from Cambodia (428 males and 38 females) who also lived/worked in coastal provinces; and 485 were from Myanmar (258 males and 227 females) who lived/worked in Chiang Mai and Tak in northern Thailand.

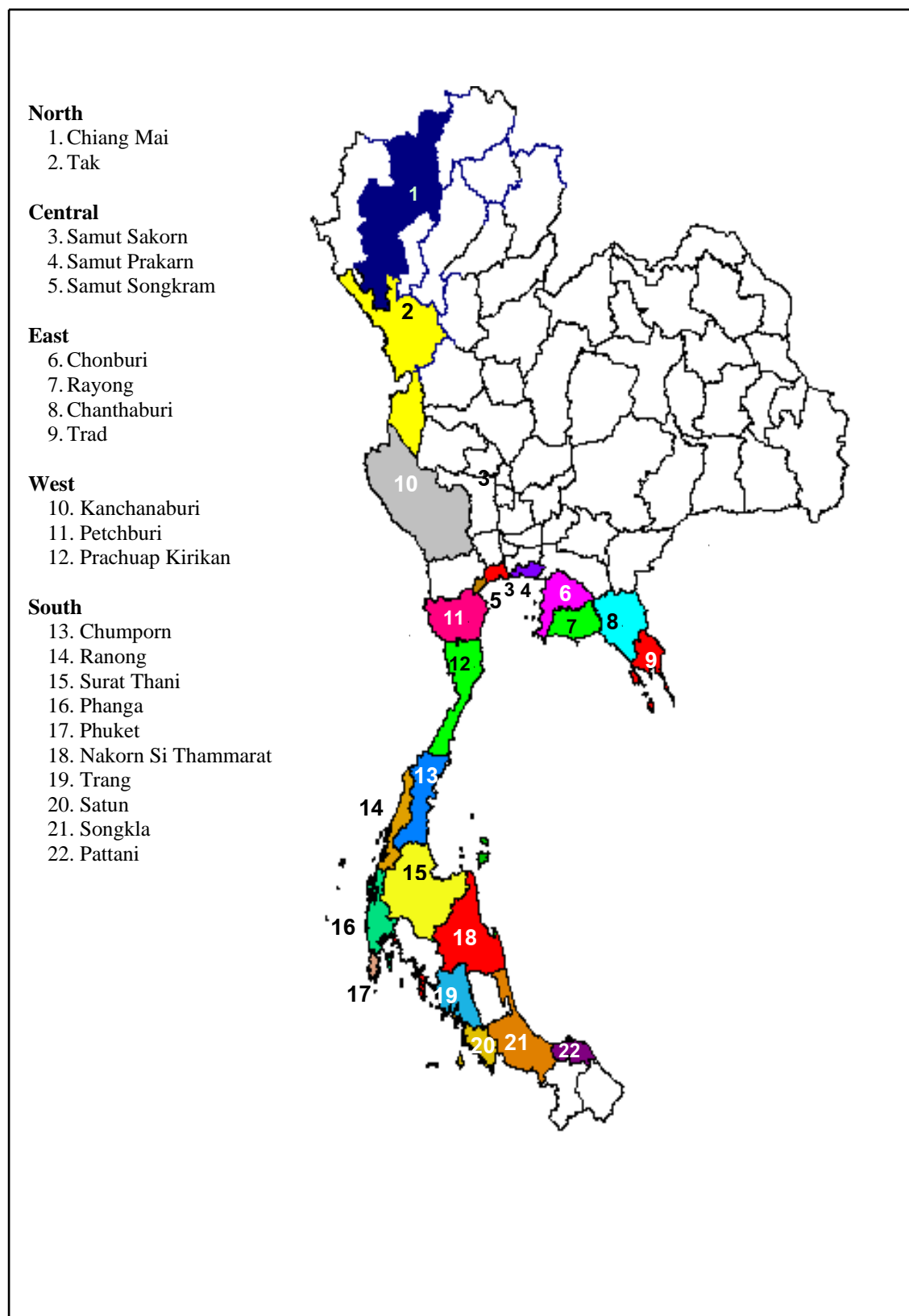
This sample survey was a three-stage process, identical to the method used in the 2004 baseline survey. The sample included migrant laborers from Myanmar who worked as fishing boat crew (1,225 persons), occupations related to the fisheries (1,211), factories (248), and other occupations (237). The sample also included migrant laborers from Cambodia who worked as fishing boat crew (332 persons), and occupations related to the fisheries (134).

In order to obtain the required sample sizes, sample quotas were set equal to those used in the 2004 baseline survey for each province, nationality, place of residence, and age group, as shown in Table 3.1 below.

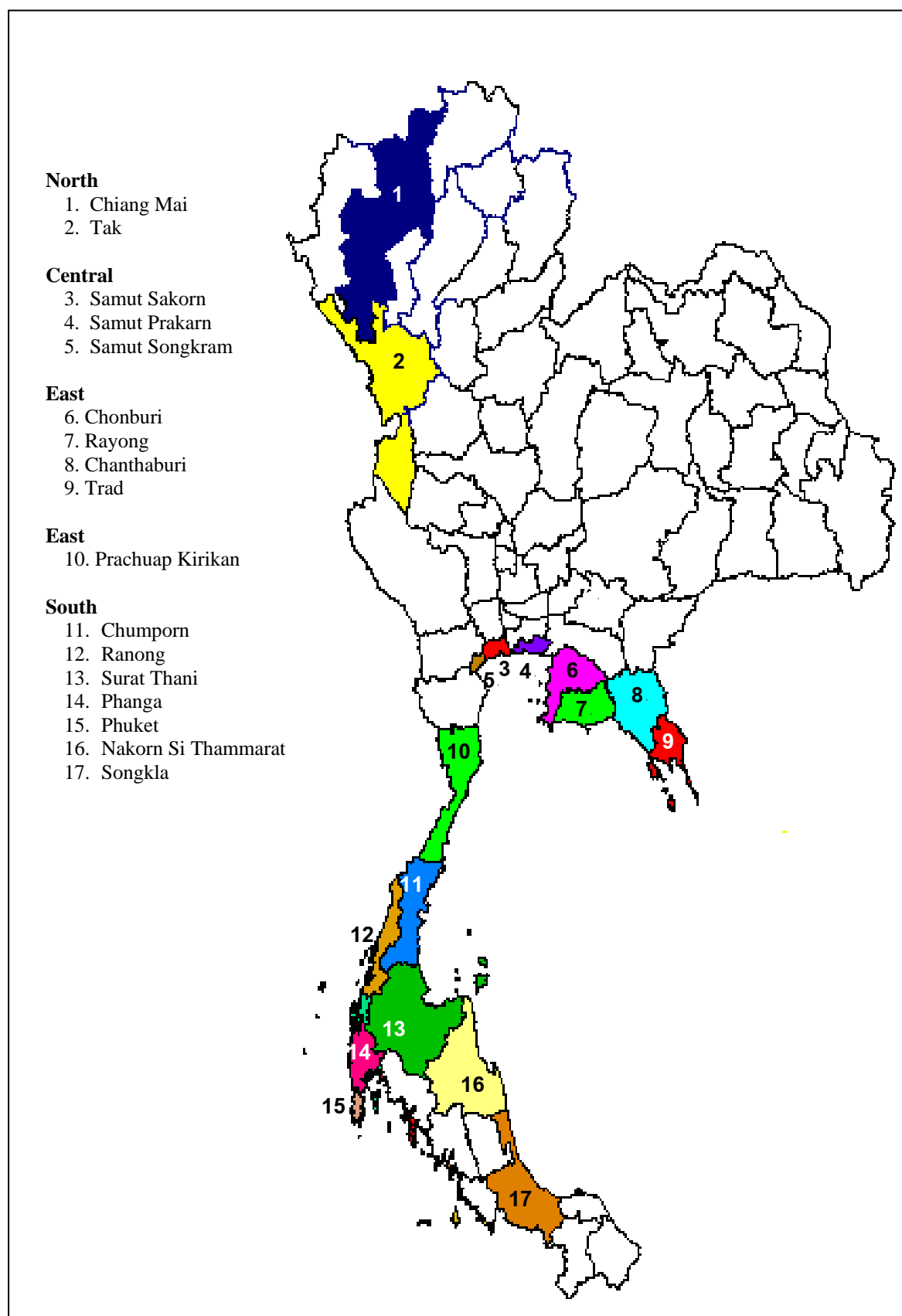
**Table 3.1:** Sample sizes of migrants successfully interviewed by 2004 baseline survey and 2008 final outcome survey by nationality and occupation

Province	Area of survey (district)		Myanmar				Cambodia		Total
			Fishing boat crew	Occupation related to fisheries	factory	other	Fishing boat crew	Occupation related to fisheries	
Samut Sakorn	Muang	2008	166	250					416
		(2004)	(157)	(247)					(404)
Samut Songkram	Muang	2008	56	242					298
		(2004)	(57)	(256)					(313)
Ranong	Muang	2008	182	128					310
		(2004)	(192)	(118)					(310)
Chonburi	Sattahip	2008		123			94	60	277
		(2004)		(120)			(102)	(52)	(274)
Rayong	Muang Klaeng	2008					60		60
		(2004)					(60)		(60)
Chanthaburi	Tha Mai	2008					85	13	98
		(2004)					(85)	(13)	(98)
Samut Prakarn	Muang; Ban Pho	2008		140					140
	Phrapradaeng	(2004)		(92)					(92)
Trad	Klong Yai	2008					93	61	154
		(2004)					(94)	(60)	(154)
Chumporn	Muang Pathiw	2008	185	115					300
		(2004)	(184)	(111)					(295)
Surat Thani	Don Sak	2008		95					95
	Muang Tha Chana	(2004)		(95)					(95)
Nakorn Si Thammarat	Khanom	2008	194						194
		(2004)	(193)						(193)
Phanga	Huay Muang	2008	193						193
	Kuraburi	(2004)	(192)						(192)
Phuket	Muang District	2008		118					118
	Thalang	(2004)		(118)					(118)
Prachuap	Muang; Pranburi	2008	194						194
	Bang Sapan	(2004)	(192)						(192)
Songkla	Muang	2008	55						55
		(2004)	(99)						(99)
Chiang Mai	Muang; Doi Saket	2008			12	113			125
	Hang Dong; Sankampaeng	(2004)			(59)	(66)			(125)
Tak	Mae Sot	2008			236	124			360
		(2004)			(111)	(249)			(360)
Total		2008	1225	1211	248	237	332	134	3387
		(2004)	(1266)	(1157)	(170)	(315)	(341)	(125)	(3374)

**Figure 3.1**  
PHAMIT implementation areas: 22 provinces



**Figure 3.2**  
Sampled provinces for the impact evaluation of PHAMIT: 17 provinces





In selecting the sample for interviews in the provinces, the research team and/or the data collection team consulted with the field staff of the organization that was implementing PHAMIT interventions in the locality. Because most of the migrants were not legally registered to work in Thailand, it was not possible to sample respondents from an official list of foreign laborers. Thus, the snowball sampling technique was used through a chain-referral method to obtain the quota of respondents.

The field data collection coordinator initiated the sampling by randomly choosing index (seed) respondents from a scattering of locations in the sample area. The location of each initial respondent was documented. This index respondent then referred the team to another potential respondent who met the selection criteria until ten or eleven individuals were selected per sub-area. The number of index cases was determined by the required number of respondents in that sampling area. Also, the index case could refer the team to someone either with similar or different Characteristics as the index case (e.g., occupation, age, etc). Also, the data collection team could select index cases with different background characteristics in order to limit the clustering effect that might occur with snowball sampling.

### **3.3 Questionnaire development**

Data were collected by conducting personal interviews with the sampled respondents using a structured questionnaire. The questionnaire was prepared in four languages; Thai, English, Burmese, and Cambodian. The questionnaire included items designed to measure the outcomes and impact of the PHAMIT Project and also included some of the international indicators from the UNGASS and GFATM tools. The final draft questionnaire was reviewed by senior staff of the PHAMIT partner organizations. The interviews were conducted by trained, experienced, multi-lingual interviewers and supervised by the field data collection coordinator. The training ensured that each interviewer fully understood the content and intent of each question, and was skilled in the techniques of encouraging complete and accurate responses. The collected data were screened for completeness and clarity in the field and again at the research headquarters

Every question and indicator used in the baseline survey was included in the impact survey in 2008. In this round however, questions were added to measure use of PHAMIT Project services and satisfaction with those services. Coding of the data and re-checking the coding for accuracy was conducted on the same day of the interview; the interviewers served as coders, while the field data collection coordinator checked the coding for accuracy and completeness. Data were further edited by using tabulation and checking programs contained within the SPSS computer package software. Data on the duration of time spent in Thailand, current residence, previous residence, and access to Project services had particular importance for the analysis in this evaluation research activity.

The questionnaire for the impact survey featured sections on socio-demographic characteristics of the migrants, knowledge of HIV transmission, routes of transmission, attitudes toward HIV/AIDS, sexual behavior, use of condoms, use of contraception, life skills, knowledge of legal rights and responsibilities, and accessing health services. Analysis of the dependent (i.e., outcome) variables

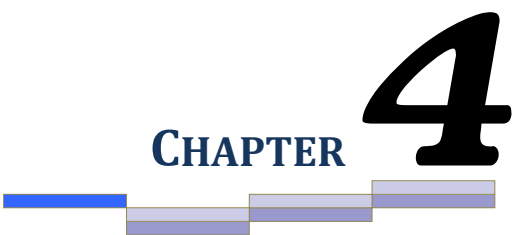
involved exploring and controlling for certain independent variables as mentioned above such as duration of stay in Thailand, knowledge of Thai language, and degree of ease in accessing project services.

### **3.4 Data collection**

During December 2007 through January 2008 the research team assembled seven field data collection teams to conduct the survey. Each field team consisted of a supervisor and four to five interviewers. The field supervisor was a full-time staff member of the Office of The Population Technical Assistance Team (OPTA), a highly experienced data collection and evaluation NGO. The interviewers included Burmese and Cambodian volunteers and persons who were familiar or assisted with this type of project. OPTA staff conducted the interviewer training in early January. Data collection began in the middle of January and was completed four months later in May 2008. The total number of respondents with complete questionnaires included 3,387 persons according to the distribution as shown above in Table 3.1.

### **3.5 Data tabulation and analysis**

Data editing, coding and computerization began in March and were completed by July 2008. Creation of the data file, including data cleaning and data tabulations were completed by the end of July. Responses for all items from all regions were assigned weights. Data analysis and preparation of the preliminary evaluation report were presented during a PHAMIT Project results review seminar in September 2008.



# CHAPTER 4

## General Characteristics of the Migrant Workers

In this chapter, data are presented on the socio-demographic and economic characteristics of the migrants. The key variables include age, sex, marital status, ethnicity, religion, education, employment, duration of employment, registration or other authorization to work in Thailand, income and wages, duration of residence in Thailand, duration of residence in current province, migration to other provinces in the past year, living quarters, degree of inter-mixing with Thais, presence of relatives in Thailand, and proficiency in the Thai language.

Table 4.1 in the appendix presents data comparing the 2004 baseline and 2008 follow-up survey, stratified by provinces with sea coast and provinces that are non-coastal. Data are also stratified by country of origin. Data are weighted to adjust for low representation of non-coastal provinces.

### 4.1 Age-sex distribution

The age distribution of the two samples (2004 and 2008) is comparable for all geographic areas and nationality. Average age of migrants was between 25 and 28 years. It is notably that Cambodian women migrants age under 20 was higher in the 2008 round than in 2004 (15% of the sample in 2004 compared with 30% in 2008). Those over 40 comprised less than 10% of the samples and, in most cases, these were women.

Table 4.1 also shows differences between provinces with a sea coast and non-coastal provinces as, in the former there are many more male than female migrants (510 males for every 100 females in 2004; 522 males for every 100 females in 2008). The male - female ratio was even more skewed for Cambodian migrants. By contrast, the sex ratio in non-coastal provinces showed only a slightly larger proportion of men than women, most of who work in factory-based jobs. These differentials are probably attributable to the specifications of the types of jobs for migrants since boat crew must be males, but factories often prefer female workers if the tasks are not too physically demanding.

## 4.2 Marital status

Data from both rounds of the survey found that most of the male migrants were single. This finding held for each geographic area. Cambodian migrants were more likely to be single (66% and 79% in 2004 and 2008 respectively). They also had a higher proportion who were widowers, divorced or separated. Fewer than 10% of the Cambodian male migrants were married in 2004, but this percent doubled in 2008. By contrast, data for the Burmese migrants show that 70% of female migrants who lived in coastal provinces were married, and had followed their husbands to find work in Thailand. In the non-coastal provinces of Chiang Mai and Tak, 54% of the female migrants were single in 2008, and the trend was decreasing for this variable toward a greater proportion being married compared with the findings in 2004. It is possible that the women were unmarried when they first migrated, but got married once in Thailand and stayed on to work for many years.

## 4.3 Ethnicity and religion

The ethnicity and religion of the migrants is, almost by definition, related to their country of origin. The Cambodian migrants in 2004 and 2008 were uniformly Cambodian, while only 60% of the migrants from Myanmar in non-coastal provinces in 2004 were Myanmar; similar to the findings in the 2008 survey. In 2004, one in four of the migrants in coastal provinces was Mon ethnicity, compared with one in five in 2008.

Approximately 8 to 14% of migrants in both non-coastal and coastal provinces were of Karen ethnicity. Fewer than 10% of migrants in coastal provinces were from Shan or other ethnic groups, whereas 19% to 26% of migrants in Chiang Mai and Tak were Shan/other ethnicity in 2004 and 2008 respectively.

Most migrants in both coastal and non-coastal provinces were Buddhist. Fewer than 10% of Cambodian migrants in 2004 were Muslims and this declined to 3% in 2008. In the Chiang Mai and Tak samples 70% and 77% were Buddhists in 2004 and 2008 respectively, followed by Christian (23% and 17%), and Muslim (7% and 5% respectively).

## 4.4 Education

There were some noteworthy differences for educational attainment among the groups of migrants. Generally, workers in the fisheries industry had lower education than those in the factories. Myanmar and Cambodian migrants in the fisheries sector had an average of 5.2 years of completed formal education in 2004; this increased to 6 years in the follow-up round. Nearly half of the Myanmar migrants in coastal provinces had only 1 to 4 years of education in 2004 while, in 2008, one-third had 1 to 4 years of education. The Myanmar migrants in the north region sample had higher education (average of 7 years). Overall, male migrants had more formal education than females.

## 4.5 Occupation

Obviously, occupation of the migrants differs by the coastal and non-coastal provincial samples. As shown in Table 4.1 most of the migrants in coastal provinces worked in the fisheries industry, and over half are fishing boat crew, while one-fourth worked in fisheries-related occupations on shore. By contrast, most of the migrants in non-coastal provinces worked in factories, followed by construction or commerce. Only a few worked in agriculture-based occupations.

Among male migrants from Myanmar in coastal provinces, 62% worked in the fisheries in 2004 compared with 60% in 2008. The proportions for female migrants from Myanmar working in fisheries in coastal provinces were 60% in both rounds of surveys. By contrast, 78% of the male Cambodian migrants were fishing boat crew, while 74% of the female Cambodian migrants worked in fisheries-related industry.

## 4.6 Possession of a work permit

Most of the migrants did not have registration to work legally in Thailand. This was particularly true for those from Cambodia. In 2004, only 1 in 5 Cambodian migrants were legally registered, and this decreased to 1 in 10 by 2008. By contrast, just over half the Myanmar migrants in 2004 were legal, but this declined to under half for the sample in coastal provinces (or about 45%) in 2008. In Chiang Mai and Tak, 55% of migrants from Myanmar were legal in 2004 and this declined slightly to 51% in 2008.

When examining legal status by sex, it was found that female Myanmar migrants in Chiang Mai and Tak were more likely to be registered than their male counterparts: 61% versus 49% in 2004 and 57% versus 49% in 2008 for females and males respectively. For Cambodian migrants, the proportions registered were the same for men and women in 2008, or about 11%.

The type of registration differed among the sub-groups. The “pink” card type of authorization increased in prominence among Myanmar migrants over the two rounds of survey. Similarly most Cambodian migrants held the “blue” card authorization in 2004, but this declined from 65% to 6% over rounds as the “pink” card authorization became more common.

## 4.7 Duration of current employment

The duration of employment of the migrants is not that long, but there are differences between the two nationalities. Migrants from Cambodia had less average duration of employment than their counterparts from Myanmar. In 2004, the Myanmar migrants had worked an average of 3.5 years compared with only 2.0 years for the Cambodians. Fully 43% of the Cambodians had worked less than one year compared with only 20% of those from Myanmar. By 2008, the duration of employment in the present worksite increased from 2.0 to 2.6 years for Cambodians, while the duration of employment among the Myanmar increased much more to 3.7 years for those in coastal provinces and to 4.6 years in non-coastal provinces. For those who had worked for longer durations, fully 30% of those from Myanmar had worked more

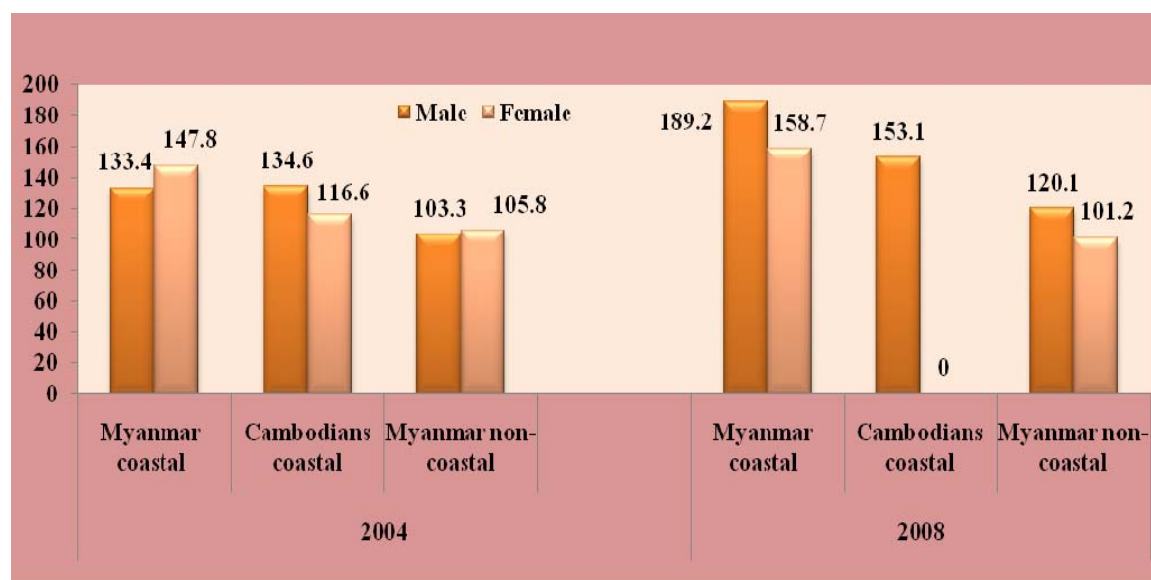
than 5 years in the place of current employment compared to only 15% of Cambodians who had worked for more than 5 years.

#### 4.8 Salary and wages

The average wage of migrants is lower than that for Thais in the same work environment. The daily wage for migrants in 2004 ranged from 100 to 140 baht; in 2008 the range was 100 to 180 baht. The difference depended on the work site; work in the fisheries tended to pay more than in the factories in coastal provinces. The Myanmar migrants who worked in coastal provinces had the highest average daily wage: 136 baht in 2004 and 179 baht in 2008. The Myanmar migrants in the non-coastal provinces had the lowest average daily wage: approximately 100 baht in both 2004 and 2008. The average daily wage for Cambodians was 133 baht and 153 baht in 2004 and 2008 respectively.

When comparing daily wage by sex, males generally made more money than females. Particularly in 2008, the male Myanmar migrants averaged about 20 to 30 baht more per day than females. For Cambodians, males averaged about 20 baht more per day than females in 2004. (Note: the number of cases of Cambodian women with reported income in 2008 was too few to make meaningful tabulations.)

**Figure 4.1**  
Average daily wage of migrants by ethnicity



“n.a.” denotes data not available

Factors affecting income include occupation, whether legally registered to work in Thailand, and Thai language proficiency. The highest paid occupation was fishing boat crew, or dock worker. Factory and agricultural occupations paid the least. Income was higher for those legally registered and able to communicate in Thai.

#### 4.9 Duration of stay in Thailand and current province

Even though many migrants had been in Thailand for quite some time they tend to move often so most migrants had not been in their current residence that long. On average, the respondents had been in Thailand for nearly six years (5.3) and had resided in the current province for 4.3 years, and been at the current work site for 3.7 years. The pattern of progressive movement may be part of the cultural adjustment process, which occurred in stages.

In addition, the flow of migrants was continuous over time. Particularly in the case of migrants from Myanmar, the flow into Thailand was continuous and increasing in size over the four years between surveys. Only one-third of the Myanmar migrants had been in Thailand more than 5 years.

For Myanmar migrants in non-coastal provinces, the average duration of residence in the current province was 4.1 years, whereas males were more mobile than women given their lower average duration of residence (4 years compared to 4.9 years respectively). The comparable figure for Cambodian migrants in coastal provinces was only an average of 2.8 years.

Despite the fact that in 2008 the average duration in the current province of residence was 4.3 years, it is only a crude measure of residence patterns. In fact, the migrants had a wide variety of durations of stay. Only about 12% had been resident for less than six months and from six months to one year, while about 12 to 14% had been resident for 1, 2, or 3 years. Thus, it can be seen that migrants who had been living in the current province not more than 3 years exceeded 50% of the sample, or about 53%. The remainder had resided in the current province for 4 or more years. Thus, it is noteworthy that there are two distinct and roughly equal settlement patterns in the population of current migrants: those who have arrived recently and those who have been resident for quite a long time. This also indicates that the movement of migrants has been constant and consistent over time.

From both rounds of survey, it can be concluded that the Cambodian migrants in the current provinces of residence arrived later than their Myanmar counterparts. This conclusion is supported by the shorter average duration of the residence of the Cambodian migrants. The percent who had been resident in the current province for at least six months declined among the Cambodians from 29% to 10% in 2004 and 2008 respectively. This reflects the pattern and flow of new arrivals from Cambodia. It should be noted that the proportion of new migrants from Burma decreased between 2004 and 2008, and this was especially true for the non-coastal provinces of Chiang Mai and Tak in which the percent of migrants who had been resident for the past six months declined from 13% to only 2% over rounds. This implies a near halt to immigration in the period before the 2008 survey.



#### **4.10 Migration during the past year**

More Myanmar migrants in coastal provinces had migrated within the past year than those in Chiang Mai and Tak, and this trend was increasing between surveys (10% to 16% from 2004 to 2008). Those in the north hardly migrated at all within the previous year.

Cambodian migrants also showed increasing movement: 2% to 17% in 2004 and 2008 respectively had moved in the past year, either within or outside the province (or outside Thailand for brief trips home).

#### **4.11 Housing and living arrangements of the migrants**

Fishing boat crew from both Myanmar and Cambodia tended to live on the boats with their crew mates. Otherwise, marital status and land-based occupation determined living arrangements to a large degree. Fully 72% of Cambodian migrants who worked on shore lived in company (or employer's) housing. Female migrants tended more to live with a spouse or in groups of other migrants in a rented room. No significant changes were observed across rounds for Cambodians. The pattern was generally the same for the Myanmar migrants in coastal provinces. In the northern provinces, the migrants were more likely to live as couples or in family units, depending on marital status. Single migrants were more likely to live in dormitory style arrangements on/near the work site.

#### **4.12 Mixing and interaction with the local Thai community**

A significant proportion of the migration to Thailand was in the form of family-based chain migration, or through a network of trusted friends. Fully 57% and 66% of Myanmar migrants in coastal provinces had a family network arrangement. Cambodians reported less family networking: 37% and 44% in 2004 and 2008 respectively. Female migrants in all groups depended more on a family network when coming to work in Thailand than did their male counterparts.

Most of the migrants could speak some Thai, given the length of time they have been in country. Accordingly, the Myanmar migrants in coastal provinces had greater Thai language proficiency than the Cambodian migrants. This was less the case in the two northern provinces perhaps because the Myanmar migrants' proximity to their home province reduced the need to use Thai (since local dialects are similar on both sides of the border).

Because most of the migrants were working in Thai illegally, this inhibited them from mixing too widely in Thai society. Until their working and living status in Thailand can be regularized, it will be difficult for the migrants to integrate more with mainstream society.

# Knowledge, Opinions, Attitudes regarding HIV/AIDS, Condoms and STIs

Knowledge of and attitudes toward HIV/AIDS and condom are an important basis for the decision to have safe sex or not. This chapter reviews data from the baseline and follow-up surveys in 2004 and 2008 respectively with a focus on knowledge and attitudes. The following chapter presents results for migrant sexual behavior and condom use.

In the first part of this chapter, data are presented on general knowledge and knowledge specific to HIV/AIDS. From the questionnaire, all respondents were asked if they had ever heard of HIV/AIDS and whether they had ever known of anyone getting infected with HIV and/or dying of AIDS. The data demonstrate the extent to which the migrants had correct understanding of basic HIV/AIDS facts and beliefs in the effectiveness of prevention and care of persons living with HIV/AIDS (PLHA). Respondents were also asked if they knew of HIV testing sites and whether they had confidence in these tests and confidentiality of results. The second section of this chapter explores the sample's sense of personal risk for HIV infection and the reasons behind these beliefs.

In the third section of this chapter, data are presented on knowledge and attitudes toward condoms. Respondents were also asked about ease of access to condom supplies and whether they carried condoms with them. The fourth section focuses on knowledge and attitudes toward sexually transmitted infections (STIs), and knowledge of how to prevent STI transmission.

The data are presented in the tables in Appendix A and are disaggregated by the 15 sampled provinces with sea access and the two non-coastal provinces in the north (Chiang Mai and Tak). Data are also segregated by country of origin (Myanmar or Cambodia).

## 5.1 Knowledge, understanding and attitudes toward HIV/AIDS

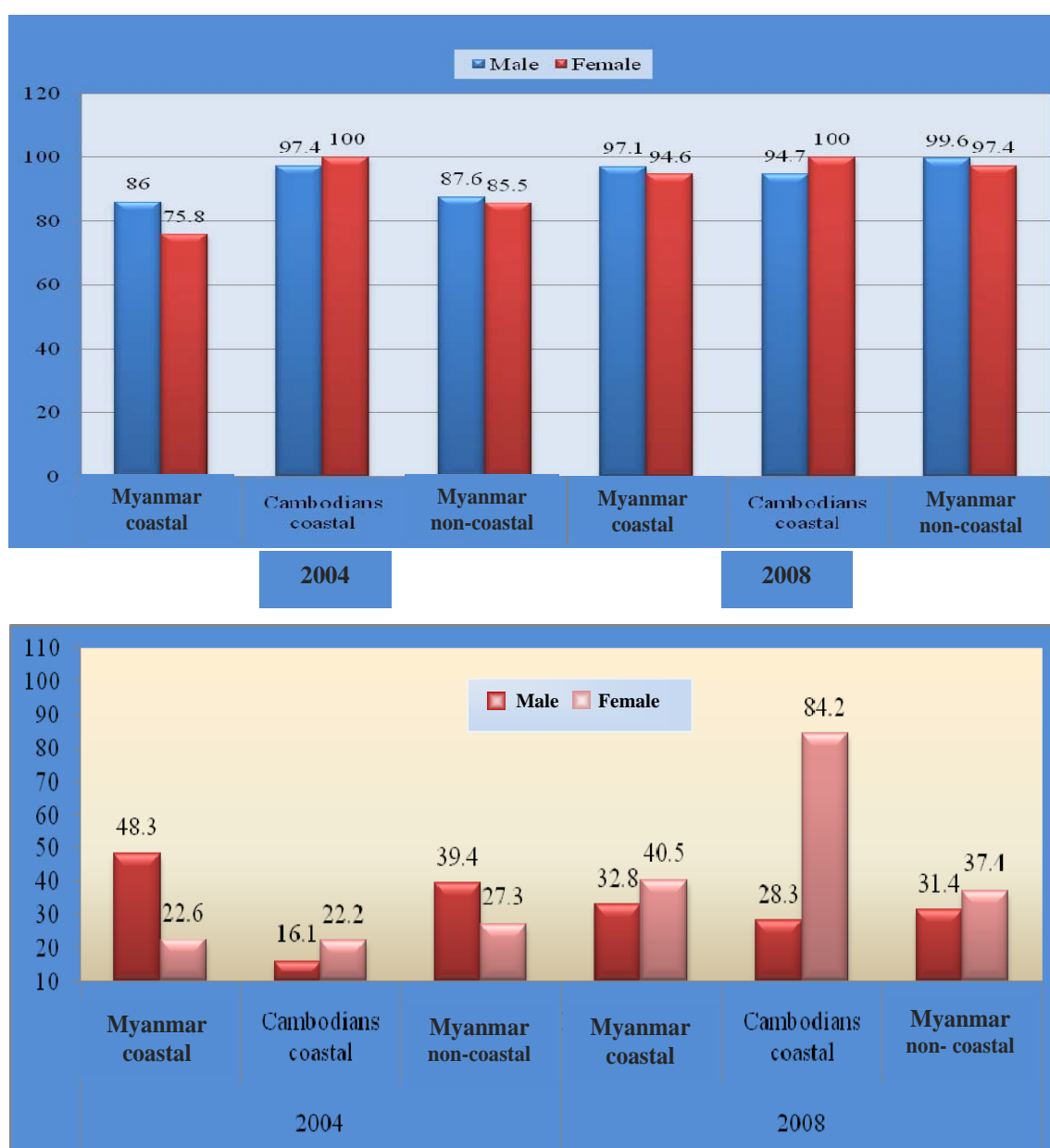
General knowledge about HIV/AIDS among the migrants was rather high for some components. Figure 5.1 shows the percent of the sample who ever heard of HIV/AIDS. In 2004, migrants from Cambodia had almost universal awareness of HIV/AIDS while the Myanmar had lower levels of awareness. However by the time of the follow-up round in 2008 nearly all the migrants, regardless of nationality or province of work had virtually total awareness (97%) of HIV/AIDS. This finding

suggests that the PHAMIT Project was able to reach the entire target population with basic awareness messages during the five years of implementation.

When asked whether they knew of someone with HIV or who had died of AIDS, the respondents in 2004 from Myanmar had greater awareness than their counterparts from Cambodia, and males had greater awareness than females (see Figure 5.1). By 2008 however, this awareness level among Myanmar women increased sharply (from 24% to 40%) and exceeded the level for Myanmar men. The increase in awareness was even greater for Cambodian women (from 22% to 84%, or nearly four-fold). These increases are possibly attributed to the PHAMIT Project which helped people to understand more what was happening in their communities. Women's greater tendency to discuss health issues could also explain the greater gains in awareness.

**Figure 5.1**

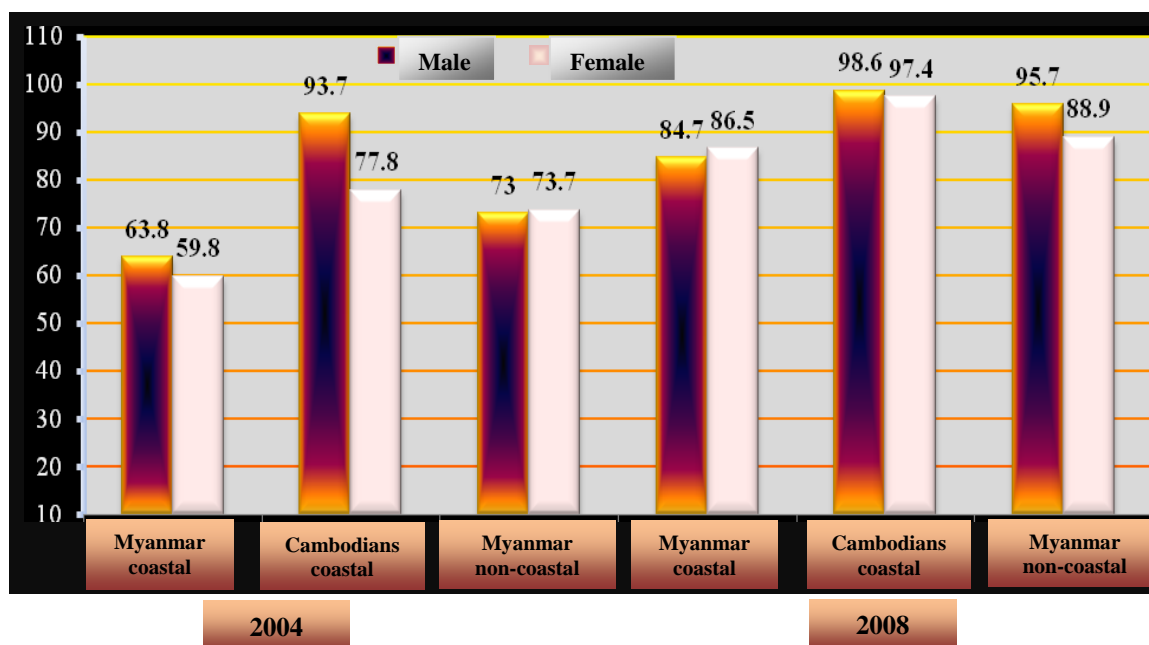
Knowledge of AIDS and ever known someone who died of AIDS



Data in Figure 5.2 compares knowledge of HIV prevention among the samples of migrants between 2004 and 2008. Cambodian men are distinguished by their higher knowledge of prevention (96% correct response compared to 64% among male Cambodians and Myanmar in 2004).

The 2008 survey found that the level of knowledge among the male Myanmar migrants increased, both in coastal and non-coastal provinces. In coastal provinces the knowledge level increased to 78% while in non-coastal provinces it increased to 95%, an impressively high level by any measure.

**Figure 5.2**  
Knowledge of prevention of HIV/AIDS



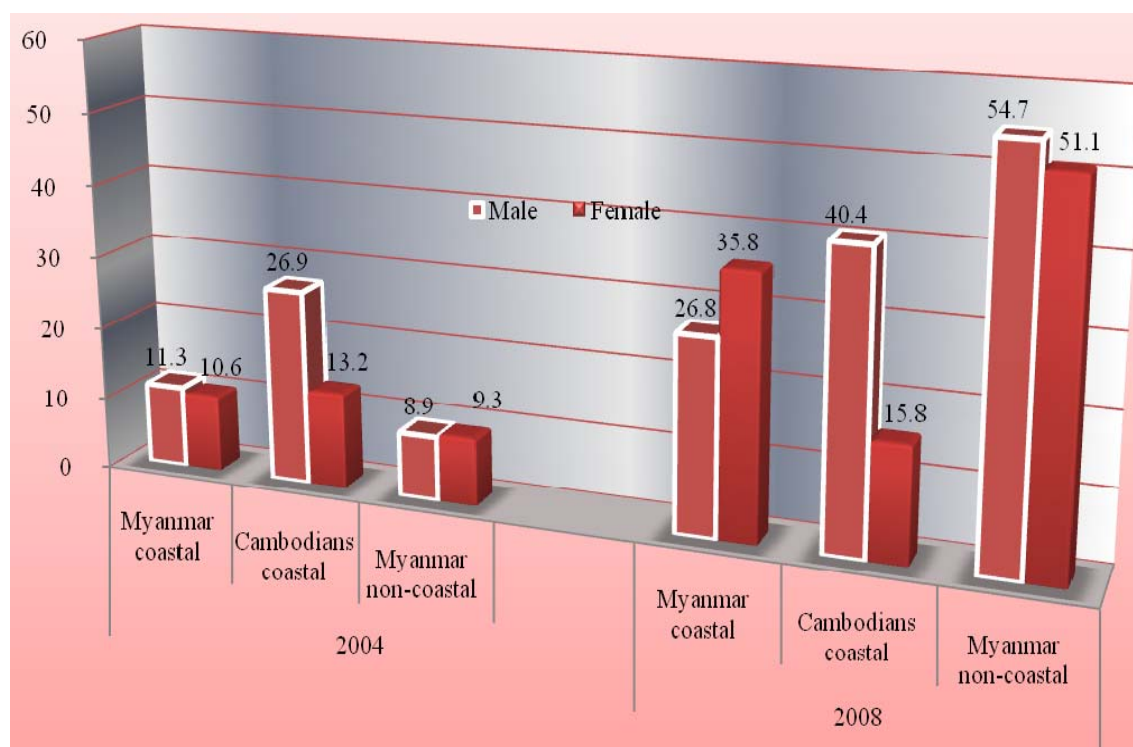
The respondents were also asked about the various routes of transmission of HIV. Table 5.1 presents data on the response. In 2004, Cambodian men had higher levels of correct response. The lowest correct response was for Myanmar women in coastal provinces. However, female Myanmar migrants improved their knowledge scores to over 90% correct by the follow-up survey in 2008, both in coastal and non-coastal provinces. Correct response for males also improved over rounds. These findings suggest that the PHAMIT Project had a significant impact on HIV/AIDS knowledge and achieved a high level of coverage.

Another section of the questionnaire explored myths and misconceptions about HIV/AIDS. In 2004 there was still considerable belief in myths about transmission (eating together with a PLHA, mosquito transmission, etc). From 40% to 50% of migrants still thought that HIV could be transmitted by mosquitoes. More Myanmar had this misconception than their Cambodian counterparts. However, by the follow-up survey round in 2008, all groups of respondents had reduced belief in false myths about HIV transmission. Especially in the case of the Cambodians, the percent

with incorrect beliefs declined from 25% to 3% by 2008. Respondents were also asked if someone who looked strong and healthy could have and transmit HIV, whether mutual fidelity could present sexually-transmitted HIV, and whether there was medicine to treat HIV/AIDS. The results from both rounds of survey indicate that there are still some gaps in HIV/AIDS knowledge among the migrants.

When examining the five UNGASS HIV knowledge indicators, gains were observed across the board (Figure 5.3). In particular, the migrants from Myanmar in the two northern provinces showed the most dramatic gains in correct knowledge of these indicators. Correct response increased from 9% to 51% and 45% for males and females respectively over rounds.

**Figure 5.3**  
Correct knowledge of five UNGASS indicators



Migrants' knowledge of places to diagnose HIV infection in the vicinity of their residences was still not optimal. As noted in the previous chapter, Cambodian migrants had spent, on average, less time in Thailand than their Myanmar counterparts. This is perhaps reflected in the lower level of awareness of HIV test sites among Cambodian migrants, compared with those from Myanmar. Both Myanmar and Cambodian migrants working in coastal provinces had limited confidence that the HIV test results would be kept confidential, with no improvement over rounds. For both the 2004 and 2008 survey rounds, respondents in Chiang Mai and Tak had the highest knowledge of HIV test sites, but only half felt the results would be kept confidential. This lack of confidence in confidentiality obviously has a

potentially negative impact on prevention activities by limiting the uptake of voluntary testing and counseling services among this vulnerable group.

## 5.2 Level of risk for contracting/transmitting HIV

From the results of the surveys in 2004 and 2008, 10% of the male Myanmar migrants in coastal provinces felt they had some risk behavior for HIV; of these 3% to 4% thought their risk was high. For females from Myanmar, 6% to 7% thought they were at risk of HIV. The results and patterns for the male Cambodian migrants are very similar to those from Myanmar for these indicators. Cambodian women showed an increase in self-risk perception over rounds. But, without cross-tabulations with the behavioral variables it is not immediately clear whether this change is due to increased accurate awareness of risk attributable to PHAMIT or a worsening of the risk environment.

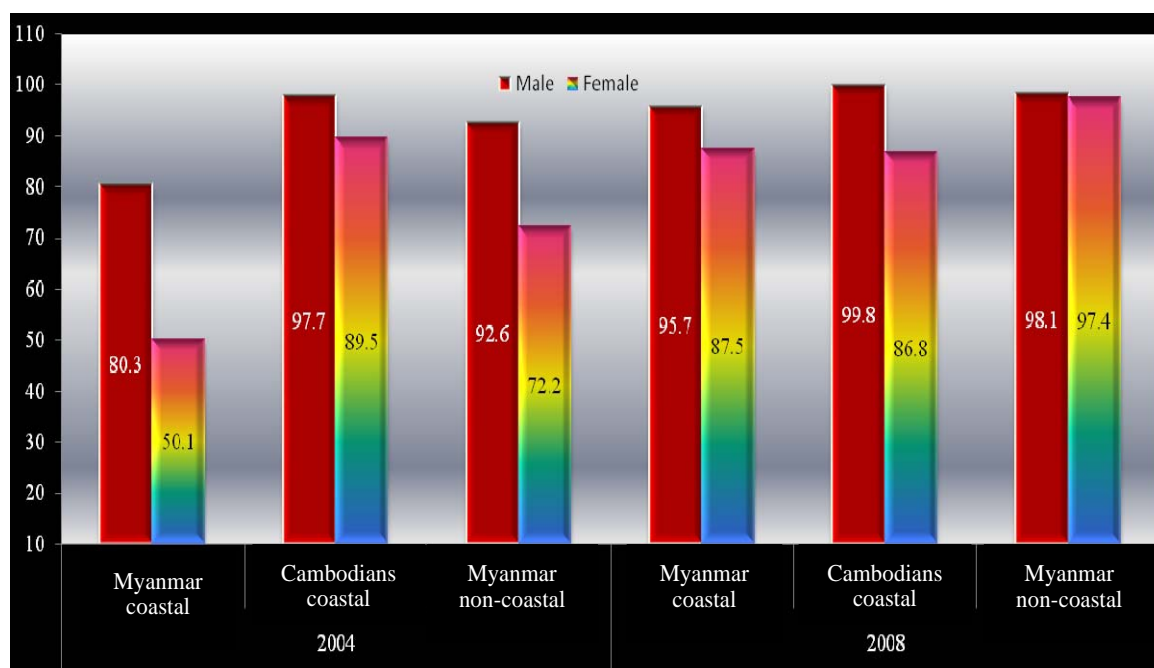
Despite the different risk environments between the coastal and northern provinces, the migrants in the sample of two northern provinces also showed increased self-risk assessment over rounds in approximately the same proportions. For Myanmar men, the sense of risk increased from zero to 11%, compared with 2% to 9% for the women. When men said they had no risk for HIV, common reasons given were “I never go to sex workers,” or “I use condoms,” or “I can trust my partner”. For female respondents, common reasons given for a sense of low/no risk for HIV included “never had sex,” and “only have had one sex partner.” Many cases said they do not have any friends or acquaintances with HIV, or that their partner does not have sex with sex workers, and thus they have little risk. Female respondents seemed to prefer to place trust in their partners rather than use condoms.

In both survey rounds, there was a significant proportion (10% to 30%) that was not sure of their HIV risk status, felt they had no risk, or wouldn’t reveal their opinion to the interviewer. This group may need even more attention since they may be in denial about their level of risk and, thus, are a more difficult group to reach with behavior change messages.

## 5.3 Knowledge, acceptance and attitude toward condoms

In the baseline survey in 2004, it was found that most migrants (especially the men) had heard of condoms (see figure 5.4). This knowledge was nearly universal among Cambodian males, and was higher for females when compared to their Myanmar counterparts. In particular, only about half of female laborers in coastal provinces had ever heard about or seen condoms. However, in the 2008 round this proportion improved considerably both for Myanmar and Cambodian migrants, male and female, and coastal and non-coastal provinces. Males in particular showed the highest gains in awareness with over 96% reporting ever heard or seen condoms. Women in coastal provinces did not reach as high a level of awareness as the men, but still showed considerable improvement from 50% in 2004 to 88% in 2008. As such, condom campaigns should continue, in order to achieve total coverage of the target population and greater focus on women in developing the knowledge and skills for safe sex. By the follow-up round in 2008, there were noticeable improvements in condom awareness for the Myanmar men and women in coastal (50% to 87% for women) and non-coastal sites.

**Figure 5.4**  
Knowledge of condoms



Among those aware of condoms, respondents were asked what the purpose of use is. As shown in Table 5.3 in Appendix A, most cited HIV prevention as the reason why someone would use condoms. Over 90% of Cambodians cited HIV prevention as a benefit of condoms in both 2004 and 2008. It is also noteworthy that the proportion that cite condoms as a STI-prevention method increased from 62% in 2004 to 93% in 2008. Similarly, Cambodians who said condoms could be used for contraception increased from 27% to 74% across rounds. Regarding migrants in coastal provinces, condom use for AIDS prevention also increased, from 79% in 2004 to 83% in 2008; but use for STI prevention is still low. The results of the 2008 round showed increased levels of awareness and equal levels of concern about HIV and other STIs, especially among Cambodians. This is a change from the 2004 round in which both Cambodian and Myanmar males were more likely to use condoms for HIV-prevention than for prevention of other STIs. This change in knowledge is probably the effect of on-going campaigns during that period which tried to emphasize the multiple protection properties of condoms. But the Cambodians seem more aware of this than their Myanmar counterparts.

Table 5.4 presents data on knowledge of source of condom supply. The respondents were able to cite many different outlets including individual distributors and health service centers (public and private). In the 2004 baseline survey, respondents most often cited the commercial sex establishment as a convenient access site for obtaining condoms, followed by drug store, government hospital, health center, private clinic, STI clinic, and others. This shows that in the past 5 years the campaigns to increase knowledge and access to condoms under the PHAMIT Project through outreach



including migrant health volunteers was an important channel for increasing migrant knowledge and access to condoms.

When examining the data for Myanmar migrants in coastal and non-coastal provinces, it is found that both groups are well aware that they can obtain condoms from the peer volunteers/workers who had been trained by local NGOs or other agencies active in their locality, such as the migrant health volunteers and PHAMIT field officers. It is also found that Myanmar migrants in the non-coastal provinces of Chiang Mai and Tak had higher awareness of this service than their counterparts in coastal provinces. Regarding the Cambodian migrants, the 2008 round survey found that this population preferred to access condoms from those sources mentioned above, similar to the Myanmar respondents. Especially for the Cambodian women, who were more aware that they could obtain condoms from the migrant health volunteer and/or worker than the men (43.4%).

However, by 2008, many respondents cited (Project) volunteers, migrant health workers, peers who had participated in training events, and local NGOs in the neighborhood, as distribution points in addition to the points cited in the baseline. There was slightly higher perceived access to condoms through PHAMIT Project outlets among the Myanmar migrants in Chiang Mai and Tak, when compared to their counterparts in the coastal provinces. Cambodian women generally had reasonably good awareness of condom access through Project volunteers and migrant health workers (43.4%). Concerning knowledge of condom sources, the data show clearly that the migrant health volunteer/worker played an important role in improving awareness of the various sources, including themselves.

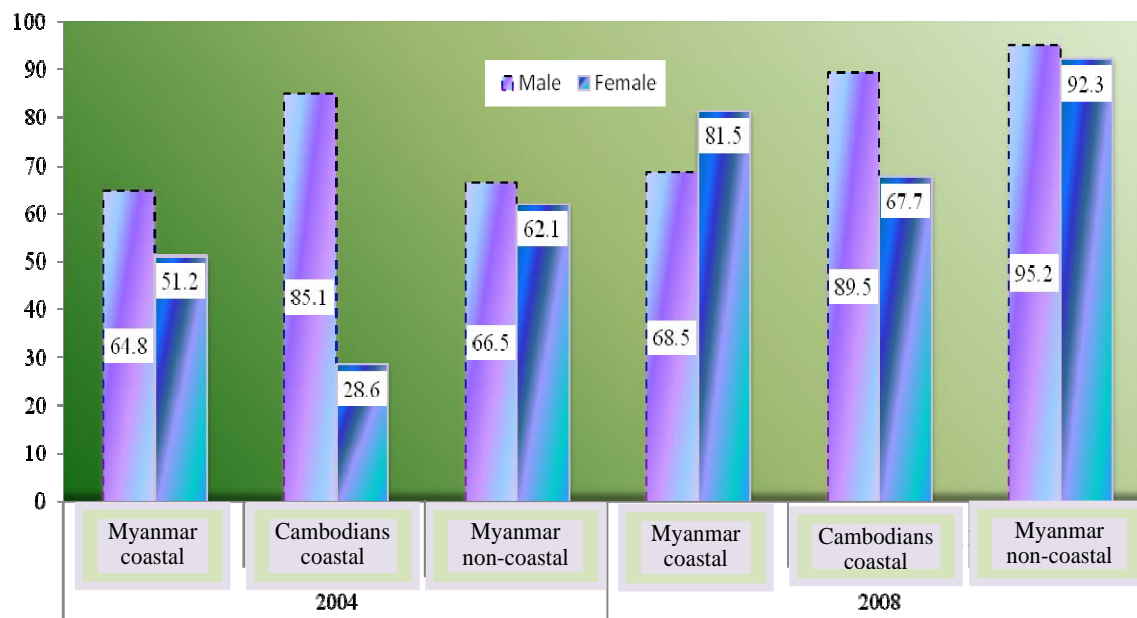
However, merely knowing where to get condoms doesn't necessarily mean people will have them when needed or know how to use condoms properly. Respondents were asked who should take responsibility in being prepared with condoms, perceived convenience in obtaining condoms when needed, and perceived effectiveness of condoms to prevent HIV and other STIs.

Despite the fact that the migrants are aware of condoms and where to get them, they still face challenges in obtaining condoms when needed. Thus, the survey interviewers asked respondents to voice their opinions or attitudes about which partner should be responsible for ensuring supply of condoms when needed, how convenient is it to do so, and whether people in general can prevent HIV/AIDS by using condoms correctly for every episode of sex. This series of questions was also used for comparative analysis of men and women in terms of access to condoms by asking whether they thought that obtaining condom supplies was only the responsibility of the man.

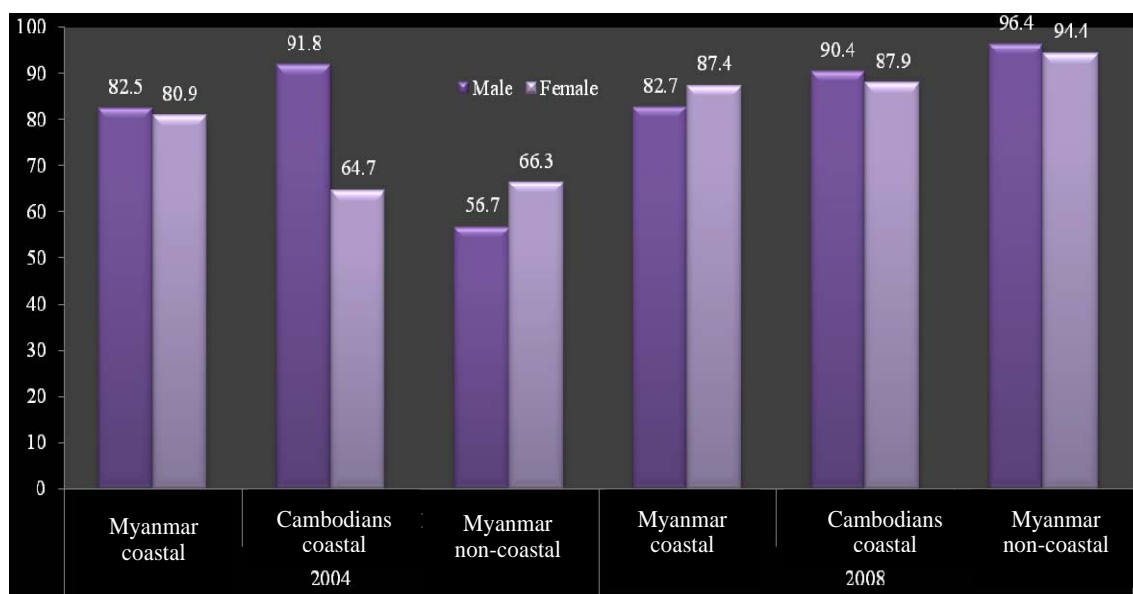
Figure 5.5.1 – 5.5.2 presents the opinions of respondents on these issues. Perceived convenient access improved for all groups over survey rounds. Notably, Cambodian women showed the greatest increase, from 29% to 68% perceived convenience. More Myanmar women in coastal areas felt they had convenient access to condoms when needed compared to the men.

**Figure 5.5.1**

Opinion of migrant access to condoms and correct condom use

**Figure 5.5.2**

Using condoms correctly for every sex episode can prevent HIV

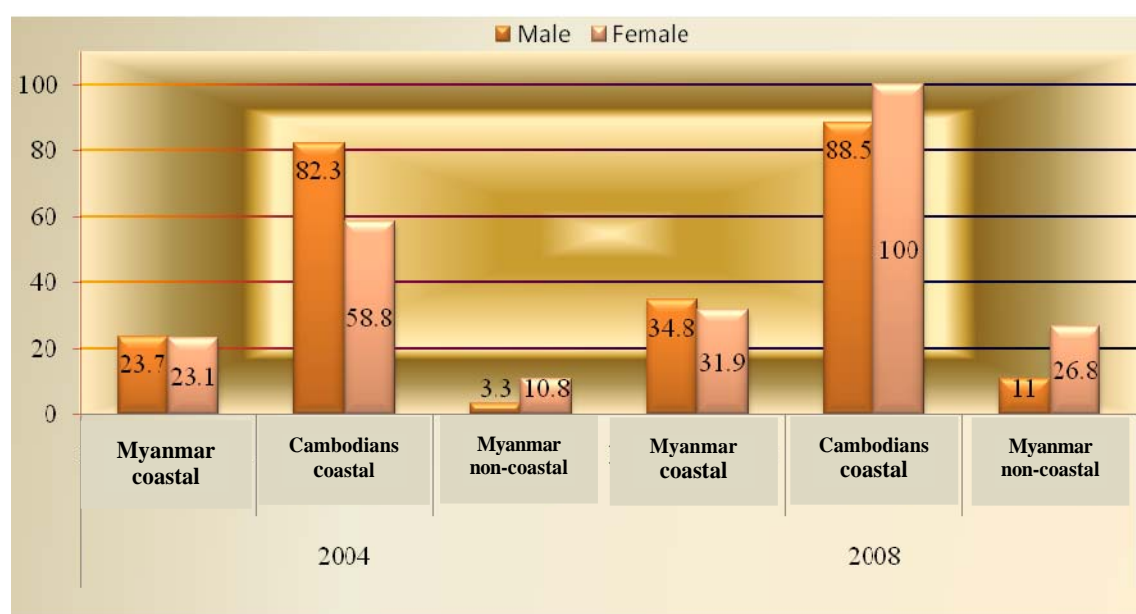


Confidence in the efficacy of condoms is shown in Figure 5.5.1 - 5.5.2. The values for this variable improved for nearly every sub-group in nearly every location. The biggest improvements in confidence in condoms were for migrants in Chiang Mai and Tak.

Opinions varied between the migrant men and women as to whose responsibility condom use is. Data in Figure 5.6 show that the percent who felt condoms are a man's responsibility was much higher among Cambodian migrants compared with

their Myanmar counterparts in coastal provinces. Both Cambodian men and women felt that way, men more than women, and about equal proportions among those from Myanmar. Surprisingly, the proportion who felt condoms were a man's responsibility increased across groups, and Cambodian women actually exceeded the men in stating this belief. These findings suggest that improved knowledge about HIV, STIs and condoms will not necessarily change attitudes about gender (toward more equal responsibility for prevention among both men and women).

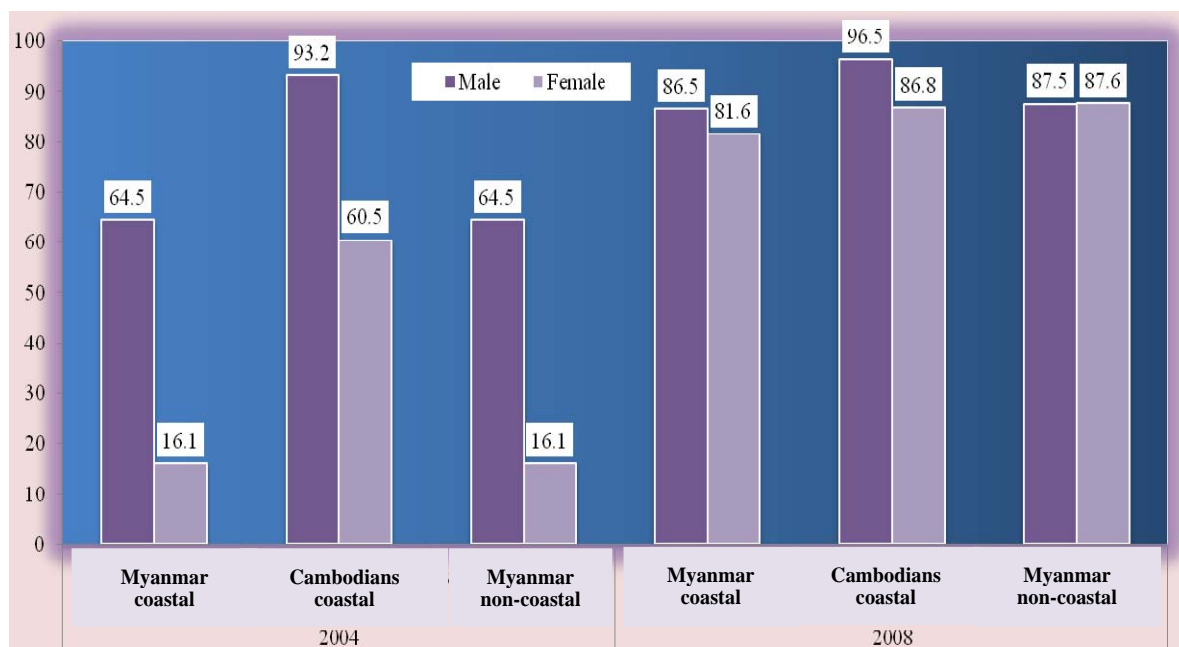
**Figure 5.6**  
Believe that only men should carry condoms



#### 5.4 Knowledge, prevalence, and treatment of STIs

Insofar as condoms prevent STIs in addition to HIV, it is important to look at the migrants' awareness and experience of STIs, and how they manage their STI symptoms. Data from the STI section of the questionnaire is presented in Table 5.6 in the appendix and Figure 5.7. In 2004, 93% of Cambodian male migrants and 61% of the Cambodian women knew of STIs. These proportions increased as of 2008 to 97% and 87% respectively. By contrast, only 16% of Myanmar migrant women knew of STIs at the baseline, but this increased five-fold to 88% by the follow-up round. Myanmar male STI awareness also increased significantly, if not as dramatically as the women. These improvements are highly suggestive of PHAMIT Project impact.

**Figure 5.7**  
Knowledge of STIs among migrants



However, even among those who had good knowledge of STIs, many still didn't know about the facilitating effect that STIs have on HIV transmission. In 2004, 20% to 25% of respondents did *not* think that having an STI increased one's risk for contracting HIV. This misunderstanding decreased to 15% overall as of the 2008 follow-up survey, but is still not optimal. After five years of PHAMIT, nearly all Cambodian men understood that STIs increase risk of HIV.

Respondents with knowledge about STIs were also asked about specific symptoms and differences between male and female symptoms and progression of illness. Women had slightly better understanding of STI symptoms in the female compared to the male. Similarly, male migrants better understood male symptoms than female signs of STIs. This knowledge improved over rounds. The most commonly cited symptoms for men and women were genital "discharge", genital "sores", and "pain-irritation-rash" of/around the genitals. Males had a higher level of knowledge of STI symptoms than females.

Respondents were asked if they had any symptoms of STIs in the 12 months prior to the interview. This question is an indicator of the prevalence of STIs in the year preceding the survey. Table 5.7 shows the results for this item in both 2004 and 2008 surveys. In the 2004 baseline survey, approximately 1% to 3% reported having STI-like symptoms in the previous 12 months. This percent decreased for all groups in 2008. For the overall prevalence of STIs from the weighted sample the estimate from this data is 2.3%, in which the Myanmar migrant men had higher STI prevalence than the Myanmar women. The opposite was true of the Cambodians. It is also noteworthy that the Myanmar men in coastal provinces, and those who mostly work in the fisheries industry, had the highest STI prevalence, or about 3.1%. The results in

the 2008 survey showed this rate was between 1% and 2% for STI prevalence among the weighted sample (1.3%), of which, female Myanmar migrants in coastal provinces had the highest prevalence (2.3%).

Table 5.8 in the appendix adds data on actions taken by respondents when they had STI symptoms. In the baseline round, among Myanmar men in coastal areas, approximately one-third reported *\*ever\** having STI-like symptoms. Of these, 70% self-treated by going to the drugstore; only a small percentage went to a public or private STI clinic. In 2008, it was found that the proportion of males working in the fisheries and on boats in the coastal provinces and who reported symptoms as cited above declined from the proportion reporting symptoms in 2004 to a level of only 1.3%. Most, or 84%, sought assistance from the migrant health volunteer to help advise/obtain treatment, followed by those who preferred to self-treat and buy their own medicine from a pharmacy.

Finally, Table 5.9 explores the attitudes of migrants regarding the best place to be treated for an STI. In both 2004 and 2008 rounds most respondents cited the provincial hospital as the provider of choice. This percent increased over rounds for some groups. The remainder would prefer to go to the local NGO (PHAMIT) partner clinic, private hospital/clinic, health center or other provider. Despite the fact that most of the Cambodian migrants preferred to seek treatment at a government hospital, at least 9% in 2004 and 5% in 2008 still preferred to seek care from a local healer. Though STI prevalence appears to be low in this population, by 2008 they had gained good awareness of the multiple sources of STI treatment (if the need arose) and correctly prioritized these sites by effectiveness of treatment.



# Migrant Sexual Behavior and Condom Use

Safe sex is a basic public health tenet for the prevention of STIs, including HIV. Safe sex through condom use as a behavioral indicator of responsible health behavior is consistent with the UNGASS declaration, the GFATM, and the MDG (Millennium Development Goals). Because humans are becoming more mobile and behavior is changing, often toward high risk practices, it is important to assess migrant lifestyles which involve multiple sex partners, and to assess the degree of risk of transmission of STIs and HIV in those contexts. Thus, variables related to sexual risk behavior and safe sex are important success indicators of PHAMIT.

In this chapter, data on migrant sexual behavior are presented including extent of sexual activity, age at first sex, types of sex partners (regular, non-regular, commercial) condom use by type of sex partner, consistent condom use with these partners, condom use at last sex and reasons for not using condoms, ease of access to condoms when needed, the time required to buy a condom or obtain one when needed, factors which inhibit condom use (such as drinking alcohol and drug use prior to sex.), and ability to persuade one's partner to use condoms, including the process of negotiating condom use with one's partner, the study of these behaviors reported so far, especially the comparison of responses before and after implementation of PHAMIT reflect the success of the Project in the area of promotion of prevention of HIV.

The data discussed in this chapter are presented in the appendix in Tables 6.1-6.16. Cross-tabulations explore differences between migrants in coastal and non-coastal provinces, and by different nationality.

## 6.1 Sexual behavior

Table 6.1 shows results for migrants' history of sex at the time of the 2004 baseline survey and the 2008 follow up. Single Myanmar males showed a decline in sexual experience between rounds while single Cambodian males showed an increase (from 51% to 63%). Single female migrants, regardless of location or nationality had low experiences of sex. Therefore, the single migrant women are not as an important a target audience as the married migrants. The Project should emphasize activities for married women who are vulnerable to being infected by their husbands.



## 6.2 Age at first sex

In both 2004 and 2008, the age at first sex gravitated around 20 to 21 years for both coastal and non-coastal migrants, Myanmar and Cambodian. Approximately one-third had sex during their teens. In any event, almost half of the migrants had their first sex as adolescents between the ages of 15-19. Women had their first sex at an earlier average age than the men, which probably reflects marriage patterns rather than prevalence of pre-marital sex.

In the case of campaigns to help married female migrants to reduce their risk of contracting HIV from their husband, the target audience should initially be married couples where the women are between the age of 15 to 19 because this group are in greater need of knowledge and skills in prevention of HIV/AIDS and STIs than other groups.

## 6.3 Current sex partners: regular, non-regular, commercial

### 6.3.1 Regular sex partner(s)

The data in Table 6.3 presents sexual partner data for migrant workers who were sexually active. Most had sex with a regular partner, especially in the case of female Myanmar migrants in coastal areas (92% to 93% in 2004 and 2008 respectively). History of ever using a condom with a regular partner among Cambodian migrants was low in the two surveys (under 10%). However, among Myanmar migrants in coastal areas, history of ever using a condom with a regular partner increased from 4% to 20% over rounds. In Chiang Mai and Tak in particular, history of ever using a condom with a regular partner increased from 9% to 39% as of 2008. The large increase in history of ever using a condom among Myanmar migrants is consistent with the activities of PHAMIT which made a special effort to reach Myanmar migrant families, particularly in the two non-coastal provinces during the Project.

A common reason given for using condoms with a regular partner was birth control. The percent citing this as a reason for using condoms with a regular partner increased from 60% to 80% over rounds. From 20% to 30% used condoms with a regular partner to prevent STIs and HIV among Myanmar migrants in non-coastal provinces. It is noteworthy that some respondents cited prevention of parent-to-child transmission of HIV as the reason for using condoms. Some respondents cited dual protection (i.e., prevention of both pregnancy and STIs) as the motivation (approximately 20% in some sub-groups). It is important that the dual-protection message becomes the norm in order to reduce stigmatization of condoms as only for use during commercial sex. In that way, condoms will become more acceptable to regular partners.

Those who never used a condom with a regular partner said that the reason was “it is not necessary because of trust in one’s partner.” Fully 80% among Cambodians who never used a condom with a regular partner responded this way in both survey rounds. It is noteworthy that this is the response to every in-depth question regarding never-use or non-use of condoms with a regular partner. Thus, there is a need for new studies to look at the factors that are associated with trust in one’s regular partner, especially among the female migrants who trust their partner to see if their

trust is well-grounded and that they will be protected from contracting HIV. And, if not, these studies can help inform new interventions to address this problem.

### **6.3.2 Non-regular sex partner(s)**

Data in Table 6.4 show results for migrant sexual behavior with non-regular partners. Typically, males have greater prevalence of sex with non-regular partners than do females. Very few women in coastal provinces had sex with a non-regular partner in 2004; none had in 2008. By contrast, Cambodian male migrants reported an increase in non-regular sex partners over rounds, from 52% to 71% in 2004 and 2008 respectively. Myanmar male migrants had less sex experience with non-regular partners: 27% in the coastal province sample compared to 11% in the northern sample of Chiang Mai and Tak migrants.

More single men had non-regular sex partners than married men in both survey rounds. Especially for single Cambodian men, the percent who had sex with a non-regular partner in the previous 12 months increased from 75% to 90% from 2004 to 2008. Of those with non-regular sex partners, the average number of partners decreased slightly from the baseline value of 4.4 to 3.7 in 2008. But this still can be considered a high number. Among this sub-group, Cambodian males had an average of 5 non-regular partners in the previous year. This indicates that there should be some urgent activities to prevent HIV among this group of male migrant laborers.

Most of the non-regular partners were female sex workers (from over 80% to over 90% for Myanmar and Cambodian migrants respectively). The sample size in Chiang Mai and Tak is rather small for Myanmar men with non-regular partners. However the data tend to indicate that there was a greater prevalence of sex with a non-regular partner who was not a sex worker.

As previously observed, the fact that, in 2004, the similar proportions of male migrants in Chiang Mai and Tak reported that their non-regular partner was a girlfriend or a sex worker (55% and 45%) but in 2008 the proportion of non-regular partners who were girlfriends increased (up to 82%) while the proportion who were sex workers decreased to 29%, and this reflects the changing dynamics of sexual behavior in society. Thus, the HIV prevention campaigns should not only emphasize safe sex with sex workers but should also highlight the non-commercial sex relationships that are increasingly common. This will involve more complex and challenging communication techniques and strategies. However the reader should bear in mind that the sample sizes in Chiang Mai and Tak for this item were small; further in-depth studies are needed on this topic in the future.

### **6.3.3 Commercial sex partner(s)**

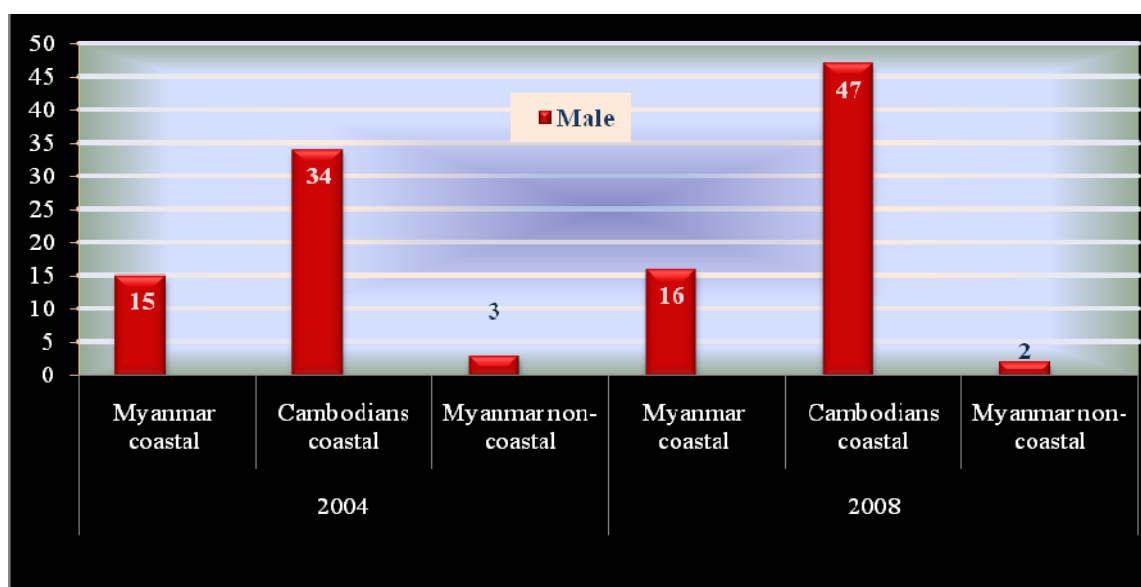
Table 6.5 presents data on history of commercial sex. These data refer exclusively to male patronage of female sex workers since no other pattern was found. In both the baseline and follow-up surveys 27% of the Myanmar male in coastal provinces reported having had sex with a non-regular partner in the previous year and, of these, 82% to 83% said the partner was a sex worker. Notably, only 3% to 5% of men in Chiang Mai and Tak had sex with a sex worker in the previous year for follow-up and baseline surveys respectively. Men in coastal provinces had greater patronage of commercial sex than those in non-coastal provinces, and

Cambodians had more patronage of commercial sex than the Myanmar male migrants. It is noteworthy that more than half of the Cambodian migrant males who had sex with a casual partner in the past 12 months, the person was a sex worker, and that this increased to 67% in 2008 indicating that Cambodian male boat crew are increasingly using the services of sex workers. Some of this difference could be related to different job and living environments of the coastal versus non-coastal sites.

As already observed, to more clearly see the picture regarding male migrants who bought sex in the 12 months prior to the survey, Figure 6.1 shows that among male migrants between the age of 15-49, regardless of marital status and history of sex, approximately 15% of Myanmar in coastal provinces, 34% of Cambodians in coastal provinces, and 3% of migrants in Chiang Mai and Tak had sex with a sex worker in the 12 months prior to the interview. These findings do not differ with those in 2008 which found that male Myanmar migrants, both in coastal and non-coastal provinces had similar proportions as with the respondents in 2004. The exception was Cambodian males in coastal areas who showed a marked increase from 34% to 47% (in 2004 and 2008 respectively). These data indicate that the PHAMIT Project needs to place greater emphasis on migrants who are fishing boat crew or work in the fisheries, especially male Cambodians.

**Figure 6.1**

Percent of migrants age 15-49 who had commercial sex in the past 12 months



What is particularly noteworthy from these data are the relatively higher levels of commercial sex activity among the Cambodian male migrants compared to the Myanmar, and the increasing trend in this behavior among the Cambodians compared to a stable pattern among the Myanmar men.

#### **6.4 Consistency of condom use in the past 12 months with regular, non-regular and commercial sex partners**

All sexually active respondents were asked about condom use in the previous 12 months. (See Table 6.6).

As previously mentioned, condom use with regular partners is low. Nevertheless, the percent ever using condoms with a regular partner increased from 5% to 17% over the two survey rounds. Only 12% used condoms consistently with their regular partners. There is more variation of response concerning condom use with non-regular partners. In 2004, only 21% of male Myanmar migrants used condoms for each sex with a non-regular partner. By contrast, fully 60% of Cambodian male migrants reported using a condom for every sex with a non-regular partner. However, by the time of the follow-up survey in 2008, the Myanmar respondents reported a three-fold increase in condom use up to 60%. Consistency of condom use, however, varied by type of non-regular partner. Condom use with girlfriends or other non-commercial sex partners was more likely to be sporadic or inconsistent than condom use during commercial sex.

A result that is probably attributable to PHAMIT is the observed increase in condom use during commercial sex for both Myanmar and Cambodian migrants. For the migrants from Myanmar, condom use during commercial sex increased from 73% to 88%; for migrants from Cambodia the increase was from 88% to 92% between the 2004 and 2008 surveys. In any event, there are still male migrants who do not use condoms at all or only sometimes with sex workers. Even though the proportion is small and declining after PHAMIT, and the proportion using condoms with sex workers is high and consistent, there still needs to be intensified efforts to boost condom use to 100% of episodes of sex with sex workers for effective prevention of HIV.

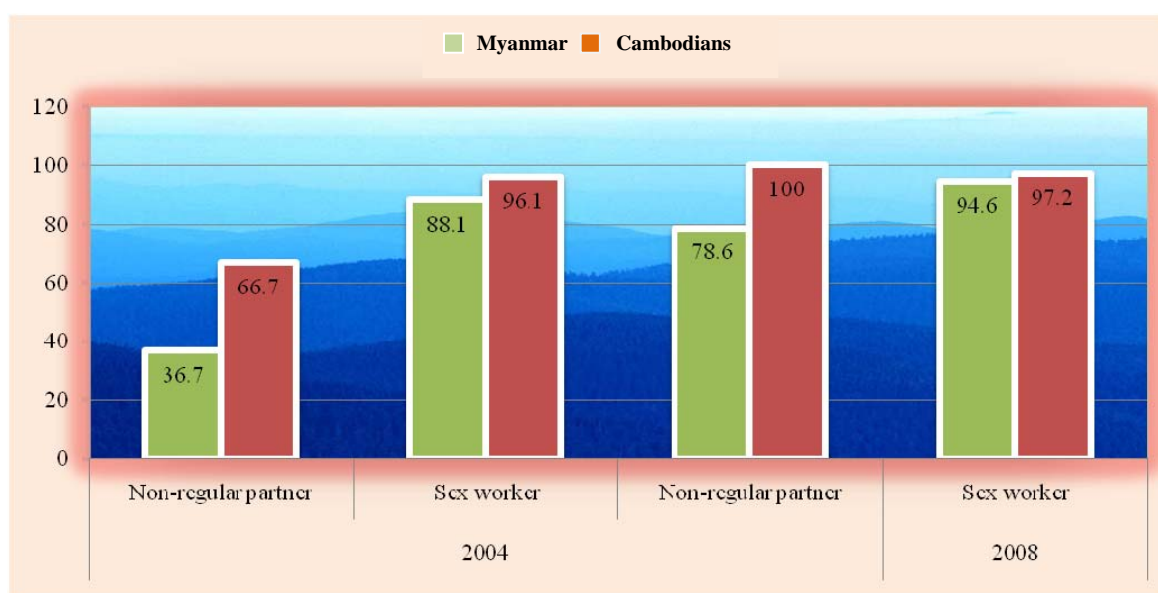
Figure 6.2 shows values for the variable on condom use at last sex in the past year by type of sex partner, by baseline and follow-up surveys. Condom use with a non-regular partner increased the most (more than doubling from 41% to 91%). Increases also occurred for condom use at last sex with other types of partners, but not as dramatically.

**Figure 6.2**

Used a condom at last sex in past year with regular,  
non-regular and commercial sex partners

**Figure 6.3**

Used a condom during last sex with a non-regular partners  
and commercial sex partner by nationality



The data presented in Table 6.6 support the contention that (1) condom use in potentially risky situations has not yet reached 100%; and (2) condom use is determined by type of sex partner and the implied trust that goes along with that relationship. Reasons for not using a condom are presented in Table 6.7. Non-use of a condom during last sex with a non-regular partner was because it was “not necessary” in 54% of responses in 2004; this declined to 40% in 2008. Approximately one-fifth said they “did not like” condoms as the reason for non-use. Others said they did not plan ahead; the sex episode was accidental. A few reported that they did not/could not obtain a condom in advance – but price for condoms is not an important barrier to use. Migrants who did not use a condom at last commercial sex are few, but those who didn’t said the reason was “dislike” condoms, or “(both partners) did not feel it was necessary” which suggests that the 100% condom use norm has not yet been achieved among all female sex workers either.

Thus, when PHAMIT continues its activities in the future, there should be greater consideration of the factors affecting non-use of condoms, and then tailor interventions accordingly. Also, there should be increased concern and knowledge so that migrant attitudes and motivation will improve access to condoms when the migrants most need them. Also, condom supply services need to be made a more attractive option, and PHAMIT can expand its activities in this regard.

Concerning the reason for not using a condom during last sex with a sex worker, the pattern is similar to last sex with a non-regular partner: i.e., no need to use condoms. However the more important reasons for non-use of a condom with the sex worker is “do not like” “didn’t think it was necessary” which is quite different than the reasons for non-use with a non-regular partner (who is not a sex worker). As for the reason that “sex partner refused to use a condom” the proportion citing this factor for non-use with a sex worker was similar in 2004 and 2008, or about 13%. In sum, even though PHAMIT has directed its interventions for condom use heavily to the sex worker population and the men who are the potential clients of the sex workers, there still seem to be outstanding factors affecting this behavior.

## **6.5 Access to condoms**

Access to condoms for migrant laborers when having sex with either a regular partner, non-regular partner, and sex worker is considered from 3 dimensions: (1) source of condoms; (2) the duration of time needed to obtain the condom; and (3) having condoms on hand for every episode of sex.

### **6.5.1 Sources of condom supply**

Table 6.8 presents data on source of condoms. In 2004, 42% of respondents who used condoms with a regular partner reported that the local pharmacy was the source, followed by convenience store, health center, or volunteer. By 2008, the pattern changed and only 3% reported the drug store as a source, whereas one-fourth cited Project volunteers as the source of condom supply, followed by condom vending machines, condom distribution boxes, or local PHAMIT drop-in center.

Regarding condom use with non-regular partners, in 2004 about half the sample said they did not buy the condoms themselves. Those that bought condoms got them

from a drug store, convenience store, or general store. In 2008, convenience stores were the most important source of condoms followed by Project volunteer, drug stores, and PHAMIT condom distribution boxes. For sex with a sex worker, about half of the migrants in 2004 reported obtaining condoms from the sex establishment and 49% from female sex workers in 2008. Regarding other secondary sources, the house of the volunteer is one channel for obtaining condoms as a secondary source, but this is not very common.

### ***6.5.2 Speed of access to condoms when needed***

Table 6.9 presents data on speed of access to condoms for use with a regular, non-regular and commercial sex partner. In sex with a regular or non-regular (non-commercial) partner it took longer to obtain the condom than for sex with a sex worker (5 to 6 minutes). This could be because the condoms were obtained in the commercial sex establishment, bar, or brothel, which is an indicator of the success of PHAMIT in targeting the sex worker as a source of condoms.

### ***6.5.3 Ease of access to condoms each time needed***

Table 6.10 shows data on obtaining a condom each time needed by type of partner. High and increasing percentages of men were able to obtain a condom each time when needed between the two survey rounds (ranging from 82% to 97% in 2004 up to 87% to 98% in 2008). The percent obtaining a condom when needed was highest for sex with a sex worker and was almost universal for both Cambodian and Myanmar migrants. In the group of male Cambodian migrants, it was found that in 2004 and 2008, almost 99% reported that they used a condom for every sex with a sex worker compared with the Myanmar migrants in coastal areas who also reported a use level of 97 to 99%. Nevertheless efforts to achieve and maintain 100% condom use need to be continued in the foreseeable future.

## **6.6 Factors affecting failure to use condoms**

Because of the differentials in condom use among the different sub-groups of migrants and types of sex partners, this section will discuss those factors responsible for non-use of condoms. These are very important factors and include such variables as consumption of alcohol or other drugs before sex, like and dislike of condom use and negotiation skills and ability to persuade a partner to use a condom.

### ***6.6.1 Use of alcohol or other drugs prior to sex***

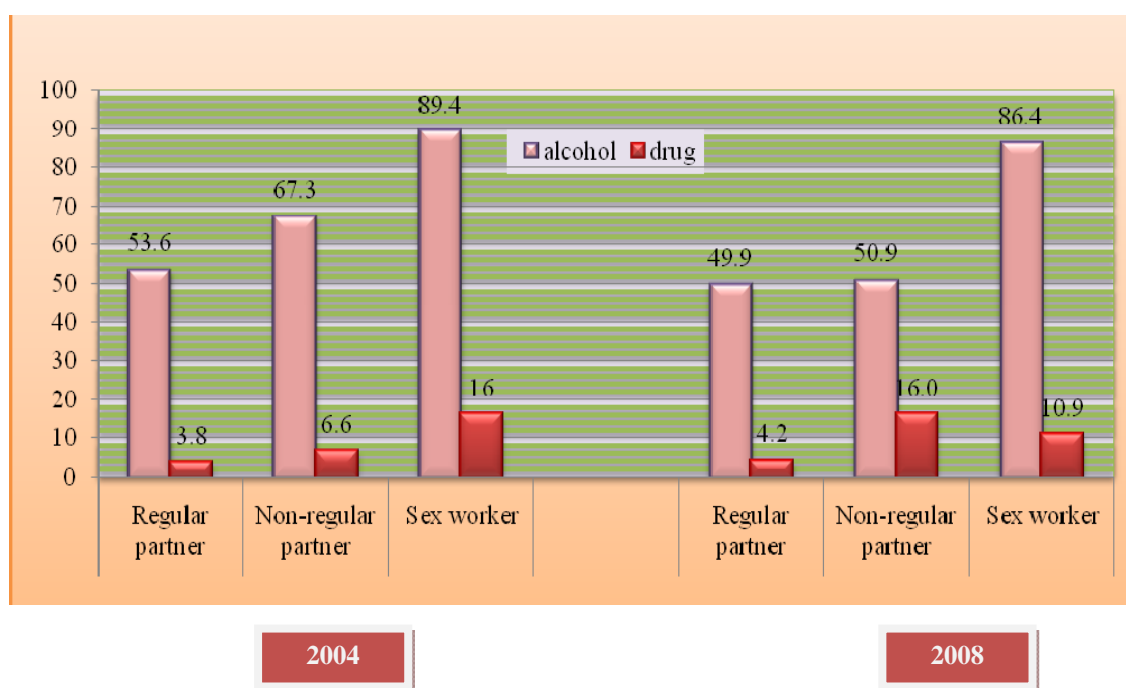
Table 6.11 presents data on use of recreational drugs prior to sex by type of partner. (Non-alcohol) drug use is more common as a prelude to sex with a non-regular or commercial partner. Drug use prior to sex with a non-regular partner was 20% compared to only 5% for sex with a regular partner in 2008. More Myanmar migrants had used drugs prior to commercial sex in 2004 (one out of four), but this proportion had declined to 17% by 2008. This finding should be of use to PHAMIT in designing activities to promote condom use and finding ways to change behavior in this particular sub-group.



Table 6.12 focuses on alcohol consumption prior to sex. Drinking is common among migrants. Fully 40% reported drinking alcohol before sex with a regular partner. The percent drinking before sex with a non-regular partner decreased from 68% to 54% between survey rounds. Drinking prior to commercial sex also decreased slightly as well, from 89% to 86% but is still obviously a very common behavior. This finding shows that the campaigns for safe sex need to be mindful of the effect of alcohol before sex, as this seems to multiply risk when having sex with a sex worker or other non-regular partner.

Regular consumption of alcohol prior to commercial sex declined somewhat between rounds (from 21% to 17% in 2004 and 2008 respectively). In addition to consumption of alcohol before sex, a related problem is frequency of alcohol consumption, and this aspect needs to be addressed as well. From the survey rounds, it was found that alcohol consumption frequency increased by type of partner: most migrants who drink before sex would do this in the case of sex with a sex worker (21% in 2004 and 17% in 2008 reported regular drinking; while 30% and 28% reported some drinking before commercial sex in those years). As stated earlier, alcohol and drug use before sex inhibit proper condom use, a factor that needs to be seriously addressed for the HIV control effort to achieve full success. These data are summarized graphically in Figure 6.4

**Figure 6.4**  
Migrant use of alcohol and other drugs prior to sex with regular,  
non-regular and commercial sex partners



### **6.6.2 Preference for sex without condoms**

Table 6.13 presents data on appreciation of condoms by type of partner. The percent who felt that condoms reduce pleasure declined from 71%, 75% and 70% (for regular, non-regular, and commercial sex partners) to 40%, 52% and 61% between 2004 and 2008 respectively. However, there were clearly significant percentages of the migrants who didn't have favorable views toward condoms, or (mistakenly) believed that condoms were not that effective against HIV and STIs. Most likely this is the result of PHAMIT campaigns raising awareness about HIV and STIs, which was increasing in male migrants but needs to be continued until the 100% condom use norm is established.

### **6.6.3 Skill in persuading sex partner(s) to use condoms**

Table 6.14 presents data on negotiating condom use or persuading one's partner to use condoms. The questionnaire phrased the question in the following way: "How confident are you that you can convince your partner to use a condom when you want him/her to?" Male migrants are confident they can do so, as are female Myanmar migrants. (The sample size for Cambodian females was too small to analyze.)

The questionnaire also asked respondents if they could refuse sex if their partner refused to use condoms. The percent who felt they could with a non-regular partner rose from 61% to 79% and from 84% to 90% for commercial sex partners over survey rounds.

From the survey results presented earlier it is seen that male migrants will compromise with their partners when they discourage condom use, and they will do this more with non-regular partners who are girlfriends, but less so with sex workers. Fully 80% of male Myanmar migrants in coastal areas in 2004 and 84% in 2008, and 92% of male Cambodian migrants in 2004 and 98% in 2008 said they felt able to refuse sex with a sex worker if she did not want to use a condom. Only 61% of migrants in 2004 and 79% in 2008 responded that they could refuse sex without a condom with their girlfriend or other non-regular partners (Table 6.15, Appendix A). This shows that PHAMIT has some complex challenges remaining regarding safe sex with girlfriends, and perhaps less intensively regarding sex with sex workers.

Table 6.16 in Appendix A summarizes the data on the circumstances in which the migrants will refuse or accede to the wishes of their sex partner regarding condom use. Regarding sex with a regular partner, 30% of migrants in 2004 and 2008 responded that they would agree to sex without a condom; only 23% and 15% respectively said they would refuse. In 2004, 43% reported that they would try to persuade their regular partner to use condoms and in 2008 this had dropped to 5%. Even though the sample for these items is too limited to do a statistical analysis by sex, it is alarming to note that a significant percentage of women report having to have sex without a condom with a regular partner against their will, much more so than reported by the males. Even though the situation had improved by 2008, there is still an obvious need for assertiveness training and skills building for migrant women so that they can have safe sex on their own terms.

Concerning condom use with sex workers, the interviewers asked respondents what they would do if their partner refused to use condoms. It is of concern that about 10% of male migrants in 2004 and 9% in 2008 would agree to have sex without a condom with a sex worker. That said, some migrants reported that they would rather go without sex than take the risk, or find a way to persuade their partner to use condoms. Fully two-thirds in 2004 and three-quarters in 2008 would refuse sex with a sex worker unless she agreed to use condoms. Cambodian men were more likely to say they would refuse than their Myanmar counterparts: for Cambodians, the refusal rate increased from 86% in 2004 to 98% in 2008 compared with only 57% and 65% for their Myanmar counterparts. This implies that Cambodian men do not rely on persuading a partner to use condoms as much as the Myanmar might do. Instead they use more decisive prevention actions such as refusing to have sex without a condom.

As might be expected, more female migrants felt less confident in their ability to negotiate condom use with their regular partner (e.g., by refusing sex) than did their male counterparts. Until the balance of power between the sexes becomes more equal in these countries, this will likely remain the case going forward. Myanmar migrants are more likely than their Cambodian counterparts to negotiate condom use, and negotiate successfully.

In sum, during the period of PHAMIT implementation over 5 years, increased concern about HIV and AIDS helped to boost condom use among Myanmar and Cambodian migrants in all Project locations, both for men and women, to high and satisfactory levels. Especially in sex with a non-regular partner, which is a problem area for the general Thai population, the migrants showed even higher levels of condom use, and showed improvements in overall sexual behavior toward healthier lifestyles. Nevertheless, in the intimate relationships with regular and non-regular partners, there are still challenges regarding sex roles and communication within the relationship, as well as other issues raised in this report.



# Migrants' Access to General Health Services, Family Planning and Reproductive Health Services

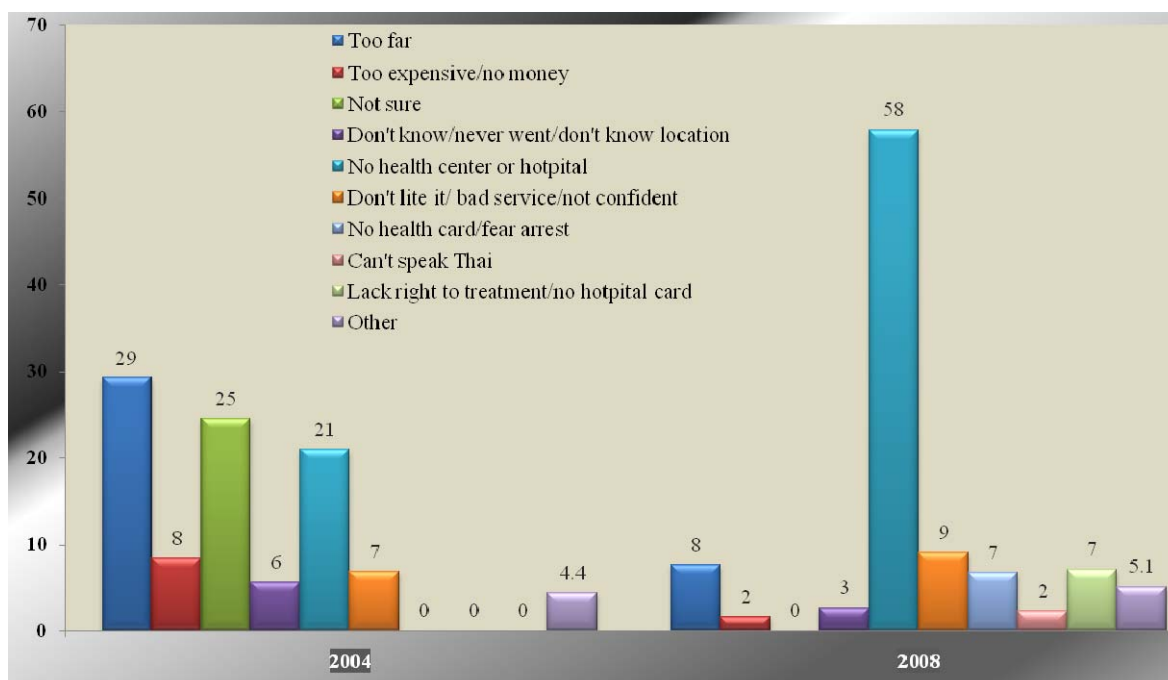
This chapter examines the full range of health services accessed by the migrants in this study in order to determine their access to PHAMIT-supported health services in particular. Both public and private sources are considered in addition to the Project outlets. Reasons for non-use of health services are also considered along with barriers to access. Finally, data are presented on use of contraception and reproductive health services. Results of cross-tabulations by type of province of residence (coastal, non-coastal) and country of origin (Myanmar, Cambodia) are presented among other results.

## 7.1 Access to health care when ill or needing treatment

Table 7.1 presents data on access to health services when the migrants were ill or injured in the year prior to the interview. In the 2004 baseline survey, 40% of respondents said they were ill or injured enough to need health/medical care in the past year. Of these, one-fourth accessed services at a government hospital/health service outlet to address the health problem. As of the follow-up survey in 2008, the percent needing health/medical care increased to 74%, and half of these sought treatment at a government facility. The percent of Myanmar migrants who sought treatment increased from 30% to 63% across rounds, while the percent of Cambodian migrants who did this declined somewhat. Reasons for not seeking health care when needed are also presented in the same data table. In 2004, it was found that 26% of migrants cited distance as a barrier to access services at the government hospital, followed by lack of (worker) ID card (22%), lack of confidence in the services (19%), and the medical expense (14%). By contrast, in 2008, it was found that 58% cited lack of an ID as the reason for not seeking government hospital services and this was highest among migrants in the northern provinces of Chiang Mai and Tak (83%). A possible explanation for this is that, recently, a greater proportion of foreign migrant laborers were not registered due to a change in regulations or prohibitive cost.

**Figure 7.1**

Reasons for not using government services or visiting the local government hospital



Other reasons for not seeking treatment included “not that serious”, “too expensive”, and “don’t know where to go.” It is noteworthy that in 2004 among female migrants 13% said that they thought “services were poor” or “did not have confidence in the services” (7%), but these percentages declined as of the follow-up in 2008 to 2% and 0% respectively. There is no evidence that the migrants preferred private outlets over public. In 2004 slightly more than 40% sought health services at a private hospital or clinic when needed, and this declined to 27% in 2008.

In 2004, more Cambodian migrants used private hospitals/clinics more than their Myanmar counterparts. However, by 2008, the percent of Cambodians seeking private services decreased while the percent for Myanmar migrants increased. One-third of female migrants from Myanmar who lived in Chiang Mai or Tak used private hospital/clinic services.

Most migrant laborers complain that getting treated at a private hospital is too expensive; in addition, the distances are too far, or the location is not clear, and they have no ID or insurance card. While 9% of migrant women in 2004 said that the level of services were poor, this declined to trace levels in 2008. Also, while a large percentage in 2004 said they did not trust the service providers, this indicator declined to an insignificant level by 2008.

Respondents in both rounds of survey preferred to seek health services at private clinics rather than private hospitals however this preference declined for Cambodian migrants while it increased for those from Myanmar (from 15% to 30%). Cost was the major barrier cited by those who did not go for care at a private outlet, followed by distance, lack of ID card, and poor service. As stated above, lack of trust of the service providers was prevalent in 2004 but did not appear in the 2008 survey round.

Health centers increased as a desirable source for care among the Myanmar migrants (from 14% to 68% in baseline and follow-up rounds in the Chiang Mai-Tak sample) with female Myanmar migrants showing the greatest increase (from 19% to 70%). Cambodian migrants decreased health-seeking at a health center over rounds and cited such reasons as “didn’t know how to get there,” “too far,” “poor service” and “no ID.”

Only a small percentage of the sample preferred to use traditional doctors for treatment (less than 10% for both rounds). More Cambodians used the services of traditional healers than Myanmar but this preference declined over rounds (42% and 21%). The reasons for not using the traditional healer are “lack confidence in treatment,” “poor service” or “don’t know where to access.”

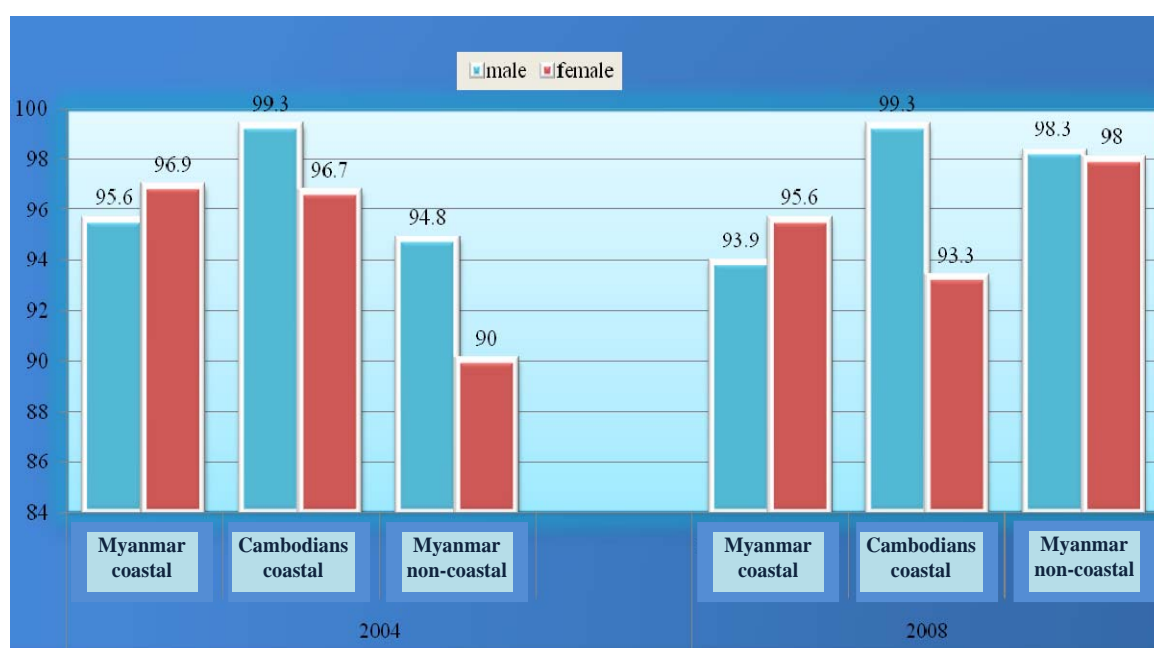
## 7.2 Sense of quality of the health care services

Table 7.2 presents data on the migrants’ perception of the quality of health care received at various service outlets. In both the 2004 and 2008 survey rounds, over 90% of respondents overall felt they received “good” services and nearly 100% of respondents in Chiang Mai-Tak felt so. However, “satisfaction” among Myanmar migrants in coastal provinces actually declined over rounds, but these declines may not be statistically significant. In any event, satisfaction clearly declined among the Myanmar from 78-80% in 2004 to 54-65% in 2008, probably because some of the migrants still had complaints about the service.

Attitudes toward convenience and satisfaction of services are shown in Figure 7.2 below. This study asked respondents about the convenience and ease of receiving health services at government and private facilities. As shown in Figure 7.2, it is impressive that more than 90% of both the Cambodian and Myanmar migrants in coastal and non-coastal provinces in 2004 and 2008 felt that these services were convenient and satisfactory.

**Figure 7.2**

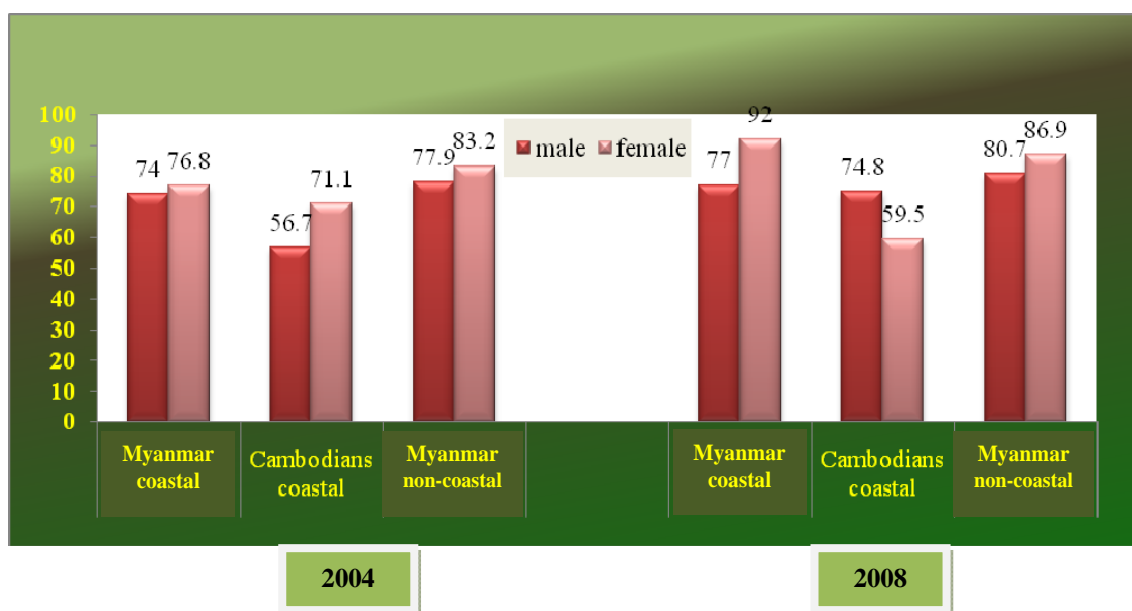
Attitudes of migrants toward convenience and satisfaction with health services



### 7.3 Right to access health care

That international migrants be allowed access to local health services is not only a human right, but it also ensures better coverage of the entire population with health services in order to prevent communicable diseases from spreading widely among migrants and non-migrants alike. Data on knowledge of these rights are presented in Table 7.3. Knowledge of health rights increased over rounds, especially for Myanmar women, and especially for those residing in the coastal provinces (from 77% to 92% in 2004 and 2008 respectively). Unfortunately, the opposite is true for female Cambodian migrants whose knowledge of health rights declined from 71% to 60% over rounds (see Figure 7.3).

**Figure 7.3**  
Knowledge of migrants' rights to access health care services



### 7.4 Use of contraception

Access to modern contraception for migrants is a basic health service need since the vast majority are in the prime child-bearing age groups. Table 7.4 presents data on knowledge of modern contraception, history of contraception use among those ever-married, and method currently used for men and women age 15 to 49.

#### 7.4.1 Knowledge of modern contraception

Data on knowledge of contraception are separated by whether respondents were ever-married or not. In 2004 and 2008 most respondents were aware of oral contraceptives ("the pill"), injectables, condoms, and sterilization, and this level of awareness increased. For the pill in particular, knowledge of this method increased from 80% to over 90% in 2008. Yet knowledge gaps remain, even among the ever-married men and women. Few respondents knew about the IUD and sub-dermal implants. At least half of the respondents (male and female) recognized the



contraceptive properties of the condom. Ever-married Cambodian women showed distinctly increased awareness of condoms as a contraceptive method over rounds (from 36% to 90% respectively). The comparable data for ever-married Myanmar women in Chiang Mai and Tak were 56% and 77%, and, in coastal provinces, from 33% to 40%.

For single male and females, knowledge of modern clinical contraception was lower than for the ever-married migrants across all major methods. Knowledge of condoms as a contraceptive increased from 48% to 69% among the single population sample over rounds.

During the nearly 5 years of PHAMIT implementation, knowledge of condoms among the married migrants centered around its contraceptive properties, and this might reflect a difference by marital status whereby more single migrants primarily viewed condoms as preventing HIV and STIs. Thus, credit must be given to PHAMIT in its condom awareness campaigns for emphasizing the HIV/STI-preventive benefit of condoms which seemed to have impact among the single migrants, both male and female.

#### **7.4.2 Ever use of contraception**

Table 7.5 presents data on ever-use of contraception for ever-married women age 15 to 49. The pill was the most common method ever used, and this preference increased from 47% to 68% from baseline to follow-up. The second most common method ever used was the injectable contraceptive, followed by condoms. The proportion reporting having ever used IUD, implants or sterilization declined over rounds (between 1% to 5% for each method).

The pill was the most popular method for both Myanmar and Cambodian migrant populations and their partners in both coastal and non-coastal provinces. The injectable was more popular among women in the northern provinces of Chiang Mai and Tak. Percent use among this group increased from 36% to 50% over rounds. Cambodian women used the injectable least among the three sub-samples. Couples in the northern sample of Chiang Mai and Tak had higher overall contraceptive use than the couples in the coastal provinces.

Ever-use of condoms (as a contraceptive) increased significantly over the period from 2004 to 2008 and this could possibly be attributed to the PHAMIT Project which emphasized the dual protection properties of condoms.

Overall, there was a six-fold increase in use (from 5% in 2004 to 31% in 2008); among migrants in Chiang Mai and Tak the increase was under 5-fold, from 10% in 2004 to 46% in 2008.

#### **7.4.3 Current use of contraception**

Table 7.6 presents data on current use of contraception among migrants currently married or in co-habiting relationships. The pill was the most common method currently used, and slightly increased from 34% in 2004 to 38% in 2008.

The next most common methods were the injectable and condoms, and levels of use for these methods were the injection and condom. (see figure 7.4).

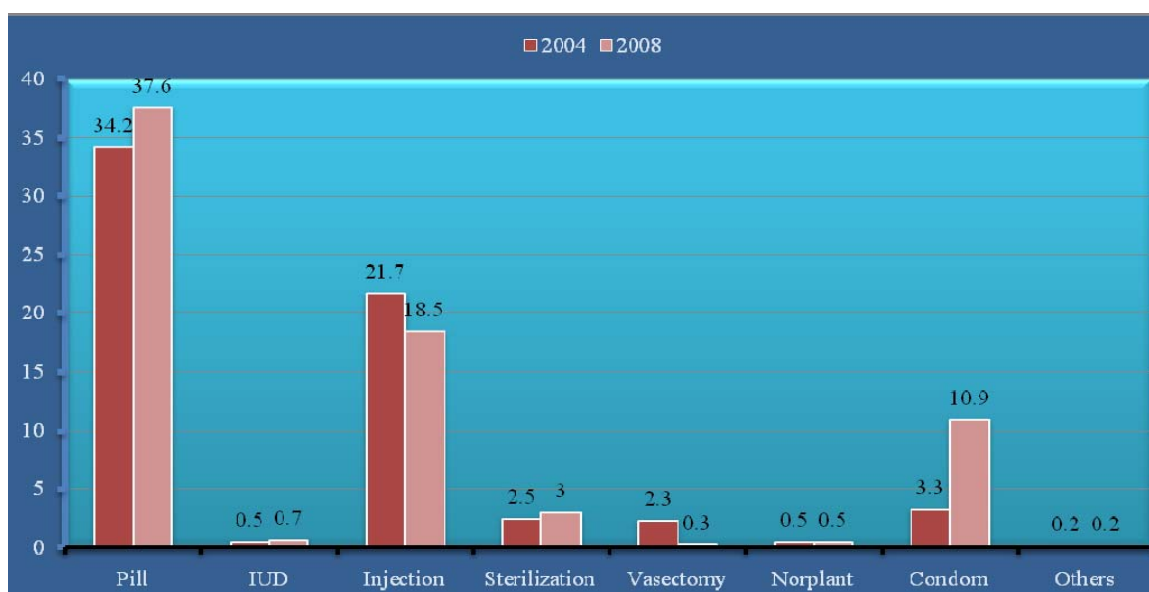
Permanent contraception was not preferred by this group of migrants as only 3% reported using this method. Female sterilization was more common than vasectomy as of 2008. This indicates that both male and female migrants who are married or have a steady partner want to have children in the future but are postponing that decision at present due to their economic commitments. It is noteworthy that, in response to the question about current contraceptive use, very few migrants reported having a vasectomy when compared to female sterilization. Thus, projects need to address the male role in contraception more strongly in the future.

Current use of condoms as a contraceptive more than doubled over rounds. For use of condoms as a contraceptive among married couples, in general, use increased from 3% in 2004 to 11% in 2008 which is impressive, especially when compared to data for the general Thai population. That said, the dual protection properties of condoms (for prevention of pregnancy and STIs/HIV) needs to be emphasized more strongly to help eliminate any remaining stigma about condoms as only being used for commercial sex and not with one's lover or spouse.

The survey data also reveals that the increase in condom use as a contraceptive was highest in the northern provinces (from 6% to 20% over rounds). In 2008, the increase in other groups of migrants was not as distinct (from under 5% to nearly 10% or slightly more than 10%). The smallest level were among the Cambodian migrants and, therefore, this group should receive priority in future campaigns.

**Figure 7.4**

Use of modern contraception among married migrant women and method(s) used



The relatively high levels of contraceptive use among migrants reflect the high demand for this health service and the ability to access these services when needed and as preferred. The percent of currently married migrant worker age 15 to 49 (or their partner) using any method of modern contraception increased from 61% in 2004 to 68% in 2008. At the same time, the fact that contraceptive use was slightly increased may also reflect the difficult living and working conditions of the migrants such that they feel they could not possibly manage a pregnancy and infant children at present.

## **7.5 Reproductive health of female migrants aged 15 - 49**

The dimensions of reproductive health rights of women presented here concern the number of children desired compared with the number of children they currently have, child-bearing decision-making, and a number of key variables in the family formation process of women age 15-49. Questions concerning pre- and post-natal care refer to the last child born age under five. Because the sample of female Cambodian migrants is small, the analysis looks more at the Myanmar women sample, and compares those living/working in coastal provinces with those in the non-coastal provinces of Chiang Mai and Tak.

### ***7.5.1 Size and formation of families***

Table 7.7 presents data on number of living children for married female migrants age 15 to 49 and shows that most have at least one child. Women in coastal provinces had slightly lower parity than those in Chiang Mai and Tak Provinces in 2004, but the data converged to an average of 2.1 living children by 2008. In 2004 and 2008 it was found that female migrants in coastal provinces had an average of 2.1 children. Myanmar migrant women in Chiang Mai and Tak showed a declining level of fertility from 2.3 in 2004 to 2.1 in 2008.

The decision on whether or not to have a child was made jointly by women and their partner in both coastal and non-coastal provinces and over both survey rounds (over 84%). The surveys in the coastal provinces reported a decline in the percent of couples in which the man was the sole decision-maker regarding having a pregnancy (from 6% to 2%) and this reflects, overall, the strength of the decision-making role of women in this population.

The number of desired children was 3.0 in 2004 for both coastal and non-coastal provincial samples. However, this declined to 2.9 and 2.7 children by the 2008 round (respectively). See Table 7.8. The data in Table 7.9 show the average age of the last-born child. Perhaps reflecting the declining fertility of this population the average age of the last child increased slightly between rounds and was approximately 2 years of age. This can be seen from the fact that the average age of the last-born child increased. Among Myanmar women in coastal provinces these increases were small, in contrast to their counterparts in Chiang Mai and Tak where the increase was nearly 2 years.

When comparing the results for female migrants from Myanmar, those in the northern provinces of Chiang Mai and Tak had more children than their counterparts in the

coastal provinces. This finding reflects that migrant mothers in coastal provinces may not be ready to have a large family to the same extent that women in non-coastal provinces are, perhaps because of the different nature of the work and living conditions, and because some couples are separated due to the nature of their occupations (for example, the fisherman who have to spend many months at sea).

Table 7.10 presents data on unwanted pregnancy. Under 10% in both 2004 and 2008 surveys reported that the last child was unplanned. The increases were not great among migrants in coastal provinces which reflects a strong understanding of the importance of family planning, and this can possibly be attributed to the efforts of the voluntary family planning activities in both the private and public sectors in the locality.

### ***7.5.2 Birth delivery in Thailand and in the country of origin***

Table 7.11 presents data on where migrant women with a child under five years delivered their child. From 75% to 84% of the migrant women in Chiang Mai and Tak delivered in Thailand in 2004 and 2008 respectively. And only 16% delivered in Myanmar. This was less the case for female Myanmar migrants in coastal provinces in 2004. For Myanmar women in coastal provinces, slightly fewer had their delivery in Thailand in 2004.

Most of the Myanmar migrants who delivered their last child in Thailand delivered at a government hospital (Table 7.12). More of the women in coastal provinces delivered at a government hospital when compared to women in non-coastal provinces, and this proportion increased significantly over survey rounds (from 68% to 89% respectively). The level of use of delivery services at government hospitals did not change and remained at the level of about 50%. The proportion of Myanmar women in Chiang Mai or Tak who delivered at a health center increased four-fold from 6% to 25% between 2004 and 2008. The proportion of Myanmar women in these northern provinces who delivered at a private clinic increased from 0% to 14% by the time of the follow-up survey. Less than 6% of Myanmar women in coastal provinces and none of the women in the north used a traditional birth attendant to manage the delivery as reported in 2008. It is noteworthy that some female Myanmar migrants still prefer the services of a traditional birth attendant, especially those in coastal provinces. The level of this practice is about 5% - 6%, whereas the proportion of Myanmar migrants using a traditional birth attendant in Chiang Mai and Tak declined from 3% in 2004 to zero in 2008 (Table 7.12 in Appendix A).

### ***7.5.3 Complications of delivery in Thailand***

In 2004, 11% of Myanmar women residing in coastal provinces had complications of delivery during their last childbirth (see Table 7.13). A noteworthy and troubling finding is that, for Myanmar women in Chiang Mai or Tak, the proportion experiencing complications at last delivery increased from 6% to 31% between the baseline and follow-up surveys. It is possible there was some misunderstanding during the second-round interview because 95% of these women were delivered by a trained practitioner (Table 7.14) and received complete and comprehensive pre-natal care.

#### ***7.5.4 Ante-natal care for women delivering in Thailand***

Table 7.15 presents data on ante-natal care (ANC) for migrant women delivering the last under-five child in Thailand. The percent of the migrants in coastal provinces who received ANC was 83% in 2004 and increased to 93% in 2008. This increased to 100% in 2008 and is exemplary given that fully 17% of Myanmar women in coastal provinces did not receive ANC in 2004 and that this proportion decreased distinctly to 7% by 2008. These findings are consistent with the goals of PHAMIT to improve access of migrants to quality maternal and child health (MCH) care services. However, more Myanmar women in the coastal provinces did not have proper ANC compared to women in Chiang Mai and Tak.

Table 7.16 presents data on type of ANC facility used. Most of the women in 2004 and 2008 both in coastal and non-coastal provinces preferred the provincial government hospital for ANC service. This proportion increased from 74% in 2004 to 88% in 2008 in coastal provinces. Regarding the Myanmar migrant women in non-coastal provinces (Chiang Mai and Tak) in 2008 only half sought services at government hospitals. The remainder sought services at a health center (29%), private clinic (10%) and other service outlets.

As mentioned earlier, the Myanmar migrants in the north also went to government health centers; thus the proportion going to the local provincial hospitals there was lower than for coastal province women.

The reasons why the remaining few Myanmar women in coastal provinces did not seek ANC include distance (“too far”) and “no ID card” (see Table 7.17). The sample of Myanmar migrant women in Chiang Mai and Tak for this indicator is not large enough to analyze their reasons for not seeking ANC care.

#### ***7.5.5 Post-natal care for women delivering in Thailand***

Fully 91% of Myanmar migrant women living in Chiang Mai or Tak and delivering their last under-5 year-old child in Thailand received post-natal care in 2004; this increased to 100% by the follow-up round (see Table 7.18). The level of care was lower for Myanmar women in coastal provinces but also showed a strongly increasing trend (from 68% to 83% in baseline and follow-up rounds respectively). In any event, as high as 17% of Myanmar migrant women in coastal provinces did not seek post-natal care.

Most of the women went for care at the local provincial hospital (Table 7.19). In coastal provinces, 83% of the migrant women went for care at the local government hospital, compared with about half of the women in the northern two provinces who received post-natal care from health centers (34%) and private clinics (11%) in addition to the government hospital.

#### ***7.5.6 Access to formal education for children***

Table 7.20 presents data for access to formal education for children of married migrant couples and a child or children under five years of age. The results from the two surveys show that access to school was improving. Percent child access to school increased from virtually none in 2004 in the coastal provinces to one-third by the

time of the follow-up survey. The comparable proportions for migrant children in Chiang Mai and Tak were 23% and 43% between rounds (Table 7.21). The main reason given for lack of formal schooling was that the parents felt the child was too young and should be looked after at home until older.

Table 7.22 looks at older children of migrants (5 to 12 years) and the degree to which they were accessing formal education. Fully 93% of children of migrants in Chiang Mai and Tak were in school compared to only 40% for children in the coastal provinces. Parents cited lack of money, distance, and lack of an ID card as reasons for lack of better access to school for their children. The results of the survey point to the need for greater efforts to help children of migrants in coastal areas to have access to schooling, at least to the same level as those in Chiang Mai and Tak.

#### ***7.5.7 Access to health care for children***

Table 7.24 presents data on access to under-five health care for children of migrants when they were ill or injured. The percent of female migrants in the northern provinces (Chiang Mai and Tak) who could access health care for their under-fives increased from 85% to 99% between the two survey rounds. Similarly, among older children age 5 to 12 years, 100% in coastal provinces and 97% in non-coastal provinces could access care when ill or injured. In summary, Thailand is providing good health care for the migrants in its borders, not just the laborers themselves but also for the accompanying family members.

# Information and Knowledge about HIV/AIDS and Condom Use

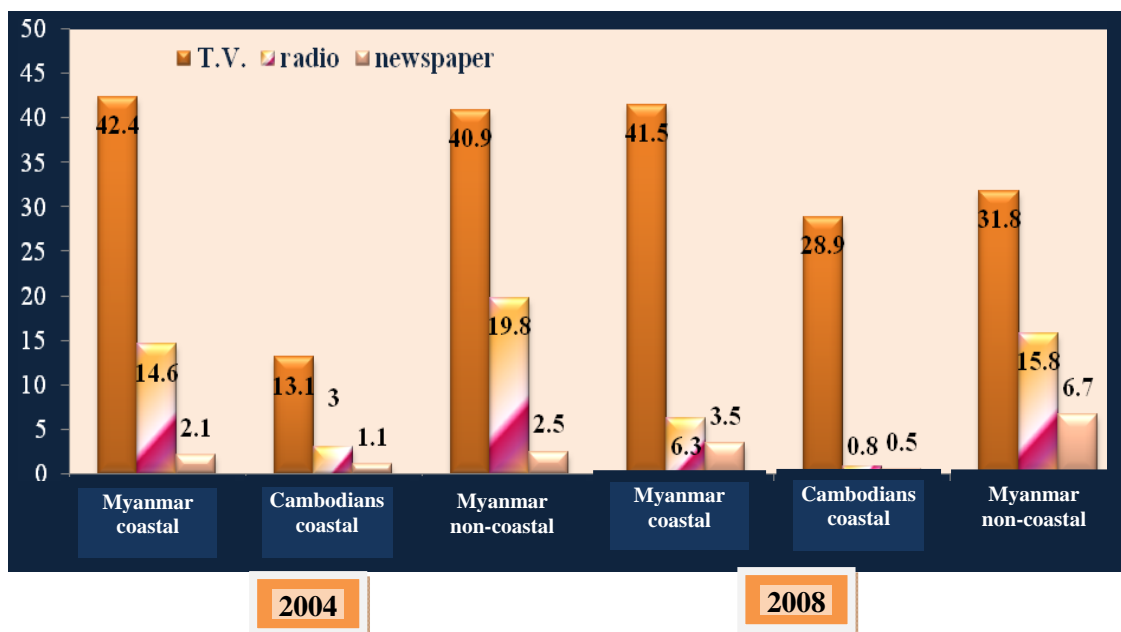
An important feature of the evaluation, is the degree to which the migrant population received and absorbed the behavior change communication (BCC) messages of the PHAMIT Project, since this was a key feature of the Project strategy. It is also a measure of the extent of coverage of PHAMIT. The data in this chapter refer to exposure to messages on HIV/AIDS and condom use by various channels including television (TV), radio, and newspapers. The data are presented as a comparison of exposure before and after the PHAMIT training activities were conducted. Data are also presented on the degree of migrant involvement in the various BCC campaigns and activities of the Project.

## 8.1 Information from general sources: TV, radio, newspaper

Respondents were asked about the frequency of TV watching, radio listening, and newspaper reading in the month prior to the interview. Table 8.1 shows the results for both baseline (2004) and follow-up (2008) surveys. Despite their relatively lower income status, many migrants in this survey watched TV daily, especially those Burmese migrants in the coastal provinces in 2004 (42%). The percent of Cambodian migrants reporting daily TV-watching was lower, especially for those who worked as fishing boat crew. In the 2008 round, only those who had ever heard of HIV were asked these questions. By 2008, the Burmese still had higher TV viewing practices than the Cambodians though there were increases among the latter. It can be concluded that television was an important media source for the migrants, noting that this also included video viewing.

It is somewhat surprising that radio listening among the migrants was lower than TV viewing in both 2004 and 2008 surveys (see Figure 8.1). Only migrants in Chiang Mai and Tak had a significant level of use of this media outlet. But it is important that, for some respondents, even though the number is small, the radio was their only media channel. Less than 5% of migrants in any group read the newspaper daily.

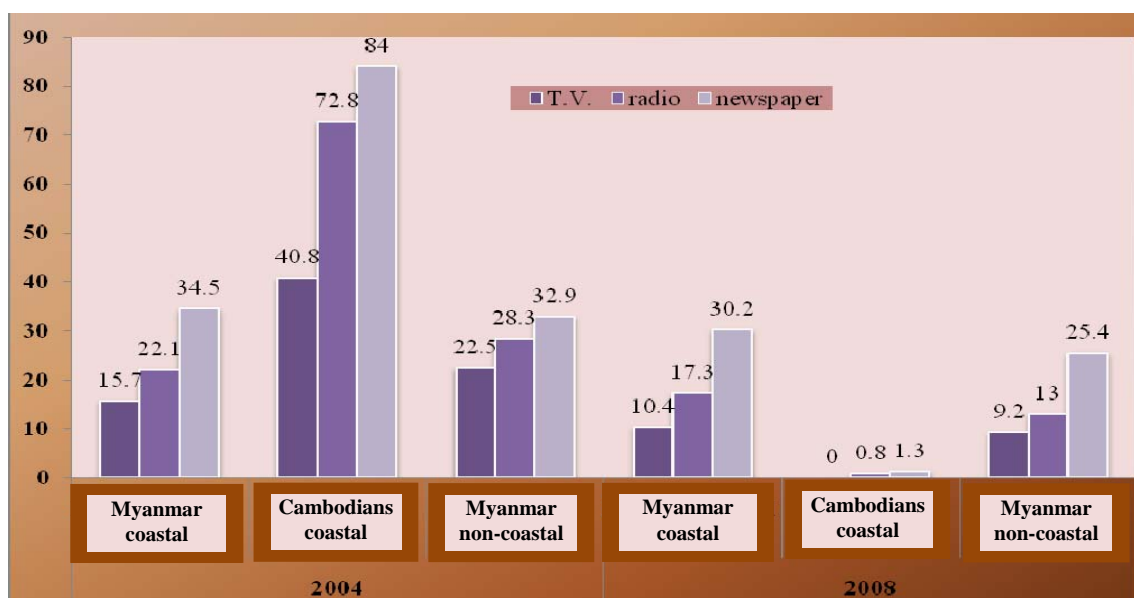
**Figure 8.1**  
Migrants' access to TV, radio and newspapers in the past month



Remarks: In the 2008 round, only asked of those who had heard of ART

Figure 8.2 presents data on lack of access to these three media outlets. In 2004 approximately 20% to 40% of migrants did not watch TV in the month prior to the interview. This proportion declined to about 10% across groups in 2008. In the follow-up survey, approximately 50% to 70% of respondents did not listen to the radio in the month prior to the interview, and this was generally the case for all of the sample groups. Newspapers were generally the least accessible media for the migrants in both survey rounds. In sum, radio and newspapers were not a favorable channel by which to reach the migrants with BCC messages.

**Figure 8.2**  
Migrants' lack of access to TV, radio, and newspapers in the past month



Remarks: In the 2008 round, only asked of those who had heard of HIV



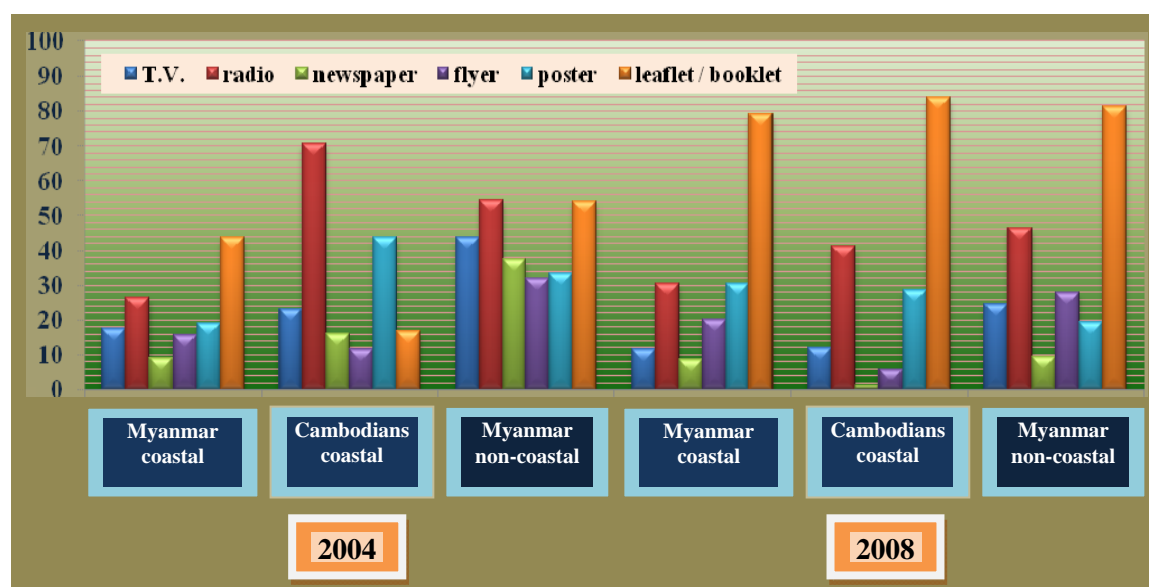
## 8.2 Information and knowledge on HIV/AIDS gained before migrating to Thailand

Table 8.2 presents data on exposure of the migrants to information on HIV/AIDS prior to migrating to Thailand from their country of origin. It is noteworthy that migrants' level of HIV/AIDS awareness was relatively high even before coming to Thailand. Fully 95% of Cambodian migrants in the baseline and 99% in the follow-up had heard of HIV/AIDS before. Female Burmese migrants had the lowest pre-migration level of awareness. Across groups, males generally had higher awareness than females.

## 8.3 Sources of knowledge about becoming infected with HIV and/or STIs

Table 8.3 presents data on sources of knowledge about transmission of HIV and STIs. There are multiple sources, and exposure varies among the sample sub-groups. Both in the 2004 and 2008 surveys, printed matter was a common source of information on HIV and STI transmission (e.g., flyers, leaflets, booklets, etc.) and this pattern increased significantly over rounds (from 43% to 81% respectively). The biggest increases occurred among the Cambodian migrants (from 17% to 84% who learned of HIV and STI from printed matter). Next common sources of information included TV, posters, radio, billboards, newspaper, public announcements, film, drama plays, street theatre, and puppet shows. Multiple media sources were cited by many of the migrants, especially in the northern provinces of Chiang Mai and Tak, who reported the most diverse array of sources among groups

**Figure 8.3**  
Migrants' source of knowledge about HIV and STIs transmission



## 8.4 Experience in gaining AIDS knowledge

Table 8.4 presents data on response to the question “who (if any) gave them information or training on HIV/AIDS and STIs in the past year”. In 2004 and 2008, Cambodian migrants were more likely to have received information or training on HIV/AIDS/STIs than their Burmese counterparts, and this increased significantly

over rounds (from 57% to 94% respectively). For migrants from Myanmar who were living/working in coastal provinces, the proportion receiving information/training on HIV/AIDS/STIs more than doubled from 20% to 53% over rounds.

Those migrants who said they had been contacted/trained on HIV/AIDS/STIs were asked who the provider was (to help narrow the focus of the evaluation to PHAMIT interventions). The data in Table 8.4 show that, in both 2004 and 2008, there were multiple sources for this information or training. Male Cambodian migrants were more likely to cite NGO volunteers as the source more than their Burmese counterparts, and this increased over rounds from 80% to 95%. By contrast, from 60% to 70% of the Burmese migrants cited NGOs or NGO volunteers as the trainer/information source in the past year. The same was true for migrants in the non-coastal provinces of Chiang Mai and Tak: the most common source of information/training on HIV/AIDS/STIs was a migrant health volunteer/worker from an NGO agency (working under PHAMIT). Other sources included health center staff of the government and staff of non-PHAMIT NGOs or private agencies. It is noteworthy that most of the volunteers of NGOs working under PHAMIT worked intensively and achieved deep outreach coverage into the target population, and this was most true in the case of male Burmese migrants, in 2008.

Table 8.5 presents data which established that, to be effective, the HIV/AIDS/STIs information and training needs to be delivered in the native language of the migrants. This was a key feature of the PHAMIT Project and these efforts were reflected in the increased proportions of Cambodian and Burmese migrants who received information/ training in their own language, from 91% in the baseline round to 97% in the follow-up.

## 8.5 Experience in gaining knowledge about condom use

Table 8.6 presents data on the migrants' receipt of knowledge about condom use. The results are similar for the previous indicator on receipt of information/ training on HIV/AIDS/STIs. Improvements for this indicator were recorded for all groups in all locations over rounds. In particular, male Cambodian migrants' receipt of condom knowledge increased from 56% to 93% in 2004 and 2008 respectively.

Table 8.7 presents data on source of printed material on condom use, and the results are similar to that for the variable on HIV/AIDS knowledge sources. In other words, not one single media channel dominated, but multiple sources were cited including leaflets, flyers, and booklets. The percent citing these sources increased over rounds. The increase was most dramatic for Cambodian migrants: four-fold from 20% to over 80% in 2008. The migrants were asked who provided the information on condoms. The most commonly cited type of provider were the NGO migrant volunteers working under PHAMIT, especially for the Cambodian men (from 83% to 96% over rounds). The language used in delivering this information increased from 80% migrant's native language in 2004 to 95% in 2008.

## 8.6 Experience in participating in HIV/AIDS/STIs awareness campaigns or meetings

A key BCC strategy of PHAMIT was to involve the beneficiary population in the BCC activities as much as possible, since this has been proven to be a more effective and long-lasting method of awareness-raising and behavior change. Table 8.9 presents data on degree of participation of the migrants in PHAMIT activities between survey rounds. In the baseline, 22% of respondents had participated in BCC activities and/or meetings on HIV/AIDS/STIs. About half of the male Cambodian migrants had participated in an activity; 30% of female Burmese migrants in Chaing Mai/Tak had done so. It is noteworthy that the level of migrant participation in BCC increased by the follow-up round to 52% of respondents overall. Cambodian migrants showed the highest level of participation and increasing participation from 49% in 2004 to 82% in 2008. This is probably due to the geographic characteristics of the locality and community which facilitated the participation of the Cambodians in the various activities, and continuously throughout the year.

Generally, female migrants participated in BCC more than the males, and showed greater increases in participation. In particular, the Cambodian women increased their level of BCC participation from 21% in the baseline to 92% in the follow-up. Burmese men and women in coastal provinces had the lowest levels of BCC participation even though increases were observed between rounds. This could be the result of the type of occupation and the geographic features described above.

Table 8.10 presents data on the proportion of family members of migrants who participated in BCC activities or group meetings on HIV/AIDS/STIs. The result is that few did. Respondents reported that they participated in these events as an individual; they rarely (if ever) went as a couple. This includes couple participation in campaigns or meetings, which was found to be rare: only 20% reporting doing so.

## 8.7 Ever screened for STIs

One way of confirming that the migrants absorbed the Project messages and took appropriate action is to look at the proportion who went for STI check-ups. Table 8.11 presents data on the percent of migrants who were screened for STIs. In 2008 about one-third were screened. Over half of the Burmese women in coastal and non-coastal provinces went for an STI screening 57% and 52% respectively). By contrast hardly any of the Cambodian migrants (male or female) went for STI screening (approximately 2%). These results are inconsistent with each other and may be the result of misunderstanding of what constituted an STI screening visit.

## 8.8 Knowledge of HIV test sites and experience with HIV testing

The PHAMIT Project also emphasized the importance of knowing one's HIV sero-status, especially if they had risk behavior for HIV. By the follow-up round in 2008 most of the migrants (58%) knew a site for HIV blood screening, with the highest awareness among Burmese migrants in Chiang Mai and Tak (80%) compared to only 40% of male Cambodian migrants (see Table 8.13).

Among migrants who knew of an outlet, public and private hospitals were the most often cited site for HIV screening (70%) down to the health center (13%). Migrants in Chiang Mai and Tak listed the hospital somewhat less frequently than others (54%) but cited the health center more (20%).

Table 8.14 presents data on the proportion of migrants who had an HIV test. Approximately one-fourth had ever been tested, reaching as high as 40% for Burmese migrants in Chiang Mai and Tak (males 33% and females 50%). In the coastal provinces, one-fifth had been tested for HIV and only 7% of Cambodians had done so.

The reason for obtaining the HIV test varied. More of the Burmese in the north region (who had an HIV test) were tested as a requirement for a job application (one-third); as part of ANC care (28%), as part of general health check (22%), as part of the process of donating blood (22%), as pre-marital screening (13%), and suspected HIV risk in oneself or one's partner (10%). This proportion indicates a basis for seeking services, providing counseling and testing for HIV on a voluntary basis (voluntary counseling and testing – VCT) in the future.

By contrast the Burmese migrants in the coastal provinces cited job application procedure (30%), were curious (23%), suspected HIV risk (5%), and compulsory testing (15%). Among the Cambodians, 31% were tested because they were curious, 15% because they suspected HIV risk, and 15% were compelled to take the test. Activities to promote VCT are still definitely needed for the population of migrant laborers.

Approximately two-thirds of those who were tested received pre-test counseling. More Burmese migrants in northern provinces than in coastal provinces received counseling (73% versus 51%). Only 45% of male Burmese in coastal provinces received HIV counseling prior to the test. Most who were tested (all groups) were tested in the 12 months prior to the interview (73%). The setting of targets for VCT uptake needs to take into consideration the present demand for these services – especially by location and nationality. For example, the Burmese migrants working in Chiang Mai and Tak received counseling more than those in coastal provinces (79% versus 67% respectively having had an exam in the past year).

Fully 80% had their test at a government hospital, 10% at a health center, and the remainder at private outlets under 3%. As for differentials by location there was not much variation among the Burmese sample as more than 90% received their test results, almost all did in Chiang Mai and Tak – which is the way it should be. In any event, when the respondents were asked whether they were told what to do after receiving their test results, 1 out of 4 of the Burmese were told where to go for follow-up treatment/care, which is rather high and probably includes all of those who were found to be HIV-positive.

### 8.9 Knowledge of anti-retroviral drugs for treating AIDS (ARV)

Since 2004, Thailand has expanded access to anti-retroviral therapy (ART). International migrant workers are also being included in the program. Thus, the 2008 round of the evaluation survey included questions about knowledge of ART. Approximately two-thirds had heard of ART, more among those in Chiang Mai and Tak. There were high levels among Cambodian migrants too, who had knowledge levels over 80%.

When asked about their source of knowledge of ART, more cited the migrant volunteer (40%) than other sources including flyers hand-outs (28%), migrant health workers (20%), friends or neighbors (30%), and seminars (6%). Only 13% cited government health workers as a source of information about ART. Mass media was cited as a source for 9%, 13% and 8% for radio, TV, and newspapers (respectively).

More Cambodian migrants had learned of ART from a migrant health volunteer (82%) than had non-coastal Burmese migrants (51%) but less from the migrant health worker (17%) than had coastal Burmese migrants (22%). Especially in the case of male Burmese migrants, only 18% cited the volunteers, while 28% of both Burmese males and females knew of the migrant health worker. It is impressive that the migrant health volunteers and workers were the most important source of information on ART for the migrant laborer populations.

### 8.10 Participation in blood donation campaign

In 2004 and 2008 respondents were asked if they or any family member ever participated in a blood donation campaign. The table in the appendix presents data which shows that 15% in 2004 and 20% in 2008 were aware of the blood drive; the increase was more pronounced among Burmese in Chiang Mai and Tak (18% to 41%). However, very few actually donated blood (5% in 2004 and 8% in 2008). More Burmese in northern Thailand donated blood and this increased over rounds (10% to 25%).

The donation of blood by 1 out of 4 of the male Burmese migrants in Chiang Mai and Tak represents an exemplary level and reflects the success of the blood drive campaign to create awareness of the need to sacrifice for the community and society – and to ensure an adequate blood supply for the migrants themselves. A final point is that the blood donation campaign also helped promote awareness about proper health care and prevention of HIV/AIDS. This is further indication of the success of the Project, and that these activities should be expanded and extended to other groups of migrants to achieve the same level of success.



## Knowledge of Service Outlets or NGOs in the Neighborhood

In addition to access to information on prevention of HIV and other health services, it is an obvious criterion for the success of PHAMIT that the beneficiary population knows about the Project service outlets and where to get what types of services. The data in this chapter look at the facilities and staff of the PHAMIT partners working in the vicinity of the migrants' homes, the duration since inception of awareness of these outlets and workers, access to and use of the services, knowledge or benefit gained from the service, recommendations for improving the service, and a self-assessment of any personal behavior change that the migrants feel is attributable to the Project.

### 9.1 Knowledge of service outlets, organizations, or personnel, and knowledge of the service providers' name

Table 9.1 presents data on the proportion of migrants in the 2008 impact survey who had received information and services on HIV/AIDS and/or condoms from a Project outlet. Most migrants knew of partner NGO in the vicinity, especially the Cambodians and Myanmar migrants in Chiang Mai and Tak (93%), knowing the name of the organization (87%), knowing the name of the migrant health volunteer or worker (6%), and of the migrants from Myanmar in coastal provinces, 70% knew the name of the organization and 2% knew the name of the migrant health volunteer or worker. Among the entire sample of migrants, male migrants from Myanmar living in coastal provinces knew about the NGOs or service providers in the locality in similar proportions (68% knew the name of the organization while 2% knew the name of the migrant health volunteer/worker). The differences in awareness levels could be due to the degree to which some migrants spent long periods of time at sea.

It is impressive for the PHAMIT Project that the results of the survey found that those migrants who knew of the local NGO or service provider also were able to name that organization, reaching a level as high as 96%, and 100% for Cambodians, male and female. Raks Thai Foundation (also known as CARE) was the most widely known among Myanmar migrants and migrants in coastal provinces – especially among the women, of whom 70% knew of Raks Thai. Also, the AIDS rights group CAR was well-known: 41% of Cambodians in coastal provinces knew of this organization. The MAP Foundation for Health and Education for Ethnic Minorities was the most-

known agency for Myanmar migrants in Chiang Mai and Tak (over 50%). Fully 43% of this group also identified the World Vision Foundation of Thailand.

## 9.2 Duration of knowledge of the organization or service provider in the neighborhood

Migrants who knew of Project outlets were asked in 2008 how long they had been aware of this outlet, NGO or Project personnel. Table 9.2 presents data on the responses. Average duration of knowledge was nearly two years (1.8 years), with women having known the Project longer than the men. This shows that female migrants had participated more in activities and had time to participate in the Project over a longer duration or had lived in the Project area longer than the males. In addition, because the women had less mobile occupations this facilitated their participation in and knowledge of the Project more than their male counterparts. The migrants in Chiang Mai and Tak knew of the Project for an average of 2.08 years, and the women actually had a shorter duration of knowledge (2.01 years compared with 2.13 years for the males). This could reflect more recent in-migration by the women because of the creation of new jobs for women. At the same time, the PHAMIT Project may have reached these individuals more quickly and on a continuous basis upon contact.

Myanmar men in coastal provinces had slightly lower than average duration of Project knowledge (1.79 years) as the male migrants had less knowledge duration than the women (1.70 years versus 2.07 years for the women). This could be because in this area there were more jobs for men resulting in more in-migration, and less duration of stay and corresponding less Project awareness. Cambodian men in these provinces had the lowest exposure at 1.4 years.

However, it should be noted that when interpreting this indicator, not all respondents had the same duration of exposure to the Project. That is, migrants were constantly moving in and out of the Project areas throughout the five years of implementation. That said, as an average, two years of Project knowledge would seem to be adequate time for most eligible migrants to take full advantage of the PHAMIT services.

## 9.3 Source or channel of access to knowledge about the local service provider

Table 9.3 presents data on source of knowledge about the local PHAMIT service provider. Some assimilated the information without citing a specific source, others learned this information from NGO staff, some mentioned friends and family members as the source, and others cited printed materials and hand-outs from the local organizations. Of those migrants who knew of the PHAMIT Project, 63% learned of it from a local organization or NGO (more in the case of Myanmar in the north), 30% learned of it from friends (mostly in the case of Cambodians). Approximately one-fifth (22%) cited printed materials as the source of Project awareness (more so in the case of Myanmar women in the north and very little in the case of Cambodians generally).

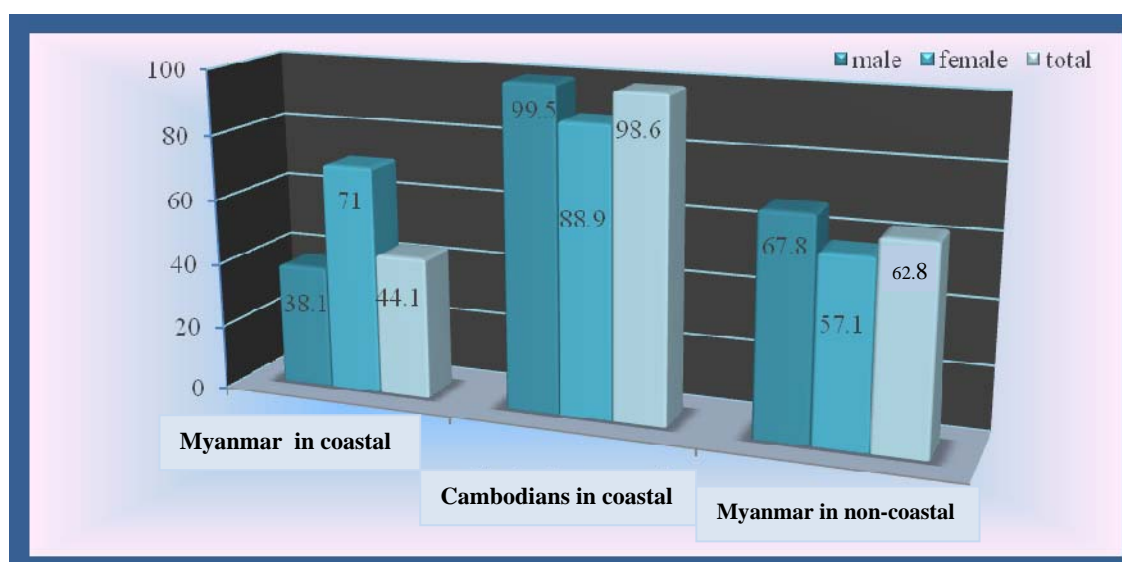


#### 9.4 Experience of using the services of the local organization or service provider

Respondents were asked if they ever used Project services, one of the most important outcome variables in this evaluation. Table 9.4 presents data on use of services by type of outlet. For the Project drop-in center (DiC) and other static Project facilities, Cambodian migrants had used the services most among sub-groups (99%). Among female migrants from Myanmar living in coastal provinces, 71% had ever used the services of the PHAMIT outlets, compared to 68% of Myanmar men in the north, and 57% of the Myanmar women in the north. Only 38% of Myanmar men in coastal provinces had used the static outlet services, perhaps reflecting the fact that more of this sub-group was employed as deep-sea fishing boat crew. See Figure 9.1.

**Figure 9.1**

Migrants' history of ever using the services at the Project drop-in center, local service provider outlets, clinics, or NGOs



#### 9.5 Services used by the migrants

*(Note: The data in this section focuses on services at the drop-in center.)*

Migrants who had used the services of the static outlets were asked what services they received. A variety of services were provided to these migrants including general health exam, STI diagnosis and treatment, STI/HIV counseling, ANC, HIV screening, post-natal care, condoms, contraceptive injection, rest and relaxation activities, language training, legal assistance, and information about referral to needed services. Table 9.5 presents data on the distribution of responses for this item. The most commonly received service was a general health check-up (56%), followed by HIV counseling (54%), STI counseling (45%), condoms (32%) and STI diagnosis/treatment (11%). Other than these, other services that were sought and received in lower proportions such as counseling for referral (only 3%).

Migrant women also went for ANC and maternal and child health (MCH) services. Fully 12% used PHAMIT Project outlets to register for ANC, and 14% received post-natal care. These levels are not low if the denominator of eligible women only is considered; indeed coverage was quite high. One-fourth (24%) of the women went for condoms, 12% went for contraceptive injection, 12% went for sterilization, 5% for referral to a government hospital, 5% for language training, and 3% for legal assistance.

There are other gender differences by service utilization. Myanmar male migrants in coastal provinces were more likely to use the general health exam service (56%), followed by HIV counseling (46%), STI counseling (35%), condoms (23%), and STI diagnosis/treatment (11%). Myanmar women in coastal provinces also were most likely to use the general health exam service (71%) followed by post-natal care (18%), ANC (12%) and sought the injectable contraceptive the most (12%), which shows that the drop-in center was a strong source of a variety of services, and met the needs of the migrants, both male and female.

By contrast, the most common service used by the Cambodian men was diagnosis/treatment of STI symptoms (73%), followed by HIV counseling (69%), condoms (48%), and general health exam (47%).

A large proportion of the migrants in Chiang Mai and Tak (male and female) sought PHAMIT Project services for HIV counseling (63%), followed by STI diagnosis/treatment (45%), condoms (42% of males), ANC (13% of females), contraceptive injection (12% of females), post-natal care (10% of females) and legal assistance (4% of females). It can be seen that, similar to that described above, the PHAMIT drop-in center was an effective source of services to meet the variety of needs of the migrant population.

## **9.6 Services which the migrants would like to see added**

Respondents were asked what they would like to see added to the array of Project services. Many of the migrants from Myanmar (in both coastal and non-coastal areas) were satisfied with the PHAMIT services as is. However 47% of the female Myanmar in coastal areas, and 43% in the north would like some additional services. Those in coastal provinces would like more information on their rights while women in the north were interested in more health information and training in nursing techniques. A few would like to see more media and materials. By contrast, only a small proportion of Cambodian migrants would like to see more services (see Table 9.6). That is, their needs seem to have been met by the Project.

## **9.7 Experience of receiving knowledge from the service provider, NGO, or personnel, and the nature of the knowledge received**

Interaction with a Project service provider to increase knowledge/awareness is also an important indicator of PHAMIT success. Almost all of the migrants who knew of the Project had received some information from Project staff that raised their awareness. Only Myanmar migrants in coastal areas and Myanmar in the north reported less

than 100% coverage of information from exposure to the Project (93% and 85% respectively).

The frequency of information-related contact with Project staff was about 4 times for male migrants and 5 times for female migrants. The largest number of incidents of receiving knowledge was reported by Myanmar migrant women in coastal provinces, whose source of information was local NGOs or officials (6 times compared to only 4 times for their male counterparts).

Table 9.7 presents data on what the migrants learned from these contacts. Overall, 79% of the migrants learned about HIV/AIDS, followed by STIs (63%), condoms (57%), Maternal and Child Health or MCH (17%), and living with PLHA (5%). This ranking of information topics is consistent with the PHAMIT BCC strategy and priorities. In addition, even though this survey found that there was limited knowledge about laws (2%) migrants do have specific needs for information that extends beyond health, and were able to receive some of this information from NGOs or staff in the locality.

The channels for information delivery varied among the migrants. Nearly half (49%) received the information from small group discussions, 36% from training or lectures, 11% from motivational campaigns or exhibitions, 9% from educational videos, and 7% from personal/individual conversations.

Both the Myanmar and Cambodian migrants, male and female, had high proportions who received knowledge from local NGOs or staff in the locality. It is noteworthy that males and females differed however, with males having more exposure to knowledge inputs than females.

From the findings discussed earlier, delivery of knowledge met the needs of the migrants. Fully 91% of the Cambodian male migrants received knowledge about condom use compared to 67% of their female counterparts. However the Cambodian women received more information about prevention of HIV and STIs than did the men.

For the Myanmar migrants in coastal and non-coastal areas, the migrants received knowledge inputs according to the PHAMIT Project targets to a satisfactory level across multiple topics. Fully 70% and 84% received knowledge about HIV infection and prevention of HIVS in the two Project areas respectively. Also, 60% and 70% received knowledge about prevention of STIs in the two areas respectively. Only 46% in coastal areas and 64% in non-coastal areas received knowledge about condom use. It is noteworthy that 1 in 3 female Myanmar migrants received knowledge about MCH services which indicates satisfactory coverage by PHAMIT regarding MCH for the target population.

## 9.8 Print media received from the local service provider or NGO

Most of the migrants in this study had received or seen printed materials or other informational media from the PHAMIT Project partners in their neighborhood (Table 9.8). All Cambodian migrants had received some Project material, 78% of female Myanmar migrants in the coastal provinces had received some materials, as had 77% of male Myanmar migrants in the north. However, only 63% of female Myanmar migrants in the north had received or seen printed Project materials or media.

The type of media varied among flyers, leaflets, CDs, DVDs, VCDs, booklets, posters, thematic hand-outs on living with PLHA, condom use, AIDS, and STI, family planning, good health status, MCH, and other themes. Diary books, calendars, magazines and comic books were also some of the media that migrants cited as the source of Project information. In any event, leaflets or fliers were the most common media received by migrants in the coastal provinces. Especially among the Cambodians, printed materials were the most commonly received (79% followed by posters at 41%).

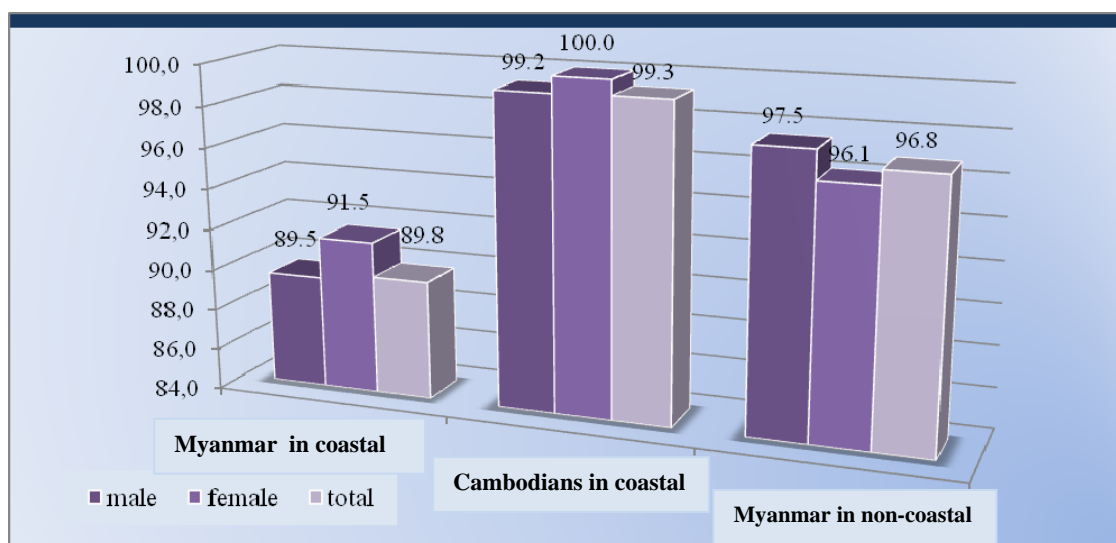
By contrast, migrants in the north cited booklets or magazines as the most received media. Almost all (99%) of the Cambodian migrants thought that the printed material and media from the Project was useful for them, whereas about three-fourths of the Myanmar felt that way (75% to 79%).

## 9.9 Services received from the local organization or NGO

When asked whether the Project services were beneficial for them, almost all the migrants in both areas from both countries of origin felt that, yes, the PHAMIT services were beneficial (Figure 9.2). Especially among Cambodians, it can be seen that 100% thought the services beneficial. Among Myanmar in Chiang Mai and Tak, 97% thought the services were beneficial compared with 90% in coastal areas.

**Figure 9.2**

Attitude of migrants that PHAMIT Project services are beneficial for them



Migrants were asked what type of services were most beneficial (Table 9.9). About half (51%) of the male Cambodian migrants cited information on health maintenance or prevention of HIV as the most beneficial, followed by condom supply (27%). Similarly, 56% of Cambodian cited the information on general health and prevention of HIV as being most beneficial followed by prevention of STIs (28%). Among Myanmar men, 68% thought that information on prevention of HIV was the most beneficial Project service, while 16% cited condom supply. Similarly, but less so for Myanmar women in Chiang Mai and Tak, 36% valued the general health information and information on prevention of HIV. Among Myanmar women in coastal areas, 70% thought the information on general health, prevention of HIV, and AIDS was most useful.

### **9.10 Were services the result of the local organization or NGO?**

Table 9.10 shows data from the attempt to determine whether services received were actually Project-delivered or from some non-Project source. Nearly all (99%) of the Cambodian migrants, 83% of the Myanmar migrants in Chiang Mai and Tak, and 78% of Myanmar in coastal provinces asserted that the services they received were from PHAMIT NGOs or other Project service providers.

### **9.11 Recommendations for improvement**

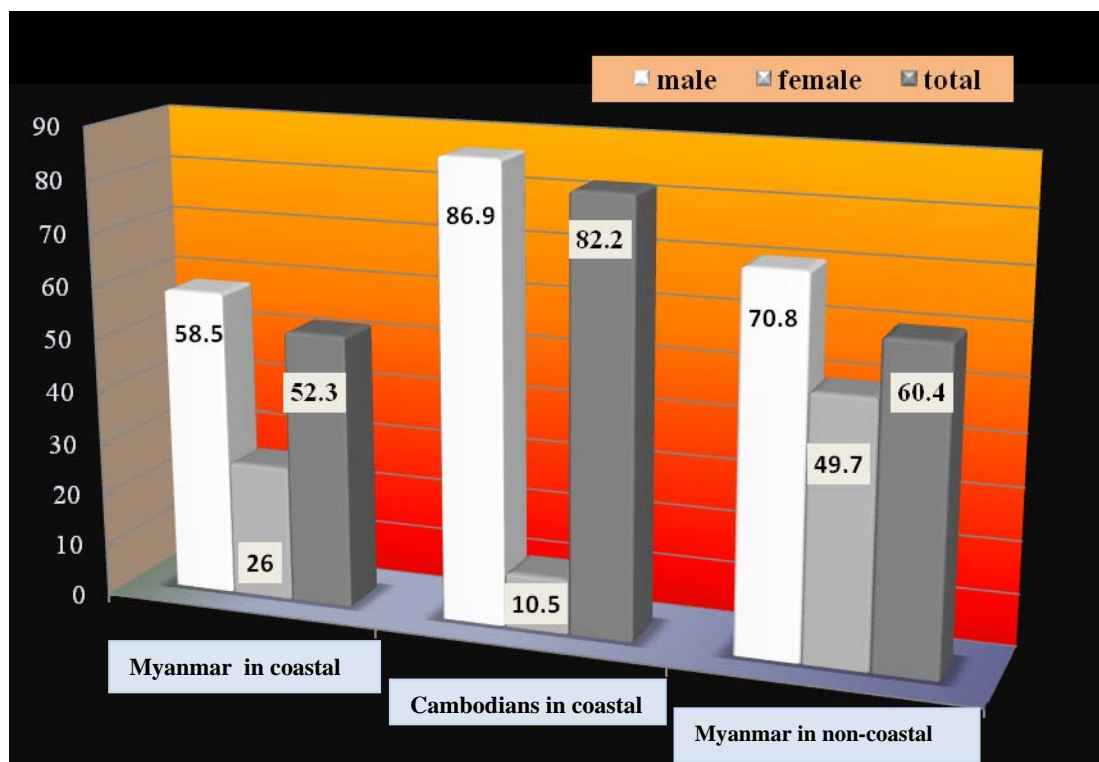
Even though most migrants in this study were satisfied with the PHAMIT Project services as is, some had suggestions for additions or improvements. About 5% of Myanmar males in Chiang Mai and Tak and 4% in coastal provinces would have liked to see more outreach visits by Project staff. Approximately 4% of female Myanmar migrants in coastal provinces would have liked to see more female Project workers, and 2% (all groups) would like to see more migrant health volunteers/workers.

### **9.12 Sexual behavior modification**

Respondents were asked whether they had changed their sexual behavior after encountering the PHAMIT Project messages and staff. Table 9.12 presents data on this item for the sample in 2008. Most of the males and some females report having modified their sex behavior (to lower risk) after experiencing the PHAMIT interventions. Fully 87% of the male Cambodian migrants said they had changed their behavior for the better compared to only 11% of the Cambodian females. For the migrants from Myanmar, 59% of males in coastal provinces said they had changed their behavior, compared to one-fourth of the females. In Chiang Mai and Tak, 71% of the males and 50% of the females said they had improved their sexual behavior after receiving the interventions from PHAMIT (see Figure 9.3).

**Figure 9.3**

Services from the agencies/Project have a positive effect on sexual behavior of the target population

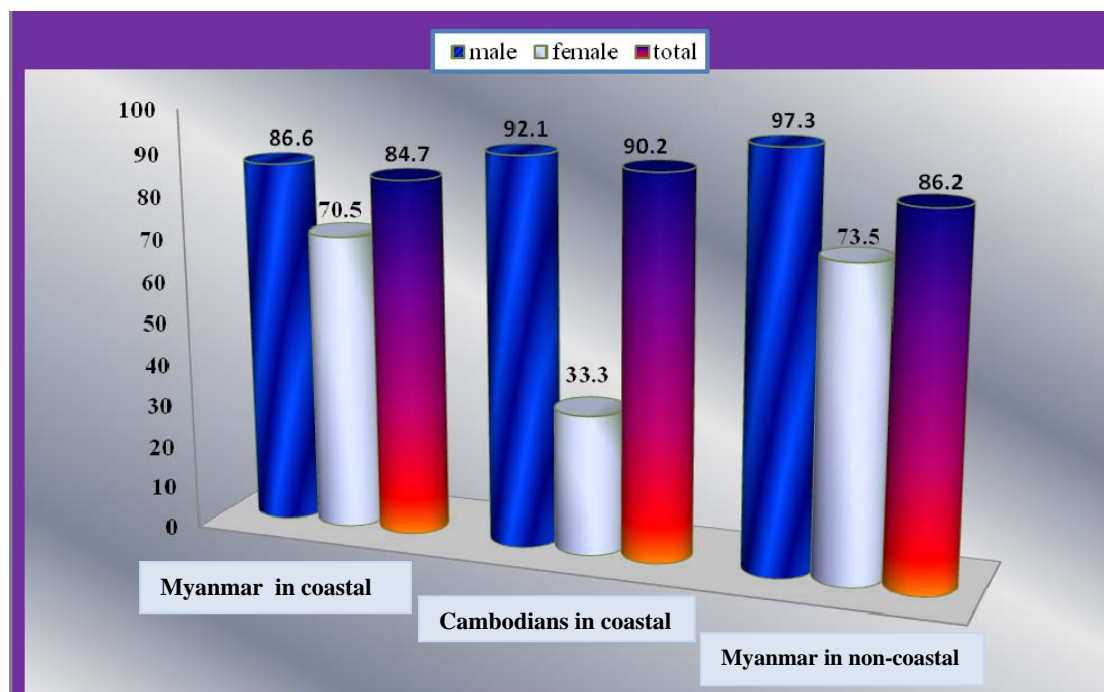


Those respondents who said they had modified their sexual behavior were then asked how they had modified their behavior. Among the Cambodian males, 84% said they used condoms more after the PHAMIT Project, followed by 69% of Myanmar male migrants in the north, and 62% of Myanmar male migrants in coastal areas. Fully 78% of the Myanmar women in Chiang Mai and Tak cited more condom use as the way they had modified their sex behavior.

A secondary type of behavior change was reduced number of sex partners. Among male Myanmar migrants in the north 57% said they made this modification during the period of PHAMIT implementation, followed by 48% of Myanmar men in coastal provinces, and 23% of Cambodian men.

When asked once again whether they felt their sex behavior change was attributable to PHAMIT or some other factor, over 90% of the Cambodians reaffirmed that it was due to the Project that they changed. Fully 97% of Myanmar migrants in Chiang Mai and Tak responded this way as well, as did 87% of Myanmar men in coastal provinces (see Figure 9.4).

**Figure 9.4**  
Change in sex behavior attributable to the PHAMIT Project efforts







# CHAPTER 10

## Summary

The baseline survey 2004 and impact survey in 2008 were part of the effort to assess impact of the PHAMIT Project. Fieldwork for the two surveys was conducted during April to June, 2004 and during January to May 2008. The sample included both male and female migrants from the origin countries of Myanmar and Cambodia. The sampling was conducted among a portion of the 22 provinces where PHAMIT was implemented. The sample included migrants who were legally registered to work in Thailand and those who were not. The population size estimates for the purposes of sampling were made in consideration of the number of migrants registered under the 2001 Cabinet resolution and from Raks Thai Foundation estimates of the number of unregistered migrants (mostly working in the fisheries industry).

### 10.1 Methodology

The sample site locations were chosen in consideration of the different nationalities and occupations of the migrants. The selection of provinces to be included in the sample was conducted based on probability proportional to size of estimated migrant populations residing within the Project area. Selection of respondents to be interviewed used the snowball technique or the chain-referral method starting with a seed respondent.

In 2004 a total of 3,374 persons were interviewed including 2,712 males and 662 females between the ages of 15 and 49. Of these, 2,423 were from Myanmar (2,026 males and 397 females) and lived/worked in coastal provinces of Thailand; 466 were from Cambodia (428 males and 38 females) who also lived/worked in coastal provinces; and 485 were from Myanmar (258 males and 227 females) and lived/worked in the two northern provinces of Chiang Mai and Tak.

For the follow-up round in 2008 the same methodology was used as in 2004. A total of 3,387 interviews were completed including 2,731 males and 656 females aged between 15 and 49. Of these 2,436 were from Myanmar (2,045 males and 391 females) who lived/worked in coastal provinces of Thailand; 466 were from Cambodia (428 males and 38 females) who also lived/worked in coastal provinces; and 485 were from Myanmar (258 males and 227 females) who lived/worked in Chiang Mai and Tak in northern Thailand.

## 10.2 General characteristics of the migrant workers

In this report, data were presented on the general social, economic and demographic characteristics of the sample, and data on the key evaluation indicators of PHAMIT including knowledge about HIV/AIDS, routes of transmission, attitudes toward HIV infection and AIDS, sexual behavior of the migrants and their spouse/partner, condom use, life skills, knowledge of rights to access health care, practice of family planning, reproductive health, and access to reproductive health services. The two surveys occurred at the beginning and end of the five years of PHAMIT implementation and, thus, represent a pre-post comparison of the Project effects.

The results of the analysis show that most of the migrants who lived in coastal provinces had jobs related to the fisheries industry such as fishing boat crew or associated jobs. By contrast, migrants in the non-coastal provinces primarily worked in factories, or agricultural wage labor, or market jobs. Most of the migrants did not have legal authorization to work in Thailand. More of the men were illegal. In the 2004 survey the average daily wage was 100 to 150 baht, which is lower than the Thai minimum wage. By 2008 however, Myanmar migrants in coastal provinces had an average daily wage as high as 200 to 300 baht. Migrants from Myanmar had spent more time in Thailand than their Cambodian counterparts. But movement in and out was continuous during the five years of Project implementation. More of the Myanmar migrants had relatives living in Thailand and were more proficient in communicating in Thai than the migrants from Cambodia.

## 10.3 Knowledge, opinions, attitudes regarding HIV/AIDS, condoms and STIs

Knowledge of HIV transmission was already high 2004, but continued to increase by the follow-up survey in 2008. Knowledge and understanding was more profound after the PHAMIT Project and attitudes regarding HIV/AIDS improved as well. Improvements in knowledge were particularly clear for condom use as a prevention technique, increasing from 79% to 89% among migrants employed as fishing boat crew, and from 76% to 95% among female migrants from Myanmar who lived in coastal provinces. Condom use was cited more for HIV prevention than for prevention of STIs. More Cambodian migrants than Myanmar cited condoms for both HIV and STI prevention. An area for improvement is the recognition of the dual protection properties of condoms to prevent both HIV and STIs as well as pregnancy.

Most respondents knew where to obtain condoms; migrants from Myanmar had greater knowledge of sources than those from Cambodia, but this differential may be due to duration of stay in Thailand. Most male migrants knew that you can get condoms from commercial sex establishments, guest houses and motels. Female migrants tended to cite the Project's migrant health volunteers, or a friend who had been trained by the Project as sources for condoms. Most of the migrants had positive attitudes toward condoms and knew how to properly use them. Yet there were differentials for these variables among nationalities and gender. There is room for improvement toward comprehensive knowledge and attitudes about condoms among the female migrant population.

Regarding sexually transmitted infections (STIs), comparison of the 2004 and 2008 surveys showed improvements, especially for the Cambodian migrants, who increased their STI knowledge to 97% (for males) and 87% (for females). Myanmar migrant women had a lower level of knowledge but they too improved for this indicator by a factor of five-fold over rounds. The results suggest that the PHAMIT Project provided improved access to knowledge and information about STIs, HIV and AIDS during the five years of implementation. The knowledge that having an STI can increase risk for acquiring/ transmitting HIV also increased, from 77% in 2004 to 87% in 2008. The percent of male migrants with complaints of STI symptoms in the 12 months prior to the survey declined from 2.7% to 1.2%; while the comparable percent for females increased from 1.2% to 1.7%.

In 2004 there were knowledge gaps concerning where to get an HIV test, and confidence in the testing process and confidentiality of results. However, by 2008 knowledge and confidence had improved, especially in the two northern provinces where the percent who knew where to get an HIV test increased from 57% to 79%.

#### **10.4 Migrant sexual behavior and condom use**

Migrants who lived and worked some distance from their spouse or family (such as fishing boat crew) tended to have sex more with non-regular partners than migrants who lived with their relatives. Also, migrants who were single, widowed, or divorced also reported more sex with non-regular partners.

In analyzing the survey data, it is important to focus on the type of sex partner of the migrants. Migrants who only have sex with regular partners should be the safest – but this depends on mutual trust and fidelity. But, as it is almost a cultural norm, there was little condom use among regular sex partners. If condoms are used, they are used for contraception in these relationships. Only 1.6 of Myanmar male migrants used a condom at last sex with a regular partner in 2004, but this increased to 7% in 2008. Despite the improvement, this level is far from satisfactory.

Sex with a non-regular partner is high among the population of male migrants – especially single Cambodian men who had an average of 5 non-regular sex partners in the 12 months prior to the interview. Sex with a girlfriend or fiancé was rarely reported as most of the non-regular partners were sex workers. The migrants had multiple sex partners of multiple types. Thus the Project and future prevention activities need to consider the very real possibility of “bridging” of infection among different sex networks, e.g., from sex workers to girl friends and fiancés via the men.

When comparing 2004 and 2008 data, it was found that many single male Cambodians had sex with non-regular partners. Fully 75% in 2004 and 90% in 2008 reported this. This increase indicates the urgent need for intensified prevention campaigns in this group of migrants.

Having sex with a sex worker was different among the Myanmar and Cambodian migrants, and among the two groups of provinces. Most of the Cambodian and Myanmar migrants who worked as fishing boat crew or in the fisheries had visited a sex worker in the past year. Thus, it is of the utmost importance to continue and intensify the condom promotion efforts in the local commercial sex establishments.

When studying the changes over the 5 years of the Project, it is found that 22% of the male Myanmar migrants in coastal areas reported having a non-regular sex partner who was a sex worker in the past 12 months. Only 5% of their counterparts in Chiang Mai and Tak reported doing so in 2004 and 3% in 2008. By contrast, more than half the Cambodian migrants in 2004 and 67% in 2008 had sex with a sex worker in the 12 months prior to the interview. Therefore, PHAMIT needs to place greater emphasis on interventions with fishing boat crew and workers in the fisheries, especially among the Cambodians who are showing an increase in risk behaviors.

As has been found in most surveys of sex behavior since the beginning of the HIV epidemic, condom use decreases in proportion to the commitment of the relationship. Thus, condom use among migrants was lowest with their spouse or regular partner and highest with sex workers. Condom use for contraception has always been low in Thailand and was also low among this group of migrants. But for all three categories of partner (regular, non-regular, commercial) condom use at last sex increased over rounds (1% to 7%, 29% to 90% and 90% to 97% respectively). This improvement can probably be attributed to PHAMIT Project interventions.

Though most migrants had knowledge of and access to condoms, a significant number reported not using them when they should for a variety of reasons including lack of perceived need, negative attitudes, dislike of condoms, and lack of planning ahead, among others. Use of alcohol and drugs prior to sex was still a persistent problem, and more adversely affected the ability or motivation to practice/negotiate safe sex. Follow-on projects need to pay special attention to the dynamic issue of drug use and unsafe sex. This includes the need to intensify activities to promote 100% condom use for prevention of HIV, especially in the population of sex workers and their migrant male customers, who showed an increasing prevalence of commercial sex during the 5-year period of study.

### **10.5 Migrant access to general health services, family planning and reproductive health services**

A key objective of PHAMIT was to increase migrant access to a range of services, not simply those related to HIV/AIDS. Three variables were measured by the two rounds of surveys: (1) access to general health services; (2) use of contraception; and (3) other reproductive health services. Overall, the migrants had good access to health care, and made use of a variety of outlets. Nevertheless, there were still gaps for those who could not get services when needed and those who used the services but were not satisfied with them. Some migrants could not access services because they had no I.D. card, or were illegal, or because the service site was too far to travel

to, or was too expensive. Overall level of migrant satisfaction with Thai and PHAMIT health care was good, but some of the Cambodian migrants in 2008 rated quality of service a bit lower than in 2004. Most migrants knew of their rights to access health care. The reason for not accessing services at government hospitals was largely due to lack of a worker ID and, hence, lack of proper health insurance. This barrier increased from 22% of respondents to 80% by the follow-up round, which clearly reflects a change in the profile of migrants over the two rounds, and a general increase in undocumented migration during that interval due to regulations on registering. Any continuation of PHAMIT activities needs to be adjusted and adapted to the new regulatory and policy environment, and use special strategies to help unregistered migrants access government services to a greater degree than at present.

Knowledge and use of contraception was quite satisfactory among the migrants. Contraceptive prevalence (modern methods only) increased from 61% in 2004 to 68% in 2008. Yet it must be recalled that the difficult lifestyle and frequent separation of the migrant couples made it very difficult for them to have a child while working in Thailand even if they wanted to. This dynamic issue requires further study.

Contraceptive use at present is high. The preference is for use of oral contraceptives (38%) followed by the injectable (19%) and condoms (11%). Use of permanent contraception is mostly limited to female sterilization (3%) and almost no vasectomy.

The high level of contraceptive use will lead to small migrant families. This study found that family formation among the migrants does not follow the normal pattern. Regardless of their family size preferences, the circumstances and limitations of their working life are not conducive to high fertility. Thus, couples have decided to have small families for the time being. Due to good access to modern contraception, unwanted pregnancy should be rare among this population. Also, the mobile nature of some occupations inhibit the ability to start a family, such as the deep-sea fisherman who spend many months at sea or move often according to job opportunities. Thus, the number of children under five among migrants in coastal areas is less than for migrants in the land-locked provinces.

When comparing the data from 2004 and 2008, fertility levels among Myanmar migrant women in coastal provinces remained the same (2.1 per round), whereas fertility did decline among the Myanmar women in Chiang Mai and Tak Provinces (from 2.3 to 2.1). Desired family size in 2004 was the same for women in the two groups of provinces (3 children) but this declined to 2.9 and 2.7 in the two areas respectively. This reflects greater coverage of this population by the MCH and family planning programs and is helping the migrants achieve a reduced family size, as per their fertility goals.

Other reproductive health services were also satisfactory among the migrants in these two rounds of surveys. More Myanmar women in coastal provinces in 2008 delivered their child at a Thai government hospital than in 2004 (89% versus 68%). Coverage of ANC and post-natal care was good or excellent (increasing from 88%

coverage to 97% for Myanmar women in non coastal provinces). It is impressive to note that even though 30% of the female Myanmar migrants in coastal areas didn't receive ANC in 2004, this proportion declined to only 7% in 2008. This trend is consistent with the PHAMIT efforts to promote MCH services for migrants. Government and private hospitals expanded their services for migrants and this increased access and up-take. However, Myanmar migrant women in coastal provinces had less utilization of these services than their counterparts in Chiang Mai and Tak due to limited options and because many have not registered.

Post-natal care coverage also started at relatively high levels and even increased over rounds (from 83% to 97% for northern Myanmar migrants, and 65% to 83% from coastal Myanmar). Nevertheless, some women, especially those in coastal provinces did not always have a choice of MCH provider or were reluctant to seek services due to lack of proper registration.

Opportunities for the children of migrants living in Thailand were also limited due to lack of registration and cost of school tuition or fees. This is an area that needs strengthening in future projects such as PHAMIT. This problem was worse for migrants in the coastal provinces compared to those in Chiang Mai and Tak. Overall however, access to formal schooling for the children of migrants improved over rounds.

Access to education for the migrants' children under 5 was satisfactory according to this analysis. Children of Myanmar still had some barriers to access, but this declined over rounds (99% to 68% in coastal areas and from 77% to 57% in Chiang Mai and Tak). Some migrants preferred to take care of their children themselves because of young age – which is no fault of the Project – and points to the need to find ways to help these couples develop the motivation to have their children enrolled in schools.

Access to health care for their children also improved significantly and reached very high levels of coverage during the period of PHAMIT implementation.

It is noteworthy that access to health services of children under 5 increased for migrants during the period of PHAMIT implementation. The proportion of Myanmar women in Chiang Mai and Tak who could take their child to a health center or hospital as needed increased from 85% to 97% between the two rounds. These improvements are a success of the Project and are very consistent with national policy on migrants which helps promote good health of the migrants and the Thais in the surrounding communities.

## **10.6 Information and knowledge about HIV/AIDS and condom use**

The sources and channels through which migrants received their information are important to analyze in order to help inform future BCC efforts for HIV prevention. Concerning the source of information on HIV/AIDS and STIs, the respondents cited multiple sources; in other words individuals generally did not receive their information from a single source. Myanmar in Chiang Mai and Tak had the most

diverse listing of information sources. In both rounds of the survey, printed materials (pamphlets, flyers, booklets) were the most common source of information. The proportion citing this source of HIV/STI information doubled between rounds from 43% in 2004 to 81% in 2008, and the largest increase occurred among the Cambodians (from 17% to 84%). After printed matter, the most commonly cited sources included TV, posters, radio, billboards, newspapers, announcements. Film and folk theatre were not cited very much as sources.

Most migrants in this study watched television, especially the Myanmar in Chiang Mai and Tak. About 40% watched TV daily in both rounds of survey, Cambodians less than the Myanmar. Note that for this indicator, “TV” also included video, VCD and DVD. Different sub-groups have different media preferences. Therefore it is important to tailor the messages to the media channel.

The implementation strategy of PHAMIT was to make the BCC activities participatory to the greatest extent possible. The Project clearly had sustained and continuous coverage since migrants were moving into the implementation areas throughout the five years, yet duration of residence did not seem to influence degree of exposure to interventions. In other words, new migrants were reached quickly by the PHAMIT activities, and this is important since many studies show that risk for HIV/STI is greatest during the period when someone is new to a risk environment. Almost all the respondents knew the name of the PHAMIT NGO partner that was assigned to their neighborhood. Knowledge of the Project migrant health volunteers/workers was high and widespread as well.

### **10.7 Knowledge of service outlets or NGOs in the neighborhood**

The efforts of PHAMIT to prevent HIV have had significant impact in many different respects as discussed in earlier sections. The migrants received important information from the Project as shown in Table 9. Regardless of duration of stay since migrating to Thailand, the migrants attained high levels of awareness of Project service outlets: 77% on average and as high as 93% for Cambodian migrants, and 87% for Myanmar in Chiang Mai and Tak. Most of these migrants knew the name of the local NGO working for PHAMIT, and those that didn't at least knew the name of the local migrant health volunteer or worker. Most migrants who knew of the Project drop-in center or local clinic affiliated with the Project used these services, especially the Cambodians, who used these services the most (up to 100%). Utilization was less among the Myanmar men: 2/3 in Chiang Mai and Tak used these services. More Myanmar migrant women in coastal areas used these services than the men: 71% versus 37%.

Services received include general health exam (56%), HIV counseling for VCT (54%), STI consultation (45%), condom supplies (32%), STI diagnosis and treatment (11%), ANC and post-natal care (12 to 14%) and this last percent represents almost all the women eligible for MCH services.

In addition to these services, most of the migrants knew about PHAMIT and received knowledge from the Project (90%). Most of this knowledge concerned

prevention of HIV, living with PLHA, knowledge about STIs, condom use, and other topics. This knowledge came to them directly by Project staff (90%) and indirectly through printed matter (74%).

Most importantly, most migrant respondents said that the services of PHAMIT in their locality were beneficial (82%) and that the health services they received were attributable to the Project (90%). As much as 1 out of 3 of the migrants felt that they reduced their risk behavior since being contacted by the Project by using condoms more often and reducing their number of sex partners. These respondents felt that their behavior change was directly due to the PHAMIT Project.

Nearly all of the Cambodian migrants made use of the services at the Project drop-in center or PHAMIT-affiliated clinic or service outlet. Two-thirds of the Myanmar migrants in non-coastal provinces did so. More Myanmar women than men used the Project's static site services in coastal provinces. The migrants received a variety of services at these outlets including general health exam, HIV/STI counseling, condom re-supply, diagnosis and treatment of STI symptoms, ANC, and post-natal care. Importantly, the vast majority of migrants who had received Project information and services said that these services were beneficial, and many attributed their own sexual behavior change (to lower risk) to the PHAMIT Project.

## 10.8 Recommendations

- || From the data on source of condoms for migrant laborers, it is clear that the migrant health volunteers and migrant health workers play an important role in increasing migrant knowledge levels, and are a source for important health interventions such as condom distribution for this population. Therefore, there should be a system of support or knowledge-building for the migrant health volunteers and workers to raise their capacity to help with other areas of health work, community development, coordination, communication, and serve as a source of counsel and advice for migrant workers in their neighborhood.
- || The results of this study found that nearly half of the migrant workers had their first sex between the ages of 15 and 19 years. In particular, the migrant women in both coastal and non-coastal provinces had their sexual debut during adolescence and at a younger average age than their male counterparts. The intervention campaigns to reduce female migrant risk for contracting HIV should target the population starting at age 15 years and up. It is this group more than others that needs the knowledge and communication skills to help protect themselves from HIV and other STIs.
- || The campaigns to promote condom use to prevent pregnancy should be conducted in parallel with HIV/STI prevention. This strategy is recommended in order to reduce the stigma associated with condoms as solely an AIDS-prevention device, and reduce the image of condoms as only appropriate for commercial sex.
- || Most of the migrants in this study never used condoms with their regular sex partner. The most common reason given for this is that these partners trust each other (to be uninfected with STIs and HIV). Thus, there needs to be a re-emphasis of the point that one cannot always fully trust their regular sex partner to be faithful, and that not using condoms with them can open a route of transmission



for HIV. Couples in these relationships need to acquire greater concern for this possibility – especially the female migrants – by exposing them to specifically-tailored educational activities for the purpose.

- || The results from this study found an increasing tendency among male migrants to report that their non-regular sex partners are more likely to be a friend or acquaintance rather than a commercial sex worker. This trend reflects changing sexual norms in the population. Therefore, the HIV prevention campaigns should not simply emphasize the risk of commercial sex encounters, but should also point out the risk of unsafe sex with a friend or acquaintance (who is not a sex worker). This will involve a more complex mix of educational and motivational activities in the future, and this is an important challenge for prevention programs.
- || The results of the survey show that male migrants can refuse sex with partners who do not want to use a condom. This is less true when the partner is a friend or acquaintance than if the partner is a sex worker. Therefore, PHAMIT needs to implement interventions to build motivation and skills of migrant males so that they can refuse sex with a friend or acquaintance who does not want to use a condom.
- || It is concerning that those male migrants working as fishing boat crew or in occupations related to the fisheries industry show an increasing tendency to pay for sex when compared between the two rounds of surveys (2004 and 2008). To address this, PHAMIT should target its interventions more heavily toward the population of fishing boat crew and migrant men who work in jobs related to the fisheries industry.
- || Price of condoms is not a barrier to use among the migrant males. Thus, future interventions should focus on other factors beside cost to address the more important barriers to condom use. The interventions need to improve the attitudes toward condoms, and increase convenience and accessibility to condom supplies when they are needed. This should result in increased demand for condoms among this group. PHAMIT needs to employ a wider variety of activities in conducting these interventions.
- || PHAMIT should not only target female sex workers, but should also give equal attention to the population of male clients of these sex workers.
- || The results of this study found that misunderstandings about condoms and lack of sufficient concern about risk for HIV and STIs are still rather prevalent. Even though the campaigns of PHAMIT among male migrants have increased concern about risk of HIV and STIs, these campaigns need to continue until a universal condom use norm (i.e., 100% use) is established as the safest approach.

In conclusion, the Impact Survey 2008 and its comparison to the Baseline Survey 2004 has provided a comprehensive picture of the achievement of the PHAMIT implementation program. Based on the key outcome indicators investigated above, PHAMIT project, with its rigorous and well-coordinated implementation effort has successfully reached migrant worker population who had the greatest vulnerability. To a great extent, the Project has progressed toward the fulfillment of its ultimate objective of the reduction of the AIDS pandemic among migrant workers and related population in Thailand and the Sub-region.



# APPENDIX A

## List of Tables

	<b>Page</b>
<b>Table 4.1:</b> General Characteristics of Migrant Workers Distributed by Provinces of Residence, Nationality and Sex, Year 2004 and 2008	87
<b>Table 5.1:</b> Knowledge, Perceptions and Attitudes on HIV/AIDS by Provinces of Residence, Nationality and Sex, Year 2004 and 2008	104
<b>Table 5.2:</b> Knowledge on Condom and its Use	112
<b>Table 5.3:</b> The purpose of condom use	113
<b>Table 5.4:</b> Knowledge on Sources of Condom	114
<b>Table 5.5:</b> Perspectives on Accessibility and Correct Application of Condom, and Opinion on Male / Female Access to Condom	116
<b>Table 5.6:</b> Knowledge on STIs, the linkage to HIV/AIDS and STIs symptoms	118
<b>Table 5.7:</b> Perceived incidence of STIs.	120
<b>Table 5.7.1:</b> Perceived incidence of STIs.	122
<b>Table 5.8:</b> Symptoms and treatments of perceived STIs infection	123
<b>Table 5.9:</b> Preference on places of treatment of STIs in case of having any symptom of STIs.	125
<b>Table 6.1:</b> Percentage distribution of experience of sexual intercourse and age at first sexual intercourse by location and nationality	127
<b>Table 6.2:</b> Percentage distribution of the experience of sexual intercourse by marital status	129
<b>Table 6.3:</b> Percentage distribution of the use of condoms with regular partner	130
<b>Table 6.4:</b> Percent experiencing sexual intercourse with non-regular partners marital status	134
<b>Table 6.5:</b> Percent distribution of characteristics of non – regular partners	135
<b>Table 6.6:</b> Consistency of condom use and use at last sexual intercourse among male migrants with regular partners, non-regular partners and sex workers	136
<b>Table 6.6a:</b> Condom use at last sex with regular partners, and higher risk sex with, non-regular partners and sex workers (15-49)	137
<b>Table 6.6b:</b> Mean number of multiple partners and condom use in last year young people age 15-24	138
<b>Table 6.7:</b> Percentage distribution of reasons for not using a condom with non-regular partners and sex workers	140

	<b>Page</b>
<b>Table 6.8:</b> Percentage distribution of sources of condoms reported by users with regular partners, non-regular partners, and sex workers	141
<b>Table 6.9:</b> Percentage distribution and mean of time used to obtain condom as reported by users of condoms with regular partners, non-regular partners and sex workers	146
<b>Table 6.10:</b> Percentage distribution of consistency of access to condoms among users of condoms with regular partners, non-regular partners, and sex workers	149
<b>Table 6.11:</b> Percentage distribution of ever use of drugs before sexual intercourse with regular partners, non-regular partners and sex workers	150
<b>Table 6.12:</b> Percentage distribution of consumption of alcohol before sexual intercourse with regular partners, non-regular partners and sex workers	153
<b>Table 6.13:</b> Percentage distribution of personal preference or distastes for using condom with regular partners, non-regular partners and sex workers	157
<b>Table 6.14:</b> Percentage distribution of negotiation skills to convince a partner to use condoms among migrants who are used of condom with regular partners, non-regular partner and sex workers	158
<b>Table 6.15:</b> Percentage ability to deny sexual intercourse if partners do not want to use condom, among migrants who are users of condom with regular partners, non-regular partners and sex workers	160
<b>Table 6.16:</b> Percentage distribution of decision to deny sexual in case of partners refusing to use a condom, among migrants who are users of condom with regular partners, non-regular partners and sex workers	162
<b>Table 7.1:</b> Percentage distribution of access to health services for illness requiring treatment	164
<b>Table 7.2:</b> Percentage distribution of migrants' perception of the quality of services, their satisfaction and the perceived convenience of the services	174
<b>Table 7.3:</b> Percentage distribution of migrants' knowledge of their right to access health services	176
<b>Table 7.4:</b> Percent with knowledge of modern contraceptive methods among male and female migrants age 15-49, distributed by marital status, ever-married and single persons	177
<b>Table 7.5:</b> Percent who have used specified modern contraceptive methods among ever-married male and female migrants	180
<b>Table 7.6:</b> Percent currently using specified modern contraceptive method among currently married male and female migrants	181
<b>Table 7.7:</b> Percentage distribution of family size and mean family size of currently married women age 15-49 from Myanmar	182
<b>Table 7.8:</b> Percentage distribution of who made decision to have children among currently married mothers age 15-49 from Myanmar	183

	<b>Page</b>
<b>Table 7.9:</b> Percentage distribution and mean age of youngest child of currently married women age 15-49 from Myanmar	183
<b>Table 7.10:</b> Percentage distribution of planned pregnancy status of pregnancy of youngest child among currently married mothers from Myanmar	184
<b>Table 7.11:</b> Percentage distribution of country of birth of the youngest child of currently married women from Myanmar	184
<b>Table 7.12:</b> Percentage distribution of place of delivery of the youngest child of currently married women from Myanmar	185
<b>Table 7.13:</b> Percentage experiencing complications during or after delivery of the youngest child of currently married women from Myanmar	185
<b>Table 7.14:</b> Percentage distribution of attendance by medical doctor at delivery of the Youngest child of currently married women from Myanmar	185
<b>Table 7.15:</b> Percentage distribution of get or seek any antenatal care for youngest child of currently married women from Myanmar	186
<b>Table 7.16:</b> Percentage distribution of where get or seek for youngest child of currently married women from Myanmar	186
<b>Table 7.17:</b> Percentage distribution of not get or seek any antenatal care for youngest child of currently married women from Myanmar	186
<b>Table 7.18:</b> Percentage distribution of access to postpartum care after delivery of the youngest child of currently married women from Myanmar	187
<b>Table 7.19:</b> Percentage distribution of place of postpartum care services among currently married women from Myanmar	187
<b>Table 7.20:</b> Percentage distribution of access to school among the youngest child of currently married women from Myanmar	187
<b>Table 7.21:</b> Percentage distribution of reasons of no access to school among young children of currently married women from Myanmar	188
<b>Table 7.22:</b> Percentage distribution of attend school among young children of currently married women from Myanmar	188
<b>Table 7.23:</b> Percentage distribution of reason for child who is 5 to 12 years not attending school of currently married women from Myanmar	188
<b>Table 7.24:</b> Percentage distribution of access of health services of young children of female currently married women from Myanmar	189
<b>Table 7.25:</b> Percentage distribution of reasons of no access to health services among young children of currently married women from Myanmar	189
<b>Table 8.1:</b> General mass media exposure of migrants : television, radio and newspaper	189
<b>Table 8.2:</b> Exposure to Mass Media and IEC Intervention before moving to Thailand	193
<b>Table 8.3:</b> Sources of knowledge about STIs / HIV/AIDS	195
<b>Table 8.4:</b> Experience on education and training on the spread of STIs / HIV/AIDS	194
<b>Table 8.5:</b> Languages used in the educating and training process about spread of STIs / HIV / AIDS	196

	<b>Page</b>
<b>Table 8.6:</b> Experience on education and training on the use of condoms	197
<b>Table 8.7:</b> Sources of knowledge about condom	199
<b>Table 8.8:</b> Language used in the educating and training process about the use of condom	201
<b>Table 8.9:</b> Experience of participating in campaign / meeting on STIs / HIV/AIDS	201
<b>Table 8.10:</b> Migrants' reception of free medical check – up for STIs/HIV/AIDS	202
<b>Table 8.11:</b> Migrants' involvement in campaign on voluntary blood donation	203
<b>Table 8.12:</b> Knowledge any places providing counseling and testing for HIV	204
<b>Table 8.13:</b> Experience with HIV testing	206
<b>Table 8.14:</b> Who were tested received pre-test counseling	207
<b>Table 8.15:</b> Latest HIV test take place	208
<b>Table 8.16:</b> Migrant received of result latest HIV test	209
<b>Table 8.17:</b> Migrant would be referred to in case it turned out that they were HIV positive	210
<b>Table 8.18:</b> Experience of heard about the antiretroviral treatment for PWHA	210
<b>Table 8.19:</b> Source or from whom have migrant learn about the treatment	211
<b>Table 9.1:</b> Knowledge of service outlets, organizations, or personnel, and knowledge of the service providers name	213
<b>Table 9.2:</b> Duration of knowledge of the organization or service provider in the neighborhood	214
<b>Table 9.3:</b> Source or channel of access to knowledge about the local service provider	214
<b>Table 9.4:</b> Experience of using the services of the local organization or service provider	215
<b>Table 9.5:</b> Services used by the migrants	215
<b>Table 9.6:</b> Services which the migrants would like to see added	216
<b>Table 9.7:</b> Experience of receiving knowledge from the service provider, NGO, or personnel, and the nature of the knowledge received	218
<b>Table 9.8:</b> Print media received from the local service provider or NGO	219
<b>Table 9.9:</b> Services received from the local organization or NGO	220
<b>Table 9.10:</b> Were services the result of the local organization or NGO	221
<b>Table 9.11:</b> Recommendations for improvement	221
<b>Tab 9.12:</b> Sexual behavior modification	223
<b>Table 10.1:</b> Summary indicators	224

**Table 4.1:** General Characteristics of Migrant Workers Distributed by Provinces of Residence, Nationality and Sex, Year 2004 and 2008

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Age of migrant worker</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- 15-19	14.9	10.3	12.9	10.3	14.5	10.3
- 20-24	30.7	26.6	25.1	22.1	29.8	25.9
- 25-29	24.8	25.6	23.0	23.1	24.5	25.2
- 30-34	15.2	18.5	21.8	20.8	16.3	18.9
- 35-39	8.1	10.9	9.6	11.8	8.3	11.1
- 40-44	4.4	4.9	5.3	7.2	4.5	5.3
- 45-49	2.0	3.1	2.3	4.6	2.1	3.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2019)</b>	<b>(2033)</b>	<b>(395)</b>	<b>(389)</b>	<b>(2414)</b>	<b>(2422)</b>
<b>Mean age</b>	<b>26.5</b>	<b>28.0</b>	<b>27.6</b>	<b>29.0</b>	<b>26.7</b>	<b>28.2</b>
<b>Sex ratio</b> (males per 100 females)					<b>510</b>	<b>522</b>
<b>Cambodia</b>						
- 15-19	14.3	19.6	15.8	31.6	14.4	20.6
- 20-24	39.0	36.7	21.1	26.3	37.6	35.8
- 25-29	26.2	25.7	21.1	18.4	25.8	25.1
- 30-34	12.4	7.9	18.4	13.2	12.9	8.4
- 35-39	5.6	5.1	10.5	10.5	6.0	5.6
- 40-44	2.1	3.3	7.9	0.0	2.6	3.0
- 45-49	.5	1.6	5.3	0.0	.9	1.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Mean age</b>	<b>25.2</b>	<b>24.9</b>	<b>28.2</b>	<b>24.7</b>	<b>25.4</b>	<b>24.9</b>
<b>Sex ratio</b> (males per 100 females)					<b>1130</b>	<b>1130</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- 15-19	11.2	7.5	11.9	10.6	11.6	8.9
- 20-24	30.2	28.2	27.0	24.8	28.7	26.6
- 25-29	24.8	29.8	26.5	25.7	25.6	27.9
- 30-34	17.8	16.1	18.1	17.3	18.0	16.6
- 35-39	8.9	10.6	6.2	8.8	7.6	9.8
- 40-44	1.6	5.9	7.5	8.4	4.3	7.1
- 45-49	5.4	2.0	2.7	4.4	4.1	3.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(255)</b>	<b>(226)</b>	<b>(226)</b>	<b>(484)</b>	<b>(481)</b>
<b>Mean age</b>	<b>27.5</b>	<b>27.9</b>	<b>27.4</b>	<b>28.4</b>	<b>27.4</b>	<b>28.2</b>
<b>Sex ratio</b> (males per 100 females)					<b>114</b>	<b>113</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Age of migrant worker</b>						
<b>Total (weighted)</b>						
- 15-19	14.1	11.1	12.5	11.3	13.8	11.2
- 20-24	31.8	28.2	25.9	23.6	30.4	27.1
- 25-29	25.0	26.2	24.7	24.1	24.9	25.7
- 30-34	15.3	16.4	19.8	18.5	16.3	16.9
- 35-39	7.9	10.0	7.9	10.2	7.9	10.0
- 40-44	3.6	4.8	6.6	7.5	4.3	5.4
- 45-49	2.4	2.7	2.6	4.3	2.4	3.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2590)</b>	<b>(2614)</b>	<b>(773)</b>	<b>(771)</b>	<b>(3363)</b>	<b>(3385)</b>
<b>Mean age</b>	<b>26.6</b>	<b>27.5</b>	<b>27.6</b>	<b>28.5</b>	<b>26.8</b>	<b>27.8</b>
<b>Marital status</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Married/Living together	29.3	36.4	69.8	71.4	35.9	42.0
- Unmarried/Single	56.0	48.7	22.4	22.0	50.5	44.4
- Separated/Widowed/Divorced	14.7	14.9	7.8	6.6	13.5	13.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2026)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2423)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Married/Living together	9.3	18.7	47.4	52.6	12.4	21.5
- Unmarried/Single	65.7	79.2	34.2	47.4	63.1	76.6
- Separated/Widowed/Divorced	25.0	2.1	18.4	0.0	24.5	1.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Married/Living together	38.0	46.1	41.9	63.9	39.8	54.4
- Unmarried/Single	52.3	47.3	53.7	25.1	53.0	36.9
- Separated/Widowed/Divorced	9.7	6.6	4.4	11.0	7.2	8.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(285)</b>
<b>Total (weighted)</b>						
- Married/Living together	28.0	35.7	54.5	66.7	34.1	42.7
- Unmarried/Single	56.8	52.8	38.9	24.6	52.7	46.3
- Separated/Widowed/Divorced	15.3	11.6	6.6	8.7	13.3	10.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2597)</b>	<b>(2614)</b>	<b>(778)</b>	<b>(772)</b>	<b>(3375)</b>	<b>(3386)</b>



Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ethnic group</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Karen	14.3	7.1	13.6	10.3	14.2	7.6
- Mon	22.5	16.9	27.7	34.4	23.4	19.7
- Burmese	58.4	68.0	48.1	53.3	56.7	65.7
- Loatian	0.0	-	0.5	-	0.1	-
- Khmer	0.0	0.2	0.0	0.5	0.0	0.3
- Other	4.6	7.8	10.1	1.5	5.5	6.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(2023)	(2042)	(397)	(390)	(2420)	(2432)
<b>Cambodia</b>						
- Karen	0.0	-	0.0	-	0.0	-
- Mon	0.5	0.2	0.0	0.0	0.4	0.2
- Burmese	0.0	-	0.0	-	0.0	-
- Loatian	0.2	0.2	0.0	0.0	0.2	0.2
- Khmer	99.3	99.3	94.7	100.0	98.9	99.4
- Other	0.0	0.2	5.3	0.0	0.4	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(428)	(428)	(38)	(38)	(466)	(466)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Karen	13.2	15.9	9.7	7.9	11.6	12.2
- Mon	9.7	3.9	4.9	2.6	7.4	3.3
- Burmese	57.0	55.4	65.0	60.4	60.7	57.7
- Loatian	0.4	0.0	1.8	0.9	1.0	0.4
- Khmer	0.0	-	0.0	-	0.0	-
- Other	19.8	24.8	18.6	28.2	19.2	26.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(258)	(258)	(226)	(227)	(484)	(285)
<b>Total (weighted)</b>						
- Karen	12.0	7.6	11.1	8.7	11.8	7.8
- Mon	17.1	12.3	14.8	16.8	16.6	13.4
- Burmese	49.8	56.6	54.7	55.3	50.9	56.3
- Loatian	0.1	0.0	1.2	0.4	0.4	0.1
- Khmer	14.4	14.5	4.0	4.6	12.0	12.3
- Other	6.6	9.0	14.2	0.9	8.3	10.2
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
(N)	(2592)	(2592)	(775)	(761)	(3367)	(3353)
<b>Religion</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Buddhism	97.6	98.8	99.0	99.5	97.9	98.9
- Protest/Catholic	2.2	0.7	0.8	0.5	1.9	0.7
- Muslim	0.2	0.4	0.3	0.0	0.2	0.3
- Other	-	0.1	-	0.0	-	0.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(2026)	(2044)	(397)	(388)	(2423)	(2432)

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Religion</b>						
<b>Cambodia</b>						
- Buddhism	89.5	96.7	94.7	97.4	89.9	96.8
- Protest/Catholic	0.5	-	0.0	-	0.4	-
- Muslim	9.3	2.8	2.6	2.6	8.8	2.8
- Other	-	0.5	-	0.0	-	0.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(428)	(428)	(38)	(38)	(466)	(466)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Buddhism	73.6	74.0	65.6	80.2	69.9	76.9
- Protest/Catholic	22.1	17.1	23.8	16.7	22.9	16.9
- Muslim	4.3	8.1	10.1	2.2	7.0	5.4
- Other	-	0.8	-	0.9	-	0.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(258)	(258)	(227)	(227)	(485)	(285)
<b>Total (weighted)</b>						
- Buddhism	92.3	94.3	81.7	89.5	89.8	93.2
- Protest/Catholic	5.4	3.3	12.5	8.8	7.0	4.6
- Muslim	2.2	2.1	5.4	1.3	3.0	1.9
- Other	-	0.3	-	0.4	-	0.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(2598)	(2612)	(778)	(769)	(3376)	(3381)
<b>No. of years in school</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- 1-4	43.6	27.9	61.8	37.3	46.7	29.4
- 5-6	25.5	28.9	17.4	33.6	24.1	29.7
- 7 +	30.9	43.2	20.8	29.1	29.2	40.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(1737)	(1898)	(351)	(254)	(2088)	(2252)
<b>mean</b>	<b>5.4</b>	<b>6.4</b>	<b>4.6</b>	<b>5.6</b>	<b>5.2</b>	<b>6.3</b>
<b>Cambodia</b>						
- 1-4	35.6	21.0	43.3	39.5	36.1	22.5
- 5-6	30.4	28.7	36.7	44.7	30.8	30.0
- 7 +	34.1	50.2	20.0	15.8	33.1	47.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(405)	(428)	(30)	(38)	(435)	(466)
<b>mean</b>	<b>5.6</b>	<b>4.8</b>	<b>4.8</b>	<b>6.3</b>	<b>5.2</b>	<b>6.1</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- 1-4	24.7	15.5	27.6	27.7	26.1	21.2
- 5-6	18.0	22.4	21.7	26.7	19.7	24.4
- 7 +	57.3	62.1	50.7	45.5	54.2	54.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(239)	(232)	(217)	(202)	(456)	(434)
<b>mean</b>	<b>7.0</b>	<b>7.7</b>	<b>6.8</b>	<b>6.4</b>	<b>6.9</b>	<b>7.1</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>No. of years in school</b>						
<b>Total (weighted)</b>						
- 1-4	38.9	24.7	43.0	32.3	39.9	26.4
- 5-6	24.9	27.7	20.4	30.4	23.8	28.3
- 7 +	36.2	47.5	36.7	37.3	36.3	45.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2291)</b>	<b>(2446)</b>	<b>(712)</b>	<b>(700)</b>	<b>(3003)</b>	<b>(3146)</b>
<b>mean</b>	<b>5.7</b>	<b>6.6</b>	<b>5.8</b>	<b>6.0</b>	<b>6.4</b>	<b>6.5</b>
<b>Occupation</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Seafarer	62.3	59.9	0.0	0.0	52.1	50.3
- Fish processing labor	18.8	21.1	59.9	60.6	25.5	27.5
- Factory worker	7.2	5.0	17.4	15.1	8.9	6.6
- Agricultural labor	5.7	3.1	5.8	5.1	5.7	3.4
- Other	6.0	10.9	16.9	19.2	7.8	12.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2026)</b>	<b>(2044)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2423)</b>	<b>(2435)</b>
<b>Cambodia</b>						
- Seafarer	77.8	77.6	0.0	0.0	71.5	71.2
- Fish processing labor	19.6	19.9	73.7	73.7	24.0	24.2
- Factory worker	0.0	-	0.0	-	0.0	-
- Agricultural labor	0.0	0.2	0.0	0.0	0.0	0.2
- Other	2.6	2.3	26.3	26.3	4.5	4.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Seafarer	0.0	-	0.0	-	0.0	-
- Fish processing labor	0.0	0.4	0.0	0.4	0.0	0.4
- Factory worker	27.9	41.9	43.4	58.6	35.1	49.7
- Agricultural labor	6.2	3.9	2.2	3.1	4.3	3.5
- Other	65.9	53.9	54.4	18.6	60.5	46.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(226)</b>	<b>(227)</b>	<b>(484)</b>	<b>(485)</b>
<b>Total (weighted)</b>						
- Seafarer	53.7	52.2	0.0	0.0	41.3	40.8
- Fish processing labor	15.7	17.3	30.0	31.9	19.0	20.5
- Factory worker	9.8	10.8	29.9	38.7	14.4	16.9
- Agricultural labor	5.0	2.8	3.7	4.1	4.7	3.1
- Other	15.9	16.9	36.3	25.3	20.6	18.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2598)</b>	<b>(2607)</b>	<b>(776)</b>	<b>(734)</b>	<b>(3374)</b>	<b>(3341)</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Have work permit card</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	56.0	39.4	56.7	76.0	56.1	45.2
- No	44.0	60.6	43.3	24.0	43.9	54.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2017)</b>	<b>(2043)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2414)</b>	<b>(2434)</b>
<b>Cambodia</b>						
- Yes	20.8	11.0	13.2	10.5	20.2	10.9
- No	79.2	89.0	86.8	89.5	79.8	89.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	49.0	46.3	60.8	57.3	54.5	51.4
- No	51.0	53.7	39.2	42.7	45.5	48.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(257)</b>	<b>(227)</b>	<b>(227)</b>	<b>(484)</b>	<b>(484)</b>
<b>Total (weighted)</b>						
- Yes	49.7	36.4	56.9	63.5	51.4	42.6
- No	50.3	63.6	43.1	36.5	48.6	57.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2587)</b>	<b>(2610)</b>	<b>(777)</b>	<b>(772)</b>	<b>(3364)</b>	<b>(3382)</b>
<b>Type of permit card</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Work permit card	73.1	13.2	97.8	21.7	77.2	15.5
- Pink	1.5	82.7	0.4	74.6	1.3	80.5
- Blue	7.9	1.0	0.4	3.4	6.6	1.7
- Orange	2.4	-	0.0	-	2.0	-
- Green	1.8	0.1	0.0	0.0	1.5	0.1
- Other	13.4	2.9	1.3	0.3	11.4	2.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1129)</b>	<b>(781)</b>	<b>(225)</b>	<b>(295)</b>	<b>(1354)</b>	<b>(1076)</b>
<b>Cambodia</b>						
- Work permit card	5.7	-	0.0	-	5.4	-
- Pink	1.1	80.9	0.0	(1)	1.1	76.5
- Blue	64.4	6.4	80.0	-	65.2	5.9
- Orange	1.1	8.5	0.0	(2)	1.1	11.8
- Green	11.5	2.1	20.0	(1)	12.0	3.9
- Other	16.1	2.1	0.0	-	15.2	2.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(87)</b>	<b>(47)</b>	<b>(5)</b>	<b>(4)</b>	<b>(92)</b>	<b>(51)</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Type of permit card</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Work permit card	77.0	18.3	71.5	10.8	74.1	14.4
- Pink	0.8	47.5	2.9	53.8	1.9	50.8
- Blue	5.6	3.3	10.9	0.0	8.4	1.6
- Orange	0.0	0.8	0.0	0.0	0.0	0.4
- Green	14.3	1.7	11.7	3.1	12.9	2.4
- Other	2.4	28.3	2.9	32.3	2.7	30.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(126)</b>	<b>(120)</b>	<b>(137)</b>	<b>(130)</b>	<b>(263)</b>	<b>(250)</b>
<b>Total (weighted)</b>						
- Work permit card	69.8	5.0	82.4	10.4	73.0	6.2
- Pink	1.3	26.9	1.8	41.3	1.4	30.2
- Blue	10.8	0.7	7.0	1.2	9.9	0.8
- Orange	1.9	0.2	0.0	0.3	1.4	0.2
- Green	4.5	0.2	6.6	1.0	5.0	0.4
- Other	11.7	67.0	2.3	45.8	9.3	62.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1283)</b>	<b>(2587)</b>	<b>(442)</b>	<b>(766)</b>	<b>(1725)</b>	<b>(3353)</b>
<b>Period of work</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <6 months	13.1	8.5	12.4	9.0	12.9	8.6
- 6-11 months	6.3	8.5	6.3	4.6	6.3	7.9
- 1 year	17.1	17.4	12.6	10.5	16.3	16.3
- 2 years	14.4	13.3	13.6	12.5	14.3	13.2
- 3 years	11.1	13.0	18.9	17.4	12.4	13.7
- 4 years	7.9	8.3	11.6	15.1	8.5	9.4
- 5-9 years	23.0	23.5	21.0	26.1	22.7	23.9
- 10 years and over	7.1	7.4	3.5	4.9	6.5	7.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2022)</b>	<b>(2041)</b>	<b>(396)</b>	<b>(391)</b>	<b>(2418)</b>	<b>(2432)</b>
<b>Mean (year)</b>	<b>3.5</b>	<b>3.7</b>	<b>3.2</b>	<b>3.6</b>	<b>3.5</b>	<b>3.7</b>
<b>Cambodia</b>						
- <6 months	32.0	10.7	29.7	0.0	31.8	9.9
- 6-11 months	11.0	6.5	10.8	0.0	11.0	6.0
- 1 year	15.9	21.0	18.9	28.9	16.1	21.7
- 2 years	13.8	22.0	13.5	36.8	13.8	23.2
- 3 years	10.0	16.4	8.1	15.8	9.9	16.3
- 4 years	5.8	8.2	5.4	7.9	5.8	8.2
- 5-9 years	10.0	13.6	10.8	7.9	10.1	13.1
- 10 years and over	6.0	1.6	1.0	2.6	7.0	1.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(37)</b>	<b>(38)</b>	<b>(465)</b>	<b>(466)</b>
<b>Mean (year)</b>	<b>1.8</b>	<b>2.6</b>	<b>3.2</b>	<b>2.6</b>	<b>3.5</b>	<b>2.6</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Period of work</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- <6 months	18.3	3.5	11.0	7.0	14.9	5.2
- 6-11 months	5.1	2.3	3.5	1.3	4.3	1.9
- 1 year	16.7	13.2	12.8	11.0	14.9	12.2
- 2 years	11.7	16.3	15.9	14.1	13.6	15.3
- 3 years	12.5	13.6	13.2	20.3	12.8	16.7
- 4 years	13.6	14.3	14.1	12.3	13.8	13.4
- 5-9 years	13.6	29.5	24.2	28.2	18.6	28.9
- 10 years and over	8.6	7.4	5.3	5.7	7.0	6.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(484)</b>	<b>(485)</b>
<b>Mean (year)</b>	<b>3.4</b>	<b>4.3</b>	<b>3.6</b>	<b>3.9</b>	<b>3.5</b>	<b>4.6</b>
<b>Total (weighted)</b>						
- <6 months	16.7	7.9	12.4	7.7	15.7	7.9
- 6-11 months	6.8	7.2	5.0	2.7	6.4	6.2
- 1 year	16.8	17.2	13.0	11.6	15.9	15.9
- 2 years	13.9	15.1	14.8	14.5	14.1	14.9
- 3 years	11.2	13.6	15.6	18.9	12.2	14.8
- 4 years	8.6	9.4	12.6	13.4	9.5	10.3
- 5-9 years	19.5	23.1	22.2	25.8	20.1	23.7
- 10 years and over	6.5	6.6	4.4	5.2	6.0	6.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2591)</b>	<b>(2608)</b>	<b>(776)</b>	<b>(766)</b>	<b>(3367)</b>	<b>(3374)</b>
<b>Mean (year)</b>	<b>3.3</b>	<b>3.6</b>	<b>3.4</b>	<b>3.7</b>	<b>3.3</b>	<b>3.7</b>
<b>Daily wage (baht)</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <100	8.8	0.3	16.7	3.6	10.1	1.3
- 100-169	76.3	22.4	60.1	56.8	73.6	33.5
- 170-179	4.8	14.2	6.8	7.1	5.1	11.9
- 180-199	-	17.0	-	17.2	-	17.0
- 200-299	7.7	41.9	10.4	14.2	8.1	33.0
- 300+	2.4	4.2	6.1	1.2	3.0	3.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1985)</b>	<b>(353)</b>	<b>(396)</b>	<b>(169)</b>	<b>(2381)</b>	<b>(522)</b>
<b>Mean</b>	<b>133.4</b>	<b>189.2</b>	<b>147.8</b>	<b>158.7</b>	<b>135.8</b>	<b>179.3</b>
<b>Cambodia</b>						
- <100	11.7	3.8	34.2	-	13.5	3.8
- 100-169	73.4	71.2	47.4	-	71.2	71.2
- 170-179	2.1	5.3	13.2	-	3.0	5.3
- 180-199	10.7	0.8	5.3	-	10.3	0.8
- 200-299	2.1	18.2	0.0	-	1.9	18.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(132)</b>	<b>(38)</b>	<b>-</b>	<b>(466)</b>	<b>(132)</b>
<b>Mean</b>	<b>134.6</b>	<b>153.1</b>	<b>116.6</b>	<b>-</b>	<b>133.2</b>	<b>153.1</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Daily wage (baht)</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- <100	45.7	34.3	38.7	52.3	42.4	42.4
- 100-169	51.6	48.3	55.1	40.2	53.2	44.7
- 170-179	0.8	1.7	1.3	0.0	1.0	0.9
- 180-199	-	4.5	-	1.0	-	2.9
- 200-299	1.2	10.3	3.1	5.5	2.1	8.2
- 300+	0.8	0.8	1.8	1.0	1.2	0.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(256)</b>	<b>(242)</b>	<b>(225)</b>	<b>(199)</b>	<b>(481)</b>	<b>(441)</b>
<b>Mean</b>	<b>103.3</b>	<b>120.1</b>	<b>105.8</b>	<b>101.2</b>	<b>104.5</b>	<b>111.6</b>
<b>Total (weighted)</b>						
- <100	15.7	17.7	28.6	37.8	18.7	25.1
- 100-169	71.6	42.0	57.1	45.3	68.2	43.2
- 170-179	3.7	6.7	4.3	2.0	3.8	5.0
- 180-199	-	8.6	-	5.9	-	7.6
- 200-299	7.0	22.9	6.5	8.1	6.8	17.4
- 300+	2.1	2.0	3.6	1.0	2.4	1.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2556)</b>	<b>(846)</b>	<b>(773)</b>	<b>(495)</b>	<b>(3329)</b>	<b>(1341)</b>
<b>Mean</b>	<b>128.3</b>	<b>149.8</b>	<b>125.1</b>	<b>118.3</b>	<b>127.6</b>	<b>138.2</b>
<b>Daily wage by occupation</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Seafarer	128.1	196.9	-	-	128.1	196.9
<b>(N)</b>	<b>(1234)</b>	<b>(54)</b>	<b>-</b>	<b>-</b>	<b>(1234)</b>	<b>(54)</b>
- Fish processing labor	127.3	187.3	141.4	162.0	132.7	177.7
<b>(N)</b>	<b>(377)</b>	<b>(167)</b>	<b>(238)</b>	<b>(134)</b>	<b>(615)</b>	<b>(270)</b>
- Factory worker	125.6	181.9	134.7	152.4	128.6	171.0
<b>(N)</b>	<b>(141)</b>	<b>(71)</b>	<b>(68)</b>	<b>(42)</b>	<b>(209)</b>	<b>(113)</b>
- Agricultural labor	196.3	0.0	362.7	170.0	224.2	170.0
<b>(N)</b>	<b>(114)</b>	<b>(0)</b>	<b>(23)</b>	<b>(2)</b>	<b>(137)</b>	<b>(2)</b>
- Other	156.9	195.8	110.4	154.3	140.2	184.8
<b>(N)</b>	<b>(119)</b>	<b>(61)</b>	<b>(67)</b>	<b>(22)</b>	<b>(186)</b>	<b>(83)</b>
<b>Total</b>	<b>133.4</b>	<b>189.2</b>	<b>147.9</b>	<b>158.7</b>	<b>135.8</b>	<b>179.3</b>
<b>(N)</b>	<b>(1985)</b>	<b>(353)</b>	<b>(396)</b>	<b>(169)</b>	<b>(2381)</b>	<b>(522)</b>
<b>Cambodia</b>						
- Seafarer	131.9	152.5	-	-	131.9	152.5
<b>(N)</b>	<b>(333)</b>	<b>(99)</b>	<b>-</b>	<b>-</b>	<b>(333)</b>	<b>(99)</b>
- Fish processing labor	140.1	155.0	134.3	-	138.7	155.0
<b>(N)</b>	<b>(84)</b>	<b>(32)</b>	<b>(28)</b>	<b>-</b>	<b>(112)</b>	<b>(32)</b>
- Other	178.5	150.0	67.2	-	125.5	150.0
<b>(N)</b>	<b>(11)</b>	<b>(1)</b>	<b>(10)</b>	<b>-</b>	<b>(21)</b>	<b>(1)</b>
<b>Total</b>	<b>134.7</b>	<b>153.1</b>	<b>116.6</b>	<b>-</b>	<b>133.2</b>	<b>153.1</b>
<b>(N)</b>	<b>(428)</b>	<b>(132)</b>	<b>(38)</b>	<b>-</b>	<b>(466)</b>	<b>(132)</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Daily wage by occupation</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
Factory worker	110.8	94.1	127.1	91.4	120.2	92.6
(N)	(72)	(108)	(98)	(129)	(170)	(237)
Agricultural labor	69.7	98.6	136.0	96.0	85.5	97.5
(N)	(16)	(7)	(5)	(5)	(21)	(12)
Other	103.4	143.7	87.5	134.8	96.7	140.7
(N)	(168)	(126)	(122)	(65)	(290)	(191)
<b>Total</b>	<b>103.4</b>	<b>120.1</b>	<b>105.8</b>	<b>105.7</b>	<b>104.5</b>	<b>113.6</b>
(N)	(256)	(242)	(225)	(200)	(481)	(442)
<b>Total (weighted)</b>						
Seafarer	128.9	168.1	-	-	128.9	168.1
(N)	(1567)	(134)	-	-	(1567)	(134)
Fish processing labor	129.6	181.2	140.7	160.8	133.7	174.2
(N)	(461)	(173)	(266)	(92)	(727)	(265)
Factory worker	118.1	116.5	129.1	100.0	123.4	108.2
(N)	(213)	(254)	(166)	(263)	(379)	(517)
Agricultural labor	168.6	98.6	294.0	108.3	191.7	103.1
(N)	(130)	(12)	(28)	(10)	(158)	(23)
Other	118.9	154.7	91.6	126.0	107.8	145.3
(N)	(298)	(268)	(199)	(30)	(497)	(399)
<b>Total</b>	<b>128.3</b>	<b>149.7</b>	<b>125.1</b>	<b>118.3</b>	<b>127.6</b>	<b>138.2</b>
(N)	(2669)	(846)	(659)	(496)	(3328)	(1342)
<b>Daily wage by work permit</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Have work permit	141.8	196.6	159.6	163.1	144.8	184.8
(N)	(1107)	(240)	(224)	(130)	(1131)	(370)
- Do not have work permit	122.9	173.4	132.5	144.0	124.5	165.8
(N)	(869)	(113)	(172)	(39)	(1041)	(152)
<b>Cambodia</b>						
- Have work permit	141.7	175.6	142.0	-	141.7	175.6
(N)	(89)	(18)	(5)	-	(94)	(18)
- Do not have work permit	132.8	149.5	112.8	-	131.1	149.5
(N)	(339)	(114)	(33)	-	(372)	(114)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Have work permit	111.6	163.1	119.4	101.4	115.7	144.4
(N)	(126)	(16)	(138)	(7)	(264)	(23)
- Do not have work permit	95.4	117.4	84.2	103.5	90.7	109.8
(N)	(129)	(37)	(87)	(69)	(216)	(126)
<b>Total (weighted)</b>						
- Have work permit	136.5	170.4	137.5	134.3	136.8	155.2
(N)	(1322)	(412)	(367)	(297)	(1689)	(709)
- Do not have work permit	117.1	130.3	136.8	94.4	117.1	119.0
(N)	(1337)	(433)	(292)	(198)	(1629)	(631)



Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Daily wage by whether migrants can speak Thai</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	137.7	193.9	152.6	162.4	139.9	184.2
(N)	(1566)	(285)	(270)	(128)	(1836)	(413)
- No	117.3	169.5	137.9	146.1	122.0	160.7
(N)	(418)	(68)	(126)	(41)	(544)	(109)
<b>Cambodia</b>						
- Yes	139.8	158.8	131.7	-	139.1	158.8
(N)	(290)	(94)	(25)	-	(315)	(94)
- No	123.7	138.9	87.7	-	120.6	138.9
(N)	(137)	(91)	(13)	-	(150)	(91)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	110.3	134.7	117.8	129.2	113.6	132.7
(N)	(163)	(142)	(125)	(79)	(288)	(221)
- No	91.2	99.3	90.7	90.4	91.0	94.4
(N)	(93)	(100)	(99)	(121)	(192)	(221)
<b>Total (weighted)</b>						
- Yes	133.9	163.6	135.7	138.2	134.3	156.0
(N)	(2019)	(579)	(420)	(248)	(2439)	(827)
- No	111.9	119.8	108.2	98.4	110.8	109.5
(N)	(648)	(268)	(238)	(247)	(886)	(515)
<b>Months move to province</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <6 months	11.8	8.4	10.6	3.3	11.6	7.6
- 6-11 months	5.9	8.2	4.3	3.6	5.6	7.4
- 1 year	17.3	17.2	11.4	9.2	16.4	15.9
- 2 years	13.2	12.4	12.4	8.4	13.1	11.7
- 3 years	12.3	11.5	19.5	14.8	13.5	12.0
- 4 years	8.3	7.4	11.6	11.3	8.8	8.0
- 5-9 years	23.3	25.6	26.3	37.3	23.8	27.5
- 10 years and over	7.8	9.3	3.8	12.0	7.1	9.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(2018)	(2045)	(395)	(391)	(2413)	(2436)
<b>Mean (year)</b>	<b>3.7</b>	<b>4.0</b>	<b>3.5</b>	<b>4.9</b>	<b>3.6</b>	<b>4.1</b>
<b>Cambodia</b>						
- <6 months	29.4	10.0	23.7	0.0	29.0	9.2
- 6-11 months	10.0	6.1	10.5	0.0	10.1	5.6
- 1 year	16.1	20.8	18.4	28.9	16.3	21.5
- 2 years	12.6	21.3	13.2	26.3	12.7	21.7
- 3 years	10.0	17.1	7.9	18.4	9.9	17.2
- 4 years	5.8	7.7	7.9	7.9	6.0	7.7
- 5-9 years	13.8	14.3	15.8	13.2	13.9	14.2
- 10 years and over	2.1	2.8	2.6	5.3	2.1	3.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(428)	(428)	(38)	(38)	(466)	(466)
<b>Mean (year)</b>	<b>2.1</b>	<b>2.8</b>	<b>2.5</b>	<b>3.2</b>	<b>2.2</b>	<b>2.8</b>

Table 4.1: (Cont)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Months move to province</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- <6 months	15.2	1.2	9.7	2.2	12.6	1.6
- 6-11 months	4.3	0.8	3.5	0.9	3.9	0.8
- 1 year	11.7	8.9	11.5	6.2	11.6	7.6
- 2 years	12.5	9.7	13.7	11.9	13.0	10.7
- 3 years	12.1	12.8	14.5	20.7	13.2	16.5
- 4 years	12.1	12.8	11.9	10.6	12.0	11.8
- 5-9 years	23.7	42.6	22.0	35.7	22.9	39.4
- 10 years and over	8.6	11.2	13.2	11.9	10.7	11.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(484)</b>	<b>(485)</b>
<b>Mean (year)</b>	<b>3.9</b>	<b>6.0</b>	<b>4.4</b>	<b>5.8</b>	<b>4.2</b>	<b>5.4</b>
<b>Total (weighted)</b>						
- <6 months	14.9	7.4	10.7	2.6	13.9	6.3
- 6-11 months	6.2	6.6	4.1	2.1	5.7	5.6
- 1 year	16.2	16.3	11.7	8.5	15.2	14.5
- 2 years	13.0	13.2	13.0	11.0	13.0	12.7
- 3 years	12.0	12.5	16.5	18.0	13.0	13.8
- 4 years	8.6	8.4	11.6	10.7	9.3	8.9
- 5-9 years	22.0	27.0	23.7	35.4	22.4	28.9
- 10 years and over	7.1	8.7	8.5	11.6	7.4	9.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2589)</b>	<b>(2612)</b>	<b>(775)</b>	<b>(773)</b>	<b>(3364)</b>	<b>(3385)</b>
<b>Mean (year)</b>	<b>3.5</b>	<b>4.0</b>	<b>3.9</b>	<b>5.0</b>	<b>3.6</b>	<b>4.3</b>
<b>Months move to Thailand</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <6 months	10.7	6.5	9.8	3.6	10.6	6.0
- 6-11 months	3.8	4.4	2.8	3.1	3.6	4.2
- 1 year	8.6	10.4	9.6	6.4	8.7	9.7
- 2 years	15.4	16.1	12.1	8.4	14.9	14.9
- 3 years	11.8	12.5	18.9	13.8	13.0	12.7
- 4 years	8.5	7.1	13.4	11.5	9.3	7.8
- 5-9 years	24.9	24.9	24.7	34.3	24.8	26.4
- 10 years and over	16.2	18.0	8.8	18.9	15.0	18.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2026)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2423)</b>	<b>(2436)</b>
<b>Mean (year)</b>	<b>5.8</b>	<b>4.9</b>	<b>4.0</b>	<b>5.4</b>	<b>5.5</b>	<b>5.0</b>
<b>Cambodia</b>						
- <6 months	31.8	11.0	31.6	0.0	31.8	10.1
- 6-11 months	7.2	4.9	2.6	0.0	6.9	4.5
- 1 year	14.3	19.2	15.8	28.9	14.4	20.0
- 2 years	12.9	22.9	13.2	26.3	12.9	23.2
- 3 years	10.5	16.1	7.9	18.4	10.3	16.3
- 4 years	5.8	7.0	10.5	7.9	6.2	7.1
- 5-9 years	14.0	15.2	15.8	13.2	14.2	15.0
- 10 years and over	3.5	3.7	2.6	5.3	3.4	3.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Mean (year)</b>	<b>2.3</b>	<b>2.8</b>	<b>2.7</b>	<b>3.2</b>	<b>2.3</b>	<b>2.9</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Months move to Thailand</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- <6 months	15.9	1.2	11.0	1.8	13.6	1.4
- 6-11 months	2.7	0.8	2.2	0.4	2.5	0.6
- 1 year	7.8	3.9	10.1	4.0	8.9	3.9
- 2 years	12.4	10.1	13.2	10.6	12.8	10.3
- 3 years	11.6	10.1	13.2	14.5	12.4	12.2
- 4 years	13.6	6.6	11.0	8.4	12.4	7.4
- 5-9 years	22.5	36.4	22.5	24.7	22.5	30.9
- 10 years and over	13.6	31.0	16.7	35.7	15.1	33.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
<b>Mean (year)</b>	<b>4.3</b>	<b>8.3</b>	<b>4.7</b>	<b>9.9</b>	<b>4.5</b>	<b>9.0</b>
<b>Total (weighted)</b>						
- <6 months	14.6	6.7	11.1	2.7	13.9	5.9
- 6-11 months	4.2	4.2	2.5	2.0	3.9	3.7
- 1 year	9.3	11.1	10.1	6.9	9.5	10.3
- 2 years	14.7	16.6	12.7	10.2	14.3	15.4
- 3 years	11.7	12.8	16.7	14.3	12.7	13.1
- 4 years	8.9	7.0	12.3	10.2	9.6	7.6
- 5-9 years	22.8	24.5	23.7	29.7	23.0	25.5
- 10 years and over	13.9	17.0	11.0	23.9	13.3	18.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2742)</b>	<b>(2731)</b>	<b>(684)</b>	<b>(656)</b>	<b>(3426)</b>	<b>(3387)</b>
<b>Mean (year)</b>	<b>5.1</b>	<b>4.9</b>	<b>4.1</b>	<b>6.8</b>	<b>4.9</b>	<b>5.3</b>
<b>Ever move in 1 year</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	9.2	18.0	7.8	7.4	9.0	16.3
- No	90.8	82.0	92.2	92.6	91.0	83.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2022)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2419)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Yes	2.1	17.8	0.0	5.3	1.9	16.7
- No	97.9	82.2	100.0	94.7	98.1	83.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Yes	0.4	3.9	4.0	4.8	2.1	4.3
- No	99.6	96.1	96.0	95.2	97.9	95.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(255)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(482)</b>	<b>(485)</b>
<b>Total (weighted)</b>						
- Yes	6.6	15.5	5.5	6.0	6.4	13.3
- No	93.4	84.5	94.5	94.0	93.6	86.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2588)</b>	<b>(2614)</b>	<b>(777)</b>	<b>(772)</b>	<b>(3365)</b>	<b>(3386)</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Live with</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Alone	4.8	4.8	3.3	1.8	4.5	4.3
- Spouse	20.9	33.5	62.2	61.6	27.7	38.0
- Family	9.7	9.1	13.1	16.9	10.3	10.3
- Relative	10.9	12.5	8.1	10.5	10.4	12.2
- Employer	0.3	1.4	3.5	1.0	.9	1.4
- Friends	53.2	38.3	7.8	8.2	45.7	33.4
- Other	0.1	0.5	2.0	0.0	0.5	0.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2025)</b>	<b>(2044)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2422)</b>	<b>(2435)</b>
<b>Cambodia</b>						
- Alone	1.2	1.4	13.2	0.0	2.1	1.3
- Spouse	8.6	16.8	42.1	50.0	11.4	19.5
- Family	1.9	0.5	7.9	0.0	2.4	0.4
- Relative	0.3	10.5	3.5	18.4	0.9	11.2
- Employer	72.0	19.9	23.7	15.8	68.0	19.5
- Friends	10.0	50.9	5.3	15.8	9.7	48.1
- Other	0.0	-	0.0	-	0.0	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Alone	9.3	26.4	3.1	5.7	6.4	16.7
- Spouse	24.9	32.6	29.1	52.9	26.9	42.1
- Family	14.4	19.4	17.6	18.5	15.9	19.0
- Relative	7.0	7.8	9.3	4.4	8.1	6.2
- Employer	2.7	0.4	11.0	0.9	6.6	0.6
- Friends	41.2	13.6	30.0	17.6	36.0	15.5
- Other	0.4	-	0.0	-	0.2	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(484)</b>	<b>(285)</b>
<b>Total (weighted)</b>						
- Alone	5.1	8.2	3.6	4.0	4.7	7.2
- Spouse	19.8	30.9	44.4	56.3	25.5	36.7
- Family	9.4	9.6	15.2	17.0	10.7	11.3
- Relative	9.6	11.4	8.6	7.6	9.3	10.5
- Employer	11.1	3.8	8.2	1.6	10.4	3.3
- Friends	44.9	35.6	19.0	13.5	38.9	30.6
- Other	0.2	0.5	0.9	0.0	0.3	0.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2594)</b>	<b>(2612)</b>	<b>(777)</b>	<b>(772)</b>	<b>(3371)</b>	<b>(3384)</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Type of house</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Domitory in work place	25.3	21.3	38.5	29.2	27.5	22.5
- Domitory out work place	-	24.6	-	15.4	-	23.1
- Room rent	24.0	-	33.8	-	25.6	-
- House rent	7.0	6.3	13.4	3.8	8.0	5.9
- Flat / Apartment	16.1	24.3	13.9	51.3	15.8	28.6
- Ship	27.4	23.6	0.0	0.0	22.9	19.8
- Other	0.1	0.0	0.5	0.3	0.2	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2025)</b>	<b>2042</b>	<b>(397)</b>	<b>390</b>	<b>(2422)</b>	<b>2432</b>
<b>Cambodia</b>						
- Domitory in work place	13.3	3.0	26.3	13.2	14.4	3.9
- Domitory out work place	-	6.1	-	0.0	-	5.6
- Room rent	6.3	-	21.1	-	7.5	-
- House rent	18.2	31.5	47.4	84.2	20.6	35.8
- Flat / Apartment	0.0	9.6	0.0	2.6	0.0	9.0
- Ship	61.9	49.8	2.6	0.0	57.1	45.7
- Other	0.2	-	2.6	-	0.4	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Domitory in work place	39.5	46.1	51.1	35.2	44.9	41.0
- Domitory out work place	-	8.1	-	10.6	-	9.3
- Room rent	19.0	-	14.1	-	16.7	-
- House rent	26.0	21.3	26.0	33.9	26.0	27.2
- Flat / Apartment	15.1	20.9	6.6	11.5	11.1	16.5
- Ship	0.0	-	0.0	-	0.0	-
- Other	0.4	3.5	2.2	8.8	1.2	6.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(226)</b>	<b>(227)</b>	<b>(484)</b>	<b>(285)</b>
<b>Total (weighted)</b>						
- Domitory in work place	26.1	23.0	44.5	31.9	30.3	25.0
- Domitory out work place	-	19.1	-	12.3	-	17.6
- Room rent	20.6	-	23.2	-	21.2	-
- House rent	11.9	12.5	21.3	23.0	14.1	14.9
- Flat / Apartment	13.6	21.6	9.5	28.9	12.7	23.3
- Ship	27.6	23.3	0.1	0.0	21.3	18.0
- Other	0.2	0.5	1.4	4.0	0.4	1.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2596)</b>	<b>(2607)</b>	<b>(776)</b>	<b>(766)</b>	<b>(3372)</b>	<b>(3373)</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Have relative in Thailand</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	53.6	63.8	72.0	79.2	56.6	66.3
- No	46.4	36.2	28.0	20.8	43.4	33.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2025)</b>	<b>(2039)</b>	<b>(397)</b>	<b>(389)</b>	<b>(2422)</b>	<b>(2428)</b>
<b>Cambodia</b>						
- Yes	35.3	42.1	60.5	60.5	37.3	43.6
- No	64.7	57.9	39.5	39.5	62.7	56.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	46.5	61.6	52.0	66.4	49.1	63.8
- No	53.5	38.4	48.0	33.6	50.9	36.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(226)</b>	<b>(485)</b>	<b>(284)</b>
<b>Total (weighted)</b>						
- Yes	49.7	60.3	61.3	71.8	52.4	62.9
- No	50.3	39.7	38.7	28.2	47.6	37.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2595)</b>	<b>(2608)</b>	<b>(778)</b>	<b>(769)</b>	<b>(3373)</b>	<b>(3377)</b>
<b>Can speak Thai</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	78.9	70.8	68.3	74.4	77.2	71.4
- No	21.1	29.2	31.7	25.6	22.8	28.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2025)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2422)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Yes	67.9	69.9	65.8	52.6	67.7	68.5
- No	32.1	30.1	34.2	47.4	32.3	31.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(465)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	64.0	60.7	55.3	45.4	59.9	53.5
- No	36.0	39.3	44.7	54.6	40.1	46.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(257)</b>	<b>(226)</b>	<b>(227)</b>	<b>(484)</b>	<b>(484)</b>
<b>Total (weighted)</b>						
- Yes	74.7	68.9	61.5	58.5	71.7	66.6
- No	25.3	31.1	38.5	41.5	28.3	33.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2595)</b>	<b>(2611)</b>	<b>(775)</b>	<b>(772)</b>	<b>(3370)</b>	<b>(3383)</b>

Table 4.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>How much can you speak Thai</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Good	17.5	17.5	11.8	18.9	16.6	17.8
- Fair	52.4	38.3	43.5	34.4	51.2	37.7
- Poor	30.1	44.1	44.6	46.7	32.2	44.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1598)</b>	<b>(1448)</b>	<b>(271)</b>	<b>(291)</b>	<b>(1869)</b>	<b>(1739)</b>
<b>Cambodia</b>						
- Good	0.3	1.0	4.0	0.0	0.6	0.9
- Fair	23.4	23.1	20.0	15.0	23.2	22.6
- Poor	76.2	75.9	76.0	85.0	76.2	76.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(290)</b>	<b>(299)</b>	<b>(25)</b>	<b>(20)</b>	<b>(315)</b>	<b>(319)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Good	11.5	17.3	17.6	27.2	14.1	21.2
- Fair	53.9	46.8	49.6	53.4	52.1	49.4
- Poor	34.5	35.9	32.8	19.4	33.8	29.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(165)</b>	<b>(156)</b>	<b>(125)</b>	<b>(103)</b>	<b>(290)</b>	<b>(259)</b>
<b>Total (weighted)</b>						
- Good	14.3	15.1	14.0	21.5	14.3	16.4
- Fair	48.9	37.4	45.3	41.2	48.2	38.2
- Poor	36.8	47.4	40.7	37.4	37.5	45.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1939)</b>	<b>(1800)</b>	<b>(477)</b>	<b>(452)</b>	<b>(2416)</b>	<b>(2252)</b>

**Table 5.1:** Knowledge, Perceptions and Attitudes on HIV/AIDS by Provinces of Residence, Nationality and Sex, Year 2004 and 2008

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever heard of HIV/AIDS</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	86.0	97.1	75.8	94.6	84.3	96.7
- No	4.0	2.9	24.2	5.4	15.7	3.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2026)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2423)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Yes	97.4	100.0	94.7	100.0	97.2	100.0
- No	2.6	0.0	5.3	0.0	2.8	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	87.6	99.6	85.5	97.4	86.6	98.6
- No	12.4	0.4	14.5	2.6	13.4	1.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
<b>Total (weighted)</b>						
- Yes	87.9	97.9	81.6	96.2	86.5	97.5
- No	12.1	2.1	18.4	3.8	13.5	2.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2597)</b>	<b>(2613)</b>	<b>(777)</b>	<b>(772)</b>	<b>(3374)</b>	<b>(3385)</b>
<b>Knowledge on HIV/AIDS</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Can HIV/AIDS be prevented	63.8	77.6	59.8	80.0	63.2	77.9
- Known anyone who infected HIV/AIDS	48.3	32.8	22.6	40.5	44.5	34.0
- Known anyone who died of HIV/AIDS	49.0	32.5	23.6	40.1	45.2	33.7
- HIV/AIDS can infected by sharing a meal	24.6	10.6	16.3	9.8	23.4	10.5
- HIV/AIDS can infected by mosquito	54.7	30.9	46.2	31.1	53.3	31.0
- HIV/AIDS can infected by getting injections with a needle	89.7	93.6	76.1	93.0	87.7	93.5
- HIV/AIDS can infected by blood transfusion	92.9	93.8	79.4	95.4	90.9	94.0
- HIV/AIDS can infected from a pregnant woman	82.5	84.5	72.8	87.7	81.1	85.0
- HIV/AIDS can infected by breast feeding	81.4	82.8	71.1	91.4	79.9	84.2
- A healthy-looking person can transmit HIV/AIDS	52.4	51.4	63.1	67.8	54.0	54.0
- Can get HIV/AIDS through sexual contact	21.8	8.5	14.3	6.8	20.7	8.2
- Can protect HIV/AIDS by abstaining from sexual intercourse	70.7	68.0	69.8	72.2	70.6	68.7
- Can protect HIV/AIDS by having one uninfected sex partner	80.3	79.1	71.4	82.4	79.0	79.6
- We have any medicine that can cure HIV/AIDS	13.8	10.7	9.6	17.0	13.2	11.7
- Known anywhere you can get test for HIV/AIDS	46.0	52.1	45.5	61.6	46.0	53.6
- HIV test can be confidential	37.6	34.7	17.3	53.1	34.6	37.6
<b>(N)</b>	<b>(1742)</b>	<b>(1980)</b>	<b>(301)</b>	<b>(369)</b>	<b>(2043)</b>	<b>(2349)</b>



Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Knowledge on HIV/AIDS</b>						
<b>Cambodia</b>						
- Can HIV/AIDS be prevented	95.7	98.6	77.8	97.4	94.3	98.5
- Known anyone who infected HIV/AIDS	16.1	28.3	22.2	84.2	16.6	32.8
- Known anyone who died of HIV/AIDS	12.9	28.9	22.2	86.8	13.7	33.6
- HIV/AIDS can infected by sharing a meal	8.6	1.9	19.4	5.4	9.5	2.2
- HIV/AIDS can infected by mosquito	23.5	3.5	41.7	2.6	24.9	3.4
- HIV/AIDS can infected by getting injections with a needle	93.3	97.7	88.9	94.7	92.9	97.4
- HIV/AIDS can infected by blood transfusion	94.2	98.6	91.7	94.7	94.0	98.3
- HIV/AIDS can infected from a pregnant woman	90.6	82.0	83.3	57.9	90.1	80.0
- HIV/AIDS can infected by breast feeding	84.4	81.1	88.9	54.1	84.8	78.9
- A healthy-looking person can transmit HIV/AIDS	58.5	53.7	36.1	28.9	56.7	51.7
- Can get HIV/AIDS through sexual contact	3.6	6.1	27.8	5.3	5.5	6.0
- Can protect HIV/AIDS by abstaining from sexual intercourse	32.1	48.1	41.7	84.2	32.9	51.1
- Can protect HIV/AIDS by having one uninfected sex partner	67.6	82.2	66.7	78.9	67.5	82.0
- We have any medicine that can cure HIV/AIDS	3.1	2.3	11.1	2.6	3.8	2.4
- Known anywhere you can get test for HIV/AIDS	24.2	36.9	13.9	57.9	23.4	38.7
- HIV test can be confidential	41.7	52.0	38.9	36.8	41.5	50.8
(N)	(417)	(428)	(36)	(38)	(453)	(466)
<b>Knowledge on HIV/AIDS</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Can HIV/AIDS be prevented	73.0	94.9	73.7	86.9	73.3	91.2
- Known anyone who infected HIV/AIDS	39.4	31.4	27.3	37.4	33.8	34.2
- Known anyone who died of HIV/AIDS	42.0	30.7	32.5	44.5	37.6	37.1
- HIV/AIDS can infected by sharing a meal	23.5	5.4	12.9	6.4	18.6	5.9
- HIV/AIDS can infected by mosquito	52.2	22.0	48.9	18.6	50.5	20.4
- HIV/AIDS can infected by getting injections with a needle	92.9	98.1	93.8	95.9	93.3	97.1
- HIV/AIDS can infected by blood transfusion	93.4	97.7	96.4	97.7	94.8	97.7
- HIV/AIDS can infected from a pregnant woman	85.4	93.4	85.6	90.0	85.5	91.8
- HIV/AIDS can infected by breast feeding	78.3	94.9	76.8	91.4	77.6	93.3

Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Knowledge on HIV/AIDS</b>						
- A healthy-looking person can transmit HIV/AIDS	57.1	77.6	57.7	71.9	57.4	75.0
- Can get HIV/AIDS through sexual contact	18.1	4.3	12.4	5.0	15.5	4.6
- Can protect HIV/AIDS by abstaining from sexual intercourse	64.6	66.0	67.0	64.1	65.7	65.1
- Can protect HIV/AIDS by having one uninfected sex partner	73.9	89.0	69.1	84.9	71.7	87.1
- We have any medicine that can cure HIV/AIDS	12.4	9.0	14.9	5.0	13.6	7.1
- Known anywhere you can get test for HIV/AIDS	53.1	88.6	61.3	90.9	56.9	89.7
- HIV test can be confidential	59.7	69.5	35.1	61.2	48.3	65.7
(N)	(226)	(256)	(194)	(214)	(420)	(470)
<b>Total (weighted)</b>						
- Can HIV/AIDS be prevented	70.5	83.7	68.1	84.4	70.0	83.8
- Known anyone who infected HIV/AIDS	41.6	31.9	25.1	40.9	38.0	33.9
- Known anyone who died of HIV/AIDS	42.0	31.7	28.2	44.5	39.0	34.6
- HIV/AIDS can infected by sharing a meal	21.9	8.5	14.6	7.8	20.3	8.3
- HIV/AIDS can infected by mosquito	49.3	25.4	47.2	23.3	48.8	24.9
- HIV/AIDS can infected by getting injections with a needle	90.8	95.0	86.3	94.6	89.8	94.9
- HIV/AIDS can infected by blood transfusion	93.2	95.2	89.0	96.6	92.3	95.5
- HIV/AIDS can infected from a pregnant woman	84.3	85.7	80.1	87.6	83.4	86.2
- HIV/AIDS can infected by breast feeding	81.3	84.7	75.0	89.8	80.0	85.8
- A healthy-looking person can transmit HIV/AIDS	54.2	56.3	58.8	68.2	55.2	59.0
- Can get HIV/AIDS through sexual contact	18.3	7.4	13.9	5.8	17.3	7.1
- Can protect HIV/AIDS by abstaining from sexual intercourse	63.5	64.8	66.9	68.6	64.2	65.6
- Can protect HIV/AIDS by having one uninfected sex partner	77.1	81.2	69.9	83.6	75.6	81.8
- We have any medicine that can cure HIV/AIDS	11.8	9.2	12.6	10.1	12.0	9.4
- Known anywhere you can get test for HIV/AIDS	43.8	56.2	52.4	76.6	45.6	60.8
- HIV test can be confidential	42.1	43.3	27.9	56.6	39.0	46.3
(N)	(2283)	(2552)	(634)	(730)	(2917)	(3282)

Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>You are at some risk</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- High risk	3.1	4.2	5.7	7.4	3.4	4.7
- Not high risk	6.5	5.2	1.7	4.1	5.8	5.0
- Not risk	74.1	76.3	76.2	70.6	74.4	75.4
- Don't know	16.4	14.3	16.4	18.0	16.4	14.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1737)</b>	<b>(1970)</b>	<b>(298)</b>	<b>(367)</b>	<b>(2035)</b>	<b>(2337)</b>
<b>Cambodia</b>						
- High risk	2.2	2.3	-	15.8	2.0	3.4
- Not high risk	7.9	7.7	8.3	0.0	8.0	7.1
- Not risk	75.7	62.1	72.2	18.4	75.4	58.6
- Don't know	14.2	27.8	19.4	65.8	14.6	30.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(416)</b>	<b>(428)</b>	<b>(36)</b>	<b>(38)</b>	<b>(452)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- High risk	-	11.4	1.5	8.6	0.7	10.2
- Not high risk	1.8	2.8	3.1	2.9	2.4	2.8
- Not risk	88.5	78.7	78.4	69.9	83.8	74.7
- Don't know	9.7	7.1	17.0	18.7	13.1	12.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(226)</b>	<b>(254)</b>	<b>(194)</b>	<b>(209)</b>	<b>(420)</b>	<b>(463)</b>
<b>Total (weighted)</b>						
- High risk	2.4	5.2	3.2	8.3	2.5	5.9
- Not high risk	5.9	5.2	2.7	3.3	5.2	4.8
- Not risk	76.9	74.6	77.2	67.8	76.9	73.1
- Don't know	14.8	15.1	17.0	20.6	15.3	16.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2277)</b>	<b>(2541)</b>	<b>(631)</b>	<b>(720)</b>	<b>(2908)</b>	<b>(3261)</b>
<b>Why high risk</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Have sex with sex worker	44.0	48.8	13.3	0.0	36.9	36.7
- Do not trust partner	18.0	4.9	40.0	66.7	23.1	20.2
- Use addicted drug / use same needle	-	6.1	-	11.1	-	7.3
- Have sex with sex worker without condom	-	3.7	-	0.0	-	2.8
- Do not trust own-self	-	3.7	-	0.0	-	2.8
- Ever used same equipments and things with Others	-	11.0	-	3.7	-	9.2
- Do not like to use condom	-	7.3	-	3.7	-	6.4
- Misused the condom	-	1.2	-	0.0	-	0.9
- Husband ever had wife	-	0.0	-	3.7	-	0.9
- Mosquitoes bit person with HIV/AIDS and bit respondent	-	2.4	-	0.0	-	1.8
- Lived with crowded people and did not know who got any diseases	-	11.0	-	7.4	-	10.1
- Ever received blood	-	0.0	-	3.7	-	0.9
- Others	30.0	-	33.3	-	30.8	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(50)</b>	<b>(82)</b>	<b>(15)</b>	<b>(27)</b>	<b>(65)</b>	<b>(109)</b>

Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why high risk</b>						
<b>Cambodia</b>						
- Have sex with sex worker	77.8	40.0	-	0.0	77.8	25.0
- Do not trust partner	22.2	0.0	-	100.0	22.2	37.5
- Ever used same equipments and things with Others	-	20.0	-	0.0	-	12.5
- Do not like to use condom	-	20.0	-	0.0	-	12.5
- Misused the condom	-	20.0	-	0.0	-	12.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(9)</b>	<b>(10)</b>	<b>-</b>	<b>(6)</b>	<b>(9)</b>	<b>(16)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Have sex with sex worker	-	17.3	-	0.0	-	11.4
- Do not trust partner	-	3.8	(2)	46.7	(2)	18.2
- Know person who infected with HIV/AIDS	-	3.8	-	0.0	-	2.3
- Use addicted drug/use same needle	-	3.8	-	20.0	-	9.1
- Have sex with sex worker without condom	-	5.8	-	0.0	-	4.5
- Do not trust own-self	-	3.8	-	6.7	-	4.5
- Ever used same equipments and things with Others	-	17.3	-	0.0	-	11.4
- Do not like to use condom	-	0.0	-	13.3	-	4.5
- Misused the condom	-	3.8	-	0.0	-	2.3
- Have sex with non-spouse	-	3.8	-	0.0	-	2.3
- Never go to test blood	-	0.0	-	6.7	-	2.3
- Lived with crowded people and did not know who got any diseases	-	26.9	-	6.7	-	20.5
- Have frequently sexual intercourse	-	5.8	-	0.0	-	4.5
- Ever received blood	-	3.8	-	0.0	-	2.3
- Others	-	-	(1)	-	(1)	-
<b>Total</b>	<b>-</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>-</b>	<b>100</b>
<b>(N)</b>	<b>-</b>	<b>(52)</b>	<b>(3)</b>	<b>(15)</b>	<b>(3)</b>	<b>(44)</b>
<b>Total (weighted)</b>						
- Have sex with sex worker	49.0	36.2	10.5	0.0	7.2	25.4
- Do not trust partner	56.9	3.8	47.4	60.0	26.1	20.5
- Know person who infected with the HIV/AIDS	-	1.5	-	0.0	-	1.1
- Use addicted drug / use same needle	-	4.6	-	14.5	-	7.6
- Have sex with sex worker without condom	-	4.6	-	0.0	-	3.2
- Do not trust own-self	-	3.1	-	3.6	-	3.2
- Ever used same equipments and things with Others	-	13.8	-	1.8	-	10.3
- Do not like to use condom	-	5.4	-	7.3	-	5.9
- Misused condom	-	3.1	-	0.0	-	2.2
- Have sex with non-spouse	-	1.5	-	0.0	-	1.1
- Never go to test blood	-	0.0	-	3.6	-	1.1
- Husband ever had wife	-	0.0	-	1.8	-	0.5
- Mosquitoes bit person with HIV/AIDS and bit respondent	-	1.5	-	0.0	-	1.1
- Lived with crowded people and did not know who got any diseases	-	16.9	-	5.5	-	13.5
- Have frequently sexual intercourse	-	2.3	-	0.0	-	1.6
- Ever received blood	-	1.5	-	1.8	-	1.6
- Others	25.5	-	31.6	-	27.5	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(51)</b>	<b>(130)</b>	<b>(19)</b>	<b>(55)</b>	<b>(69)</b>	<b>(185)</b>

Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not high risk</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- No sex with sex worker	1.9	23.5	-	23.5	1.8	20.5
- Do not have HIV infected friend	1.9	3.9	-	3.9	1.8	6.8
- Have sex with sex worker	23.1	-	-	-	23.0	-
- Do not trust partner	57.4	-	(4)	-	58.4	-
- Know person who infected with the HIV/AIDS	-	15.7	-	15.7	-	13.7
- Use addicted drug / use same needle	-	2.9	-	2.9	-	3.4
- Have sex with sex worker without condom	-	3.9	-	3.9	-	3.4
- Do not trust own-self	-	2.9	-	2.9	-	2.6
- Ever used same equipments and things with Others	-	11.8	-	11.8	-	10.3
- Do not like to use condom	-	4.9	-	4.9	-	4.3
- Misused condom	-	1.0	-	1.0	-	0.9
- Have sex with non-spouse	-	1.0	-	1.0	-	0.9
- Sharing male with the Others	-	1.0	-	1.0	-	0.9
- Never go to test blood	-	5.9	-	5.9	-	12.8
- Blood Donation	-	-	-	-	-	-
- Lived with crowded people and did not know who got any diseases	-	16.7	-	16.7	-	14.5
- Condom expired	-	1.0	-	1.0	-	0.9
- Have frequently sexual intercourse	-	2.9	-	2.9	-	3.4
- Others	15.7	1.0	-	1.0	15.	0.9
<b>Total (N)</b>	<b>100 (108)</b>	<b>100 (102)</b>	<b>- (4)</b>	<b>100 (102)</b>	<b>100 (113)</b>	<b>100 (117)</b>
<b>Cambodia</b>						
- No sex with sex worker	-	9.7	-	-	-	9.7
- Have sex with sex worker	36.4	-	-	-	33.3	-
- Do not trust partner	51.1	-	(3)	-	55.6	-
- Use addicted drug / use same needle	-	3.2	-	-	-	3.2
- Ever used same equipments and things with Others	-	64.5	-	-	-	64.5
- Do not like to use condom	-	3.2	-	-	-	3.2
- Misused condom	-	9.7	-	-	-	9.7
- Had ever oral sex	-	6.5	-	-	-	6.5
- Ever been STIs	-	3.2	-	-	-	3.2
- Others	12.1	-	-	-	11.1	-
<b>Total (N)</b>	<b>100 (33)</b>	<b>100 (31)</b>	<b>- (3)</b>	<b>-</b>	<b>100 (36)</b>	<b>100 (31)</b>

Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not high risk</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- No sex with sex worker	-	42.9	-	0.0	-	23.1
- Do not have HIV infected friend	-	0.0	-	33.3	-	15.4
- Have sex with sex worker	(1)	-	-	-	20.0	-
- Do not trust partner	(3)	-	(5)	-	80.0	-
- Use addicted drug/use same needle	-	14.3	-	0.0	-	7.7
- Ever used same equipments and things with Others	-	0.0	-	16.7	-	7.7
- Do not like to use condom	-	28.6	-	0.0	-	15.4
- Have sex with non-spouse	-	0.0	-	16.7	-	7.7
- Blood Donation	-	0.0	-	16.7	-	7.7
- Lived with crowded people and did not know who got any diseases	-	0.0	-	16.7	-	7.7
- Have frequently sexual intercourse	-	14.3	-	0.0	-	7.7
- Others	-	-	-	-	-	-
<b>Total</b>	<b>-</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(4)</b>	<b>(7)</b>	<b>(5)</b>	<b>(6)</b>	<b>(10)</b>	<b>(13)</b>
<b>Total (weighted)</b>						
- No sex with sex worker	1.5	22.7	-	0.0	1.4	19.0
- Do not have HIV infected friend	1.5	2.3	-	28.0	1.4	6.5
- Have sex with sex worker	26.2	-	-	-	25.0	-
- Do not trust partner	56.9	-	100.0	-	60.1	-
- Know person who infected with the HIV/AIDS	-	10.9	-	0.0	-	9.2
- Use addicted drug /use same needle	-	3.9	-	4.0	-	3.9
- Have sex with sex worker without condom	-	2.3	-	0.0	-	2.0
- Do not trust own-self	-	2.3	-	0.0	-	2.0
- Ever used same equipments and things with Others	-	21.9	-	8.0	-	19.6
- Do not like to use condom	-	7.0	-	0.0	-	5.9
- Misused condom	-	2.3	-	0.0	-	2.0
- Had ever oral sex	-	1.6	-	0.0	-	1.3
- Ever been STIs	-	0.8	-	0.0	-	0.7
- Have sex with non-spouse	-	0.8	-	8.0	-	2.0
- Sharing male with the Others	-	0.8	-	0.0	-	0.7
- Never go to test blood	-	3.9	-	32.0	-	8.5
- Blood Donation	-	0.0	-	8.0	-	1.3
- Lived with crowded people and did not know who got any diseases	-	11.7	-	8.0	-	11.1
- Condom expired	-	0.8	-	0.0	-	0.7
- Have frequently sexual intercourse	-	3.1	-	4.0	-	3.3
- Others	13.8	0.8	0.0	0.0	12.2	0.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(130)</b>	<b>(128)</b>	<b>(12)</b>	<b>(25)</b>	<b>(148)</b>	<b>(153)</b>

Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not risk</b>						
<b>Non Coastal Provinces</b>						
<b>Myanmar</b>						
- No sex with sex worker	49.3	46.8	9.4	0.0	43.4	39.9
- Do not have HIV infected friend	3.6	0.1	85.3	0.0	15.8	0.1
- Use the condom	23.4	1.7	0.4	0.0	20.0	1.5
- Never have sexual intercourse / trust on partner	12.0	11.7	1.8	21.3	10.5	13.1
- Have only one partner	10.3	16.2	3.1	64.0	9.3	23.2
- To be sure not infected diseases	-	12.1	-	5.8	-	11.2
- At present have no sexual intercourse	-	0.2	-	0.8	-	0.3
- Do not use the addicted drug	-	0.8	-	0.4	-	0.7
- Ever tested blood and already treatment	-	10.1	-	1.2	-	8.8
- Have blood tested before marry	-	0.1	-	0.0	-	0.1
- Husband do not like to participate in night life	-	0.0	-	6.2	-	0.9
- Do not share needle with others	-	0.1	-	0.4	-	0.1
- Others	1.3	-	-	-	1.1	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1277)</b>	<b>(1499)</b>	<b>(224)</b>	<b>(258)</b>	<b>(1501)</b>	<b>(1757)</b>
<b>Cambodia</b>						
- No sex with sex worker	11.6	0.4	4.0	0.0	11.0	0.4
- Use the condom	42.3	1.1	8.0	0.0	39.8	1.1
- Never have sexual intercourse / trust on partner	34.5	35.8	48.0	71.4	35.5	36.8
- Have only one partner	10.6	10.6	36.0	28.6	12.5	11.0
- To be sure not infected diseases	-	3.8	-	0.0	-	3.7
- At present have no sexual intercourse	-	0.4	-	0.0	-	0.4
- Ever tested blood and already treatment	-	47.9	-	0.0	-	46.7
- Others	0.6	-	1.0	-	0.9	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(310)</b>	<b>(265)</b>	<b>(25)</b>	<b>(7)</b>	<b>(335)</b>	<b>(272)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- No sex with sex worker	41.5	18.4	15.9	0.0	30.5	10.6
- Do not have HIV infected friend	8.5	0.5	15.2	0.0	11.4	0.3
- Use the condom	11.5	0.5	7.3	0.0	9.7	0.3
- Never have sexual intercourse / trust on partner	12.0	33.2	35.1	23.4	21.9	29.0
- Have only one partner	23.0	27.6	25.2	40.0	23.9	32.8
- To be sure not infected diseases	-	16.3	-	26.2	-	20.5
- At present have no sexual intercourse	-	0.0	-	0.7	-	0.3
- Do not use the addicted drug	-	0.5	-	0.7	-	0.6
- Ever tested blood and already treatment	-	3.1	-	4.1	-	3.5
- Have blood tested before marry	-	0.0	-	4.1	-	1.8
- Husband do not like to participate in night life	-	0.0	-	0.7	-	0.3
- Others	3.5	-	1.3	-	2.6	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(200)</b>	<b>(196)</b>	<b>(151)</b>	<b>(145)</b>	<b>(351)</b>	<b>(341)</b>

Table 5.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not risk</b>						
<b>Total (weighted)</b>						
- No sex with sex worker	41.9	35.9	12.7	0.0	35.6	28.6
- Do not have HIV infected friend	4.0	0.2	43.0	0.0	12.5	0.1
- Use the condom	23.9	1.4	4.6	0.0	19.7	1.1
- Never have sexual intercourse / trust on partner	15.5	18.6	22.2	23.1	16.9	19.5
- Have only one partner	13.0	17.6	16.6	50.9	13.7	24.4
- To be sure not infected diseases	-	11.9	-	16.5	-	12.8
- At present have no sexual intercourse	-	0.2	-	0.6	-	0.3
- Do not use the addicted drug	-	0.6	-	0.6	-	0.6
- Ever tested blood and already treatment	-	13.5	-	2.7	-	11.3
- Have blood tested before marry	-	0.1	-	2.1	-	0.5
- Husband do not like to participate in night life	-	0.0	-	3.3	-	0.7
- Do not share needle with others	-	0.1	-	0.2	-	0.1
- Others	1.6	-	0.0	-	1.4	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1737)</b>	<b>(1884)</b>	<b>(481)</b>	<b>(485)</b>	<b>(2219)</b>	<b>(2369)</b>

Table 5.2: Knowledge on Condom and its Use

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever heard about or seen a condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	80.3	95.7	50.1	87.5	75.4	94.4
- No	19.7	4.2	49.9	12.6	24.6	5.6
Total	100	100	100	100	100	100
<b>(N)</b>	<b>(2025)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2422)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Yes	97.7	99.8	89.5	86.8	97.0	98.7
- No	2.3	0.2	10.5	13.2	3.0	1.3
Total	100	100	100	100	100	100
<b>(N)</b>	<b>(428)</b>	<b>(427)</b>	<b>(32)</b>	<b>(38)</b>	<b>(466)</b>	<b>(459)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	92.6	98.1	72.2	97.4	83.1	97.7
- No	7.4	1.9	27.8	2.7	16.9	2.3
Total	100	100	100	100	100	100
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
<b>Total (weighted)</b>						
- Yes	84.9	96.7	63.1	92.5	79.9	95.8
- No	14.5	3.3	36.5	7.5	19.6	4.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2596)</b>	<b>(2613)</b>	<b>(776)</b>	<b>(772)</b>	<b>(3372)</b>	<b>(3385)</b>



**Table 5.3:** The purpose of condom use

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>For what purposes could a condom be used</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Sexual pleasure	2.1	9.7	0.5	11.1	1.9	9.9
- Avoiding pregnancy	51.0	32.6	53.3	64.9	51.2	37.4
- STI prevention	32.7	44.8	6.0	32.5	29.8	43.0
- AIDS prevention	79.3	83.6	75.9	78.1	78.9	82.8
- Others	0.7	0.0	0.5	0.6	0.7	0.1
(N)	(1626)	(1885)	(199)	(331)	(1852)	(2216)
<b>Cambodia</b>						
- Sexual pleasure	1.4	2.3	0.0	3.1	1.3	2.4
- Avoiding pregnancy	27.5	72.1	26.5	96.9	27.4	73.9
- STI prevention	62.2	93.9	64.7	84.4	62.4	93.2
- AIDS prevention	92.1	95.3	76.5	93.8	90.9	95.2
- Others	0.5	0.2	0.0	0.0	0.4	0.2
(N)	(418)	(427)	(34)	(33)	(452)	(460)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Sexual pleasure	1.3	8.0	0.0	14.5	0.7	11.0
- Avoiding pregnancy	54.0	55.4	60.4	75.9	56.6	65.0
- STI prevention	51.0	42.6	15.9	50.5	36.7	46.3
- AIDS prevention	85.4	80.9	88.4	84.1	86.6	82.4
- Others	0.4	0.4	1.2	0.0	0.7	0.2
(N)	(239)	(251)	(164)	(220)	(403)	(471)
<b>Total (weighted)</b>						
- Sexual pleasure	1.8	8.3	0.2	12.6	1.5	9.2
- Avoiding pregnancy	47.7	42.4	55.8	72.1	49.2	48.9
- STI prevention	41.1	51.7	15.3	44.2	36.4	50.0
- AIDS prevention	82.6	84.9	83.1	81.9	82.7	84.2
- Others	0.6	0.1	0.8	0.3	0.6	0.2
(N)	(2203)	(2523)	(491)	(712)	(2694)	(3235)

**Table 5.4:** Knowledge on Sources of Condom

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Which place or persons do you know from where you can obtain a condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Health Center	8.5	6.0	8.7	8.4	8.5	6.4
- Government STI Clinic	7.7	1.3	7.8	2.9	7.7	1.6
- Government Hospital	8.0	2.6	8.7	6.5	8.0	3.3
- Private Clinic	7.8	0.7	6.6	0.2	7.7	0.6
- Private Hospital	7.8	1.7	6.4	1.1	7.7	1.6
- Drug store	8.8	20.7	11.3	12.1	8.9	19.2
- Grocery / General Shop	2.1	7.0	3.0	3.1	2.2	6.4
- Gas Station	0.4	0.5	1.4	0.7	0.5	0.5
- Vending machine	1.2	0.6	0.2	0.6	1.2	0.6
- Brothel	9.9	9.9	7.0	1.0	9.8	8.4
- Bar	1.6	0.1	2.6	0.1	1.7	0.1
- Guest house	4.8	1.1	7.2	0.5	4.9	1.0
- Motel	5.2	0.2	6.2	-	5.2	0.2
- Sexual Partner	4.9	0.8	6.6	0.6	4.9	0.8
- Sex worker (male/female)	7.1	2.7	6.6	0.7	7.1	2.4
- Peer educator / NGO	5.5	15.0	4.4	17.4	5.5	15.5
- Volunteer health worker	5.8	2.1	4.0	1.6	5.7	2.0
- Friend	2.9	4.9	1.4	2.3	2.8	4.5
- Health care provider for foreigners/ Health volunteer for foreigners	-	14.9	-	26.1	-	16.7
- Condom box	-	5.7	-	12.1	-	6.8
- Others	0.1	2.6	0.2	2.0	1.0	1.6
<b>Total (N)</b>	<b>100 (9757)</b>	<b>100 (4266)</b>	<b>100 (440)</b>	<b>100 (871)</b>	<b>100 (10197)</b>	<b>100 (5137)</b>
<b>Cambodia</b>						
- Health Center	4.0	8.3	8.3	1.9	4.2	8.0
- Government STI Clinic	2.5	1.1	11.1	-	2.7	1.0
- Government Hospital	9.5	4.5	8.3	5.7	9.5	4.5
- Private Clinic	6.9	1.6	8.3	1.9	7.0	1.6
- Private Hospital	6.0	2.3	8.3	7.5	6.0	2.5
- Drug store	16.4	12.2	5.6	9.4	16.2	12.1
- Grocery /General Shop	3.2	7.0	11.1	-	3.1	6.7
- Gas Station	0.3	0.7	-	-	0.3	0.7
- Vending machine	0.8	5.7	2.8	1.9	0.9	5.6
- Brothel	15.4	14.5	8.3	13.2	15.2	14.4
- Bar	2.3	1.8	2.8	-	2.3	1.7
- Guest house	3.1	5.1	-	1.9	3.0	5.0
- Motel	2.1	1.7	-	-	2.1	1.7
- Sexual Partner	3.3	0.6	8.3	-	3.4	0.6
- Sex worker (male/female)	4.9	7.1	8.3	-	5.0	6.8
- Peer educator / NGO	5.1	0.9	5.6	-	5.1	0.9
- Volunteer health worker	5.7	0.2	8.3	1.9	5.8	0.2
- Friend	8.2	2.2	2.8	-	8.1	1.1
- Health care provider for foreigners/ Health volunteer for foreigners	-	19.2	-	43.4	-	20.2
- Condom box	-	1.2	-	7.5	-	1.5
- Others	0.1	2.0	-	3.8	0.1	2.1
<b>Total (N)</b>	<b>100 (N)</b>	<b>100 (1208)</b>	<b>100 (31)</b>	<b>100 (53)</b>	<b>100 (1379)</b>	<b>100 (1261)</b>

Table 5.4: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Which place or persons do you know from where you can obtain a condom</b>						
<b>Non Coastal Provinces</b>						
Chiengmai and Tak						
- Health Center	7.8	8.9	8.1	11.3	8.0	10.1
- Government STI Clinic	7.6	2.7	7.9	5.9	7.8	4.4
- Government Hospital	7.8	8.1	8.3	5.9	8.0	7.0
- Private Clinic	8.1	0.7	7.9	3.0	8.0	1.9
- Private Hospital	7.6	1.0	7.8	2.2	7.7	1.6
- Drug store	6.7	11.5	7.3	8.4	7.0	9.9
- Grocery / General Shop	2.7	3.3	3.6	1.5	3.1	2.3
- Gas Station	0.5	1.4	0.7	0.5	0.6	1.0
- Vending machine	1.9	0.9	1.1	0.6	1.5	0.7
- Brothel	8.8	2.0	6.3	2.0	7.7	2.0
- Bar	1.8	-	1.6	0.3	1.7	0.2
- Guest house	5.2	2.2	4.9	1.7	5.0	1.9
- Motel	5.3	0.1	4.7	0.6	5.0	0.4
- Sexual Partner	4.5	0.2	4.4	2.2	4.5	1.2
- Sex worker (male/female)	6.8	0.4	6.3	2.5	6.6	1.5
- Peer educator / NGO	5.8	22.3	7.7	22.5	6.6	22.4
- Volunteer health worker	6.4	0.8	7.5	0.7	6.8	0.7
- Friend	4.3	2.7	3.5	1.7	4.0	2.2
- Health care provider for foreigners/ Health volunteer for foreigners	-	23.4	-	15.0	-	19.1
- Condom box	-	6.9	-	10.2	-	8.6
- Others	0.4	0.8	0.5	1.2	0.5	1.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(3455)</b>	<b>(918)</b>	<b>(2628)</b>	<b>(958)</b>	<b>(6084)</b>	<b>(1876)</b>
<b>Total (weighted)</b>						
- Health Center	8.0	7.1	8.2	10.2	8.0	8.0
- Government STI Clinic	7.2	1.6	7.9	4.9	7.3	2.5
- Government Hospital	8.1	4.3	8.3	6.1	8.1	4.8
- Private Clinic	7.8	0.8	7.7	2.1	7.8	1.2
- Private Hospital	7.6	1.6	7.6	2.0	7.6	1.7
- Drug store	9.0	17.0	7.9	9.5	8.8	14.9
- Grocery / General Shop	2.4	6.1	3.5	1.9	2.6	4.9
- Gas Station	0.4	0.8	0.8	0.6	0.5	0.7
- Vending machine	1.3	1.5	1.0	0.6	1.3	1.3
- Brothel	10.1	8.6	6.4	1.9	9.5	6.8
- Bar	1.7	0.4	1.7	0.2	1.7	0.3
- Guest house	4.7	2.0	5.1	1.3	4.8	1.8
- Motel	4.9	0.4	4.8	0.4	4.9	0.4
- Sexual Partner	4.6	0.6	4.7	1.7	4.7	0.9
- Sex worker (male/female)	6.8	2.9	6.4	1.9	6.7	2.6
- Peer educator / NGO	5.5	14.6	7.2	20.5	5.8	16.2
- Volunteer health worker	5.9	1.4	7.0	1.0	6.1	1.3
- Friend	3.7	3.9	3.2	1.8	3.6	3.3
- Health care provider for foreigners/ Health volunteer for foreigners	-	17.7	-	18.9	-	18.0
- Condom box	-	5.3	-	10.7	-	6.8
- Others	0.2	1.4	0.5	1.5	0.2	1.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(14560)</b>	<b>(6391)</b>	<b>(3099)</b>	<b>(2483)</b>	<b>(17660)</b>	<b>(8874)</b>

**Table 5.5:** Perspectives on Accessibility and Correct Application of Condom, and Opinion on Male / Female Access to Condom

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Condom is easily accessible</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	64.8	68.5	51.2	81.5	64.0	70.4
- No	34.2	23.7	48.8	10.6	36.0	21.8
- Don't know	-	7.8	-	7.9	-	7.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1347)</b>	<b>(1659)</b>	<b>(84)</b>	<b>(278)</b>	<b>(1431)</b>	<b>(1937)</b>
<b>Cambodia</b>						
- Yes	85.1	89.5	28.6	67.7	84.1	88.0
- No	14.9	5.6	71.4	0.0	15.9	5.2
- Don't know	-	4.9	-	32.3	-	6.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(389)</b>	<b>(427)</b>	<b>(7)</b>	<b>(31)</b>	<b>(396)</b>	<b>(458)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	66.5	95.2	62.1	92.3	64.7	93.9
- No	33.5	3.6	37.9	5.5	35.3	4.4
- Don't know	-	1.2	-	2.3	-	1.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(194)</b>	<b>(245)</b>	<b>(132)</b>	<b>(202)</b>	<b>(326)</b>	<b>(447)</b>
<b>Total (weighted)</b>						
- Yes	68.8	75.4	58.8	83.0	67.4	77.1
- No	23.6	18.4	28.0	8.6	24.3	16.3
- Don't know	-	6.2	-	8.3	-	6.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1857)</b>	<b>(2381)</b>	<b>(311)</b>	<b>(671)</b>	<b>(2168)</b>	<b>(3052)</b>
<b>People can use condom correctly every time</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	82.5	82.7	80.9	87.4	82.3	83.4
- No	17.5	10.3	19.1	5.0	17.7	9.5
- Don't know	-	7.0	-	7.6	-	7.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1625)</b>	<b>(1817)</b>	<b>(199)</b>	<b>(316)</b>	<b>(1824)</b>	<b>(2133)</b>
<b>Cambodia</b>						
- Yes	91.8	90.4	64.7	87.9	89.8	90.2
- No	8.2	7.7	35.3	6.1	10.2	7.6
- Don't know	-	1.9	-	6.1	-	2.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(417)</b>	<b>(447)</b>	<b>(34)</b>	<b>(33)</b>	<b>(451)</b>	<b>(460)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	56.7	96.4	66.3	94.4	60.6	95.5
- No	43.3	3.6	33.7	5.6	39.4	4.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(238)</b>	<b>(252)</b>	<b>(163)</b>	<b>(220)</b>	<b>(401)</b>	<b>(472)</b>
<b>Total (weighted)</b>						
- Yes	79.2	86.0	71.4	90.0	77.7	86.9
- No	13.5	8.7	14.9	5.3	13.7	8.0
- Don't know	-	5.2	-	4.6	-	5.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2202)</b>	<b>(2522)</b>	<b>(489)</b>	<b>(713)</b>	<b>(2691)</b>	<b>(3235)</b>

Table 5.5: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Condom is easily accessible</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	23.7	34.8	23.1	31.9	23.6	34.3
- No	76.3	54.3	76.9	57.0	76.4	54.7
- Don't know	-	10.9	-	11.1	-	10.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1625)</b>	<b>(1743)</b>	<b>(199)</b>	<b>(304)</b>	<b>(1824)</b>	<b>(2047)</b>
<b>Cambodia</b>						
- Yes	82.3	88.5	58.8	100.0	80.5	89.3
- No	17.7	4.2	41.2	0.0	19.5	3.9
- Don't know	-	7.3	-	0.0	-	6.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(418)</b>	<b>(396)</b>	<b>(34)</b>	<b>(33)</b>	<b>(452)</b>	<b>(429)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	3.3	10.8	11.0	26.8	6.5	18.3
- No	96.7	86.0	89.0	63.2	93.5	75.3
- Don't know	-	3.2	-	10.0	-	6.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(239)</b>	<b>(242)</b>	<b>(164)</b>	<b>(198)</b>	<b>(403)</b>	<b>(440)</b>
<b>Total (weighted)</b>						
- Yes	29.5	38.6	18.1	31.8	27.5	37.1
- No	60.3	52.4	58.5	58.1	60.0	53.6
- Don't know	-	9.0	-	10.1	-	9.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2204)</b>	<b>(2520)</b>	<b>(491)</b>	<b>(713)</b>	<b>(2695)</b>	<b>(3233)</b>

**Table 5.6:** Knowledge on STIs, the linkage to HIV/AIDS and STIs symptoms

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever heard any disease Others</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
Yes	64.5	86.5	16.1	81.6	56.5	85.7
No	35.5	13.5	83.9	18.4	43.5	14.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2024)</b>	<b>(2042)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2421)</b>	<b>(2433)</b>
<b>Cambodia</b>						
Yes	93.2	96.5	60.5	86.8	90.6	95.7
No	6.8	3.5	39.5	13.2	9.4	4.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
Yes	64.5	87.5	16.1	87.6	56.5	87.6
No	35.5	12.5	83.9	12.4	43.5	12.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2024)</b>	<b>(256)</b>	<b>(397)</b>	<b>(226)</b>	<b>(2421)</b>	<b>(482)</b>
<b>Total (weighted)</b>						
Yes	62.3	88.1	34.1	84.9	56.5	87.4
No	37.7	11.9	65.9	15.1	43.5	12.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(3354)</b>	<b>(2607)</b>	<b>(776)</b>	<b>(770)</b>	<b>(2421)</b>	<b>(3377)</b>
<b>A person suffering from STI has a high chance of HIV</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	75.5	83.6	77.0	85.1	75.5	83.9
- No	16.6	7.1	9.8	4.7	16.3	6.8
- Don't know	7.9	9.2	13.1	10.1	8.2	9.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1276)</b>	<b>(1754)</b>	<b>(61)</b>	<b>(316)</b>	<b>(1337)</b>	<b>(2070)</b>
<b>Cambodia</b>						
- Yes	73.0	98.0	65.2	75.8	72.6	96.4
- No	1.8	0.5	0.0	0.0	1.7	0.5
- Don't know	25.2	1.5	34.8	24.2	25.7	3.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(397)</b>	<b>(409)</b>	<b>(23)</b>	<b>(33)</b>	<b>(420)</b>	<b>(442)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	83.3	88.8	82.1	80.6	82.9	85.0
- No	8.6	3.6	8.5	13.3	8.6	8.1
- Don't know	8.1	7.6	9.4	6.1	8.6	6.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(186)</b>	<b>(224)</b>	<b>(106)</b>	<b>(196)</b>	<b>(292)</b>	<b>(420)</b>
<b>Total (weighted)</b>						
- Yes	76.5	86.8	79.8	82.3	76.9	85.8
- No	12.2	5.5	8.1	9.1	11.7	6.3
- Don't know	11.3	7.8	12.0	8.6	11.4	7.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1788)</b>	<b>(2283)</b>	<b>(258)</b>	<b>(648)</b>	<b>(2046)</b>	<b>(2931)</b>

Table 5.6: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>A symptoms of woman who infected with STI</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Lower abdominal pain	1.9	2.8	12.5	12.5	2.4	4.3
- Genital discharge	22.5	16.0	23.4	33.2	22.5	18.6
- Foul smelling discharge	12.6	11.7	20.3	32.9	12.9	14.9
- Burning / pain during urination	13.4	8.8	14.1	26.0	13.4	11.5
- Genital ulcers/sores	15.4	17.0	25.0	16.3	15.9	16.9
- Swelling in groin area/pain during sexual intercourse	9.7	8.0	17.2	14.7	10.0	9.0
- Itching / reddening	13.8	15.7	32.8	16.9	14.7	15.9
- Warts	9.4	6.0	15.6	6.3	9.7	6.0
- Skin rashes	17.1	20.6	42.2	12.9	18.3	19.4
- Others	3.9	1.6	6.3	0.6	4.0	1.4
(N)	(1305)	(1758)	(64)	(391)	(1369)	(2077)
<b>Cambodia</b>						
- Lower abdominal pain	0.5	1.7	13.0	3.0	1.2	1.8
- Genital discharge	3.8	14.8	21.7	18.2	4.7	15.0
- Foul smelling discharge	0.8	11.9	8.7	30.3	1.2	13.2
- Burning / pain during urination	2.3	12.3	30.4	48.5	3.8	15.0
- Genital ulcers/sores	3.8	9.0	4.3	30.3	3.8	10.5
- Swelling in groin area/pain during sexual intercourse	1.8	10.7	26.1	42.4	3.1	13.0
- Itching / reddening	1.0	7.5	0.0	24.2	0.9	8.7
- Warts	3.5	1.0	13.0	6.1	4.0	1.3
- Skin rashes	2.5	0.5	13.0	0.0	3.1	0.4
- Others	2.0	0.0	17.4	0.0	2.8	0.0
(N)	(399)	(413)	(23)	(33)	(422)	(446)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Lower abdominal pain	1.6	12.1	5.6	3.6	3.0	8.2
- Genital discharge	10.5	39.5	14.8	27.3	12.0	33.8
- Foul smelling discharge	7.3	35.9	12.0	39.7	9.0	37.6
- Burning / pain during urination	6.8	21.5	9.3	21.1	7.7	21.3
- Genital ulcers/sores	6.8	42.6	30.6	53.1	15.4	47.5
- Swelling in groin area/pain during sexual intercourse	3.7	15.2	2.8	8.8	3.3	12.2
- Itching / reddening	7.3	25.1	38.0	26.8	18.4	25.9
- Warts	4.2	17.5	10.2	16.5	6.4	17.0
- Skin rashes	8.4	12.1	32.4	6.2	17.1	9.4
- Others	0.5	0.9	11.1	0.0	4.3	0.5
(N)	(191)	(223)	(108)	(194)	(299)	(417)
<b>Total (weighted)</b>						
- Lower abdominal pain	1.6	8.8	7.5	9.4	2.3	9.0
- Genital discharge	16.7	41.5	17.0	37.3	16.7	40.1
- Foul smelling discharge	9.3	33.1	13.6	46.0	9.9	37.2
- Burning / pain during urination	10.1	24.2	11.7	30.9	10.3	26.3
- Genital ulcers/sores	11.6	42.1	27.5	45.8	13.6	43.3
- Swelling in groin area/pain during sexual intercourse	7.1	20.1	7.5	16.2	7.1	18.9
- Itching / reddening	10.1	33.4	34.0	28.4	13.2	31.8
- Warts	7.3	14.9	11.7	14.7	7.9	14.8
- Skin rashes	12.7	33.4	32.8	11.1	15.3	26.3
- Others	2.9	2.6	10.6	0.4	3.9	1.9
(N)	(1824)	(1092)	(265)	(512)	(2089)	(1604)

**Table 5.7:** Perceived incidence of STIs.

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>You had a thick yellowish/greenish discharge</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
Yes	3.1	1.1	0.8	2.3	2.7	1.3
No	96.6	98.3	99.2	97.7	97.1	98.2
Can't remember	0.2	0.6	0.0	0.0	0.2	0.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2021)</b>	<b>(2043)</b>	<b>(397)</b>	<b>(390)</b>	<b>(2418)</b>	<b>(2433)</b>
<b>Cambodia</b>						
Yes	1.9	0.7	2.6	0.0	1.9	0.6
No	97.0	99.3	97.4	100.0	97.0	99.4
Can't remember	1.2	-	0.0	-	1.1	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(427)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(465)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
Yes	1.6	1.9	1.3	1.4	1.4	1.7
No	97.7	97.7	97.8	95.9	97.7	96.9
Can't remember	0.8	0.4	0.9	2.7	0.8	1.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(257)</b>	<b>(226)</b>	<b>(221)</b>	<b>(483)</b>	<b>(478)</b>
<b>Total (weighted)</b>						
Yes	2.7	1.2	1.2	1.7	2.3	1.3
No	96.9	98.4	98.5	97.0	97.2	98.0
Can't remember	0.5	0.5	0.4	1.3	0.4	0.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2590)</b>	<b>(2609)</b>	<b>(775)</b>	<b>(760)</b>	<b>(3365)</b>	<b>(3369)</b>
<b>A symptoms of man who infected with STI</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Lower abdominal pain	2.7	4.0	20.3	5.3	3.5	4.2
- Genital discharge	37.3	38.3	28.1	22.9	36.9	36.0
- Foul smelling discharge	22.3	22.5	21.9	20.1	22.3	22.1
- Burning / pain during urination	26.3	19.0	23.4	20.4	26.2	19.2
- Genital ulcers/sores	30.0	33.2	32.8	21.9	30.1	31.5
- Swelling in groin area/pain during sexual intercourse	17.2	17.2	9.4	22.9	16.8	18.1
- Itching / reddening	18.9	18.5	31.3	21.0	19.4	18.9
- Warts	19.1	17.5	23.4	11.9	19.3	16.6
- Skin rashes	22.2	33.2	32.8	14.4	22.7	30.3
- Retract foreskin	4.0	6.2	7.8	13.5	4.2	7.3
- Others	3.8	1.7	4.7	0.6	3.8	1.5
<b>(N)</b>	<b>(1305)</b>	<b>(1767)</b>	<b>(64)</b>	<b>(319)</b>	<b>(1369)</b>	<b>(2086)</b>



Table 5.7: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>A symptoms of man who infected with STI</b>						
<b>Cambodia</b>						
- Lower abdominal pain	4.8	3.9	0.0	0.0	4.5	3.6
- Genital discharge	30.3	25.7	4.3	3.0	28.9	24.0
- Foul smelling discharge	5.0	23.5	4.3	9.1	5.0	22.4
- Burning / pain during urination	22.1	46.5	26.1	6.1	22.3	43.5
- Genital ulcers/sores	13.5	33.4	8.7	15.2	13.3	32.1
- Swelling in groin area/pain during sexual intercourse	12.5	44.3	26.1	21.2	13.3	42.6
- Itching / reddening	4.0	32.7	4.3	30.3	4.0	32.5
- Warts	5.3	13.8	13.0	15.2	5.7	13.9
- Skin rashes	3.3	41.2	13.0	6.1	3.8	38.6
- Retract foreskin	1.3	2.7	4.3	0.0	1.4	2.5
- Others	3.5	0.0	17.4	0.0	4.3	0.0
(N)	(399)	(413)	(23)	(33)	(422)	(446)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Lower abdominal pain	2.1	10.7	6.5	3.6	3.7	7.5
- Genital discharge	26.7	49.1	14.8	26.6	22.4	38.7
- Foul smelling discharge	27.7	30.4	8.3	33.9	20.7	32.0
- Burning / pain during urination	26.2	36.2	8.3	27.1	19.7	32.0
- Genital ulcers/sores	27.2	54.5	18.5	57.3	24.1	55.8
- Swelling in groin area/pain during sexual intercourse	12.0	31.7	56.	15.1	9.7	24.0
- Itching / reddening	13.6	28.1	25.0	21.4	17.7	25.0
- Warts	23.6	23.2	17.6	17.2	21.4	20.4
- Skin rashes	22.0	21.0	23.1	3.6	22.4	13.0
- Retract foreskin	2.6	8.5	5.6	0.5	3.7	4.8
- Others	0.0	0.0	4.6	0.0	1.7	0.0
(N)	(191)	(224)	(108)	(192)	(299)	(416)
<b>Total (weighted)</b>						
- Lower abdominal pain	3.0	6.6	9.0	5.5	3.7	6.3
- Genital discharge	34.1	48.7	16.9	31.4	31.9	45.0
- Foul smelling discharge	20.0	30.6	10.9	35.2	18.9	31.6
- Burning / pain during urination	25.5	33.5	12.8	30.6	23.9	32.9
- Genital ulcers/sores	26.3	46.9	20.8	52.7	25.6	48.1
- Swelling in groin area/pain during sexual intercourse	15.4	30.5	7.9	24.7	14.4	29.3
- Itching / reddening	15.1	28.5	24.8	28.4	16.3	28.5
- Warts	17.3	22.8	18.5	19.4	17.4	22.1
- Skin rashes	18.5	41.3	24.5	11.0	19.3	34.8
- Retract foreskin	3.2	7.7	6.0	8.0	3.6	7.7
- Others	3.0	1.4	5.7	0.4	3.4	1.2
(N)	(1824)	(1801)	(265)	(490)	(2089)	(2291)

Table 5.7.1: Perceived incidence of STIs.

	Total (weighted)					
	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>You had a thick yellowish/ greenish discharge</b>						
Marital status						
- Married	2.2	1.4	1.2	2.0	1.8	1.6
(N)	(725)	(931)	(422)	(508)	(1147)	(1439)
- Single	3.1	1.2	1.0	1.6	2.8	1.3
(N)	(1471)	(1376)	(302)	(185)	(1773)	(1561)
- Separated/Widowed/Divorced	1.8	0.7	0.0	0.0	1.6	0.5
(N)	(395)	(303)	(51)	(68)	(446)	(371)
Occupation						
- Seafarer	4.0	1.3	-	-	4.0	1.3
(N)	(1391)	(1360)	-	-	(1391)	(1360)
- Seafood labor	1.0	0.7	1.3	2.1	1.1	1.2
(N)	(406)	(451)	(233)	(234)	(639)	(685)
- Factory worker	0.0	3.2	0.4	1.1	0.2	2.1
(N)	(254)	(281)	(232)	(280)	(486)	(561)
- Agriculture labor	2.3	0.0	0.0	3.3	1.9	1.0
(N)	(129)	(72)	(29)	(30)	(158)	(102)
- Others	1.5	0.7	1.8	1.4	1.6	0.9
(N)	(410)	(440)	(280)	(215)	(690)	(655)
Sexual intercourse						
- Yes	3.3	1.5	1.2	1.7	2.9	1.5
(N)	(1789)	(1829)	(485)	(579)	(2274)	(2408)
- No	1.2	0.5	1.0	1.6	1.2	0.7
(N)	(801)	(778)	(292)	(182)	(1093)	(960)
Ever heard/seen a condom						
- Yes	3.1	1.2	1.4	1.7	2.8	1.3
(N)	(2199)	(2523)	(488)	(703)	(2687)	(3226)
- No	0.3	0.0	0.7	2.0	0.5	0.8
(N)	(376)	(81)	(284)	(49)	(660)	(130)

**Table 5.8:** Symptoms and treatments of perceived STIs infection

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>You had an ulcer or sore in your genital area</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	31.7	1.3	-	1.3	30.3	1.3
- No	68.3	98.5	(3)	98.7	69.7	98.5
- Can't remember	-	0.2	-	0.0	-	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(63)</b>	<b>(2044)</b>	<b>(3)</b>	<b>(391)</b>	<b>(66)</b>	<b>(2435)</b>
<b>Cambodia</b>						
- Yes	62.5	0.7	(1)	0.0	66.7	0.6
- No	37.5	99.1	-	100.0	33.3	99.1
- Can't remember	-	0.2	-	0.0	-	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(428)</b>	<b>(1)</b>	<b>(38)</b>	<b>(9)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Yes						
- No	0.0	1.2	(1)	4.5	14.3	2.7
- Can't remember	100.0	98.8	(2)	95.5	85.7	97.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(4)</b>	<b>(257)</b>	<b>(3)</b>	<b>(223)</b>	<b>(7)</b>	<b>(480)</b>
<b>Total (weighted)</b>						
- Yes	31.9	1.1	33.3	2.9	32.1	1.5
- No	68.1	98.7	66.7	97.1	67.9	98.3
- Can't remember	-	0.2	-	0.0	-	0.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(69)</b>	<b>(2611)</b>	<b>(9)</b>	<b>(765)</b>	<b>(78)</b>	<b>(3376)</b>
<b>What did you do the last time you had any of these problems</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Took home based preparation	5.0	35.5	-	20.0	5.0	33.3
- Traditional healer/quack	0.0	3.2	-	20.0	0.0	5.6
- Trained village health worker	0.0	83.9	-	100.0	0.0	86.1
- Private clinic / hospital	25.0	12.9	-	0.0	25.0	11.1
- Govt. clinic / hospital	15.0	16.1	-	40.0	15.0	19.4
- Took medicine I had at home	0.0	9.7	-	0.0	0.0	8.3
- Purchased medicine from a medical store	70.0	19.4	-	20.0	70.0	19.4
- No treatment	0.0	3.2	-	0.0	0.0	2.8
- Borrowed prescription from friend/relative	5.0	3.2	-	0.0	5.0	2.8
- Others	0.0	3.2	-	0.0	0.0	2.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(20)</b>	<b>(31)</b>	<b>(-)</b>	<b>(5)</b>	<b>(20)</b>	<b>(36)</b>

Table 5.8: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What did you do the last time you had any of these problems</b>						
<b>Cambodia</b>						
- Took home based preparation	20.0	0.0	-	-	16.7	0.0
- Traditional healer/quack	20.0	50.0	-	-	16.7	50.0
- Private clinic / hospital	0.0	0.0	(1)	-	16.7	0.0
- Purchased medicine from a medical store	60.0	50.0	-	-	50.0	50.0
<b>Total</b>	<b>100</b>	<b>100.0</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100.0</b>
<b>(N)</b>	<b>(5)</b>	<b>(4)</b>	<b>(1)</b>	<b>-</b>	<b>(6)</b>	<b>(4)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Took home based preparation	-	33.3	(1)	10.0	(1)	15.4
- Private clinic / hospital	-	33.3	-	20.0	-	23.1
- Govt. clinic / hospital	-	0.0	-	50.0	-	38.5
- Took medicine I had at home	-	33.3	-	0.0	-	7.7
- Borrowed prescription from friend/relative	-	0.0	-	10.0	-	7.7
<b>Total</b>	<b>-</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>-</b>	<b>100</b>
<b>(N)</b>	<b>(-)</b>	<b>(3)</b>	<b>(1)</b>	<b>(10)</b>	<b>(1)</b>	<b>(13)</b>
<b>Total (weighted)</b>						
- Took home based preparation	9.1	37.9	(2)	15.0	16.0	28.6
- Private clinic / hospital	4.5	10.0	-	5.0	4.0	8.0
- Govt. clinic / hospital	19.0	13.8	(1)	15.0	20.8	14.3
- Took medicine I had at home	13.6	10.3	-	50.0	12.0	26.5
- Took home based preparation	0.0	13.8	-	0.0	0.0	8.2
- Purchased medicine from a medical store	68.2	23.3	-	5.0	60.0	16.0
- No treatment	0.0	3.3	-	0.0	0.0	2.0
- Borrowed prescription from friend/relative	4.5	3.3	-	0.0	4.0	2.0
- Others	0.0	3.3	-	10.0	0.0	6.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(22)</b>	<b>(30)</b>	<b>(3)</b>	<b>(20)</b>	<b>(25)</b>	<b>(50)</b>

**Table 5.9:** Preference on places of treatment of STIs in case of having any symptom of STIs.

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>If you have any symptom of STIs, whom you prefer to approach</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Gov. hospital	54.9	55.4	69.3	71.4	57.2	58.0
- Private hospital	21.1	11.6	4.5	1.5	18.4	10.0
- Private clinic	2.4	7.2	6.0	1.3	3.0	6.2
- Health center	3.1	0.8	6.8	4.9	3.7	1.5
- Health volunteer worker	4.5	4.5	4.0	4.6	4.4	4.6
- Traditional doctor	0.4	0.5	1.8	0.5	0.6	0.5
- Family planning clinic	2.5	-	1.3	-	2.3	-
- Others	0.0	13.5	0.3	10.5	0.1	13.1
- Don't know	10.7	6.2	6.0	5.1	9.9	6.0
- No respond	0.5	0.1	0.0	0.3	0.4	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2026)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2423)</b>	<b>(2436)</b>
<b>If you have any symptom of STIs, whom you prefer to approach</b>						
<b>Cambodia</b>						
- Gov. hospital	72.4	79.9	71.1	94.7	72.3	81.1
- Private hospital	8.4	8.4	5.3	0.0	8.2	7.7
- Private clinic	3.0	2.3	15.8	2.6	4.1	2.4
- Health center	0.0	0.2	0.0	2.6	0.0	0.4
- Health volunteer worker	0.0	0.2	0.0	0.0	0.0	0.2
- Traditional doctor	9.6	5.4	0.0	0.0	8.8	4.9
- Family planning clinic	1.6	1.9	0.0	0.0	1.5	1.7
- Others	0.0	0.5	0.0	0.0	0.0	0.4
- Don't know	4.9	0.5	7.9	0.0	5.2	0.4
- No respond	0.0	0.7	0.0	0.0	0.0	0.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Gov. hospital	52.3	54.3	52.4	51.1	52.4	52.8
- Private hospital	8.9	3.1	18.5	1.8	13.4	2.5
- Private clinic	6.2	7.8	1.8	7.9	4.1	7.8
- Health center	11.6	0.4	6.6	0.0	9.3	0.2
- Health volunteer worker	12.8	3.5	12.8	4.0	12.8	3.7
- Traditional doctor	0.0	9.3	0.4	8.8	0.2	9.1
- Family planning clinic	1.9	16.7	1.3	18.5	1.6	17.5
- Others	0.0	3.1	0.4	4.4	0.2	3.7
- Don't know	5.8	1.6	5.3	2.6	5.6	2.1
- No respond	0.4	0.4	0.4	0.9	0.4	0.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>

Table 5.9: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>If you have any symptom of STIs, whom you prefer to approach</b>						
<b>Total (weighted)</b>						
- Gov. hospital	57.0	58.7	60.6	61.9	57.8	59.5
- Private hospital	17.2	9.7	11.7	1.6	15.9	7.9
- Private clinic	3.1	6.6	4.2	4.8	3.4	6.2
- Health center	4.1	1.1	6.4	2.3	4.7	1.4
- Health volunteer worker	5.3	10.0	8.3	13.0	6.0	10.7
- Traditional doctor	1.7	1.1	1.0	0.3	1.5	0.9
- Family planning clinic	2.3	1.2	1.3	4.3	2.0	1.9
- NGO clinic	-	4.7	-	6.6	-	5.2
- Never have any symptom of STIs	-	0.1	-	0.0	-	0.1
- Consult the relative before	-	0.1	-	0.1	-	0.1
- Go to Burma	-	0.3	-	0.8	-	0.4
- Counsel with a person who know	-	0.2	-	0.0	-	0.1
- Friend	-	0.4	-	0.1	-	0.3
- World vision	-	0.7	-	0.0	-	0.5
- Boat boss	-	0.0	-	0.0	-	0.0
- Parents	-	0.1	-	0.0	-	0.1
- Do not go to see	-	0.1	-	0.1	-	0.1
- Others	0.0	-	0.4	-	0.1	-
- Don't know	9.0	4.6	5.8	3.6	8.2	4.4
- No respond	0.4	0.2	0.3	0.5	0.4	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2596)</b>	<b>(2612)</b>	<b>(779)</b>	<b>(772)</b>	<b>(3375)</b>	<b>(3384)</b>

**Table 6.1:** Percentage distribution of experience of sexual intercourse and age at first sexual intercourse by location and nationality

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever had sexual intercourse</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	69.5	71.2	78.1	78.5	70.9	72.4
- No	30.5	28.8	21.9	21.5	29.1	27.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2026)</b>	<b>(2043)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2423)</b>	<b>(2434)</b>
<b>Cambodia</b>						
- Yes	68.0	70.3	68.4	52.6	68.0	68.9
- No	32.0	29.7	31.6	47.4	32.0	31.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	67.8	66.3	48.5	75.3	58.8	70.5
- No	32.2	33.7	51.5	24.7	41.2	29.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
<b>Total (weighted)</b>						
- Yes	69.0	70.2	62.5	75.8	67.5	71.5
- No	31.0	29.8	37.5	24.2	32.5	28.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2596)</b>	<b>(2611)</b>	<b>(777)</b>	<b>(772)</b>	<b>(3373)</b>	<b>(3383)</b>
<b>Age at first sexual intercourse (15-49)</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <15	2.5	0.9	1.3	0.0	2.3	0.8
- 15-19	40.2	33.7	44.5	42.8	41.0	35.3
- 20-24	43.5	45.2	40.3	40.5	42.9	44.3
- 25-29	11.6	16.8	11.3	14.0	11.5	16.3
- 30+	2.2	3.4	2.6	2.7	2.3	3.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1384)</b>	<b>(1406)</b>	<b>(310)</b>	<b>(299)</b>	<b>(1694)</b>	<b>(1705)</b>
mean	20.5	21.3	20.5	20.7	20.5	21.2
median	20.0	20.0	20.0	20.0	20.0	20.0
<b>Cambodia</b>						
- <15	1.0	0.0	0.0	0.0	0.9	0.0
- 15-19	42.8	46.6	53.8	76.5	43.7	48.2
- 20-24	44.5	47.0	30.8	11.8	43.4	45.0
- 25-29	11.0	5.7	15.4	11.8	11.4	6.1
- 30+	0.7	0.7	0.0	0.0	0.6	0.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(290)</b>	<b>(296)</b>	<b>(26)</b>	<b>(17)</b>	<b>(316)</b>	<b>(313)</b>
mean	20.2	20.0	20.0	19.2	20.0	20.0
median	20.0	20.0	19.0	19.0	20.0	20.0

Table 6.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Age at first sexual intercourse (15-49)</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- <15	1.2	0.7	0.0	0.7	0.7	0.7
- 15-19	40.7	44.7	30.3	58.6	36.7	51.5
- 20-24	36.6	38.7	49.5	27.6	41.6	33.2
- 25-29	18.0	12.7	17.4	11.7	17.8	12.2
- 30+	3.5	3.3	2.8	1.4	3.2	2.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(172)</b>	<b>(150)</b>	<b>(109)</b>	<b>(145)</b>	<b>(281)</b>	<b>(295)</b>
mean	21.0	20.5	20.0	19.7	21.2	20.1
median	20.0	20.0	21.0	19.0	20.0	19.0
<b>Total (weighted)</b>						
- <15	2.1	0.7	0.6	0.4	1.8	0.7
- 15-19	40.6	37.3	39.5	51.4	40.4	40.6
- 20-24	42.5	44.5	43.6	33.5	42.7	41.9
- 25-29	12.6	14.5	13.8	12.9	12.9	14.1
- 30+	2.2	3.0	2.5	1.9	2.3	2.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1746)</b>	<b>(1749)</b>	<b>(484)</b>	<b>(529)</b>	<b>(2248)</b>	<b>(2278)</b>
mean	20.6	21.0	21.0	20.2	20.6	20.8
median	20.0	20.0	20.0	19.0	20.0	20.0
<b>Age at first sexual intercourse (15-24)</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Sex before the age of 15	1.4	1.3	1.3	0.0	1.4	1.1
- Sex before the age of 18	9.8	20.4	11.5	21.5	10.1	20.6
- Young people having pre-marital sex in last year	59.4	58.1	-	0.0	59.4	57.4
- Young people having extra-marital sex in the last year	6.1	8.2	-	0.0	3.6	5.2
- Median age of first sex among young men and women	18.9	19.0	18.9	19.0	18.9	19.0
<b>(N)</b>	<b>(415)</b>	<b>(278)</b>	<b>(84)</b>	<b>(59)</b>	<b>(499)</b>	<b>(337)</b>
<b>Cambodia</b>						
- Sex before the age of 15	0.4	0.0	0.0	0.0	0.4	0.0
- Sex before the age of 18	11.2	17.4	16.7	16.7	11.5	17.3
- Young people having pre-marital sex in last year	71.6	88.3	100.0	-	72.0	88.3
- Young people having extra-marital sex in the last year	44.4	0.0	0.0	0.0	28.6	0.0
- Median age of first sex among young men and women	19.1	19.0	17.8	18.5	19.0	19.0
<b>(N)</b>	<b>(105)</b>	<b>(108)</b>	<b>(6)</b>	<b>(5)</b>	<b>(111)</b>	<b>(113)</b>



Table 6.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Age at first sexual intercourse (15-24)</b>						
<b>Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Sex before the age of 15	0.9	0.0	0.0	0.0	0.5	0.0
- Sex before the age of 18	14.0	22.2	4.1	36.8	9.8	30.8
- Young people having pre-marital sex in last year	26.3	27.3	0.0	100.0	26.3	33.3
- Young people having extra-marital sex in the last year	10.3	14.3	0.0	0.0	6.1	5.3
- Median age of first sex among young men and women	18.8	19.0	19.5	18.0	19.0	19.0
(N)	(52)	(56)	(20)	(73)	(72)	(129)
<b>Total (weighted)</b>						
- Sex before the age of 15	1.2	0.7	0.6	0.4	1.1	0.7
- Sex before the age of 18	10.8	12.8	8.2	23.8	10.3	15.4
- Young people having pre-marital sex in last year	58.14	67.8	50.0	66.7	58.1	67.8
- Young people having extra-marital sex in the last year	9.3	7.6	0.0	0.0	5.4	4.0
- Median age of first sex among young men and women	18.9	20.0	19.0	19.0	18.9	20.0
(N)	(554)	(442)	(119)	(137)	(673)	(579)

Table 6.2: Percentage distribution of the experience of sexual intercourse by marital status

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever had sexual intercourse</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Married	100.0	100.0	100.0	100.0	100.0	100.0
(N)	(594)	(649)	(277)	(244)	(871)	(893)
- Single	45.6	40.9	2.2	1.4	42.4	37.8
(N)	(1135)	(874)	(89)	(74)	(1224)	(948)
- Separated / divorced / widowed	100.0	100.0	100.0	100.0	100.0	100.0
(N)	(297)	(255)	(31)	(23)	(328)	(278)
<b>Cambodia</b>						
- Married	100.0	100.0	100.0	100.0	100.0	100.0
(N)	(40)	(69)	(18)	(17)	(58)	(86)
- Single	51.2	62.5	7.7	0.0	49.3	59.3
(N)	(281)	(296)	(13)	(16)	(294)	(312)
- Separated / divorced / widowed	100.0	100.0	100.0	-	100.0	100.0
(N)	(107)	(9)	(7)	-	(114)	(9)

Table 6.2: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever had sexual intercourse</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Married	100.0	100.0	100.0	100.0	100.0	100.0
(N)	(98)	(221)	(95)	(254)	(193)	(466)
- Single	38.5	28.0	4.1	2.0	22.2	19.6
(N)	(135)	(212)	(122)	(100)	(257)	(314)
- Separated / divorced / widowed	100.0	100.0	100.0	100.0	100.0	100.0
(N)	(25)	(28)	(10)	(43)	(35)	(71)
<b>Total (weighted)</b>						
- Married	100.0	100.0	100.0	100.0	100.0	100.0
(N)	(726)	(929)	(424)	(515)	(1150)	(1444)
- Single	45.4	43.6	3.6	1.6	38.3	38.5
(N)	(1474)	(602)	(302)	(3)	(1776)	(605)
- Separated / divorced / widowed	100.0	100.0	100.0	100.0	100.0	100.0
(N)	(397)	(303)	(51)	(67)	(448)	(370)

Table 6.3: Percentage distribution of the use of condoms with regular partner

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Have a regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	57.8	68.1	91.6	92.8	63.9	72.4
- No	42.2	31.9	8.4	7.2	36.1	27.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(1407)	(1454)	(310)	(307)	(1717)	(1761)
<b>Cambodia</b>						
- Yes	48.8	27.9	80.8	100.0	51.4	32.4
- No	51.2	72.1	19.2	0.0	48.6	67.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(291)	(301)	(26)	(20)	(317)	(321)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	69.7	79.4	90.0	87.1	77.5	83.3
- No	69.7	20.6	90.0	12.9	77.5	16.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(175)	(170)	(110)	(171)	(285)	(341)
<b>Total (weighted)</b>						
- Yes	58.5	64.1	90.5	90.1	65.4	70.4
- No	41.5	35.9	9.5	9.9	34.6	29.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(1790)	(1832)	(486)	(585)	(2276)	(2417)

Table 6.3: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>You/your regular partner ever use condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	3.5	19.7	3.5	19.6	3.5	19.7
- No	96.5	80.3	96.5	80.4	96.5	80.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(768)</b>	<b>(988)</b>	<b>(284)</b>	<b>(285)</b>	<b>(1052)</b>	<b>(1273)</b>
<b>Cambodia</b>						
- Yes	4.3	9.5	4.8	0.0	4.3	7.7
- No	95.7	90.5	95.2	100.0	95.7	92.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(141)</b>	<b>(84)</b>	<b>(21)</b>	<b>(20)</b>	<b>(162)</b>	<b>(104)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	8.2	44.0	9.2	35.1	8.6	39.4
- No	91.8	56.0	90.8	64.9	91.4	60.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(122)</b>	<b>(134)</b>	<b>(98)</b>	<b>(148)</b>	<b>(220)</b>	<b>(282)</b>
<b>Total (weighted)</b>						
- Yes	4.6	24.0	5.7	26.6	4.9	24.8
- No	95.4	76.0	94.3	73.4	95.1	75.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1008)</b>	<b>(1172)</b>	<b>(438)</b>	<b>(526)</b>	<b>(1446)</b>	<b>(1698)</b>
<b>Reasons used a condom with regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Use condom with regular partner to avoid pregnancy	77.8	80.4	30.0	83.9	64.9	81.2
- Use condom with regular partner to protect my self from STI/HIV/AIDS	22.2	10.6	10.0	4.1	18.9	9.1
- Use condom with regular partner to protect partner from STI/HIV/AIDS	7.4	7.6	0.0	12.2	5.4	8.6
- Use condom with regular partner to protect my unborn child from STI/HIV/AIDS	18.5	2.9	20.0	10.2	18.9	4.6
- Use condom with regular partner for pleasure	0.0	2.9	0.0	2.0	0.0	2.7
- Use condom with regular partner for Others purposes	0.0	8.8	30.0	8.2	8.1	8.6
<b>(N)</b>	<b>(27)</b>	<b>(194)</b>	<b>(10)</b>	<b>(56)</b>	<b>(37)</b>	<b>(250)</b>
<b>Cambodia</b>						
- Use condom with regular partner to avoid pregnancy	66.7	100.0	(1)	-	71.4	100.0
- Use condom with regular partner to protect my self from STI/HIV/AIDS	50.0	-	(1)	-	57.1	-
- Use condom with regular partner to protect partner from STI/HIV/AIDS	0.0	-	-	-	0.0	-
- Use condom with regular partner to protect my unborn child from STI/HIV/AIDS	0.0	-	-	-	0.0	-
- Use condom with regular partner for pleasure	0.0	-	-	-	0.0	-
- Use condom with regular partner for Others purposes	0.0	-	-	-	0.0	-
<b>(N)</b>	<b>(6)</b>	<b>(8)</b>	<b>(1)</b>	<b>-</b>	<b>(7)</b>	<b>(8)</b>

Table 6.3: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Reasons used a condom with regular partner</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Use condom with regular partner to avoid pregnancy	50.0	86.4	88.9	92.3	68.4	89.2
- Use condom with regular partner to protect my self from STI/HIV/AIDS	30.0	25.4	22.2	34.0	26.3	29.7
- Use condom with regular partner to protect partner from STI/HIV/AIDS	10.0	8.5	0.0	13.5	5.3	10.8
- Use condom with regular partner to protect my unborn child from STI/HIV/AIDS	10.0	3.4	0.0	7.7	5.3	5.4
- Use condom with regular partner for pleasure	10.0	5.1	0.0	9.9	5.3	7.2
- Use condom with regular partner for Others purposes	30.0	3.4	0.0	3.8	15.8	3.6
(N)	(10)	(59)	(9)	(52)	(19)	(111)
<b>Total (weighted)</b>						
- Use condom with regular partner to avoid pregnancy	66.0	82.9	68.0	89.3	66.7	85.0
- Use condom with regular partner to protect my self from STI/HIV/AIDS	28.3	16.0	20.0	23.6	25.4	18.5
- Use condom with regular partner to protect partner from STI/HIV/AIDS	6.5	7.8	0.0	12.9	4.2	9.5
- Use condom with regular partner to protect my unborn child from STI/HIV/AIDS	13.0	3.2	7.7	8.6	11.1	5.0
- Use condom with regular partner for pleasure	4.3	3.6	0.0	7.1	2.8	4.8
- Use condom with regular partner for Others purposes	10.9	6.4	11.5	5.7	11.1	6.2
(N)	(47)	(279)	(25)	(140)	(72)	(419)
<b>Reasons not used a condom with regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Not use condom with regular partner because not available	0.7	3.4	0.7	0.9	0.7	2.8
- Not use condom with regular partner because too expensive	0.4	0.1	0.0	0.0	0.3	0.1
- Not use condom with regular partner because partner object	1.1	0.8	0.0	4.1	0.8	1.5
- Not use condom with regular partner because don't like	10.9	12.5	5.5	32.0	9.5	16.8
- Not use condom with regular partner because use Others contraceptive method	12.6	14.5	8.4	21.9	11.4	16.2
- Not use condom with regular partner because it not necessary	45.2	68.7	24.1	49.3	39.5	64.4
- Not use condom with regular partner because didn't think of it	5.5	8.8	2.2	8.2	4.6	8.7
- Not use condom with regular partner because Others	26.9	3.6	49.3	3.7	32.9	3.6
(N)	(741)	(770)	(274)	(219)	(1015)	(989)

Table 6.3: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Reasons not used a condom with regular partner</b>						
<b>Cambodia</b>						
- Not use condom with regular partner because not available	0.0	-	0.0	-	0.0	-
- Not use condom with regular partner because too expensive	0.0	-	0.0	-	0.0	-
- Not use condom with regular partner because partner object	0.7	-	0.0	-	0.6	-
- Not use condom with regular partner because don't like	8.1	5.3	0.0	20.0	7.1	8.3
- Not use condom with regular partner because use Others contraceptive method	0.7	10.5	0.0	0.0	0.6	8.3
- Not use condom with regular partner because it not necessary	81.5	78.9	85.0	80.0	81.9	79.2
- Not use condom with regular partner because didn't think of it	0.7	3.9	45.0	0.0	6.5	3.1
- Not use condom with regular partner because Others	12.6	1.3	0.0	0.0	11.0	1.0
(N)	(135)	(76)	(20)	(20)	(155)	(96)
<b>Reasons not used a condom with regular partner</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Not use condom with regular partner because not available	5.4	1.4	0.0	0.0	3.0	0.6
- Not use condom with regular partner because too expensive	0.9	-	3.4	-	2.0	-
- Not use condom with regular partner because partner object	0.0	0.0	0.0	2.2	0.0	1.3
- Not use condom with regular partner because don't like	4.5	7.2	3.4	27.0	4.0	18.4
- Not use condom with regular partner because use Others contraceptive method	4.5	29.0	10.1	47.2	7.0	39.2
- Not use condom with regular partner because it not necessary	58.9	52.2	59.6	28.1	59.2	38.6
- Not use condom with regular partner because didn't think of it	0.9	4.3	0.0	10.1	0.5	7.6
- Not use condom with regular partner because Others	29.5	13.0	28.1	3.4	28.9	7.6
(N)	(112)	(69)	(89)	(89)	(201)	(158)
<b>Total (weighted)</b>						
- Not use condom with regular partner because not available	1.6	2.8	0.5	0.5	1.2	2.1
- Not use condom with regular partner because too expensive	0.4	0.1	1.2	0.0	0.7	0.1
- Not use condom with regular partner because partner object	0.8	0.6	0.0	3.0	0.6	1.3
- Not use condom with regular partner because don't like	9.3	11.2	4.4	29.3	7.8	16.6
- Not use condom with regular partner because use Others contraceptive method	9.5	16.3	8.7	31.6	9.2	20.8
- Not use condom with regular partner because it not necessary	52.4	67.2	40.0	41.8	48.7	59.6
- Not use condom with regular partner because didn't think of it	4.0	7.8	3.2	8.5	3.7	8.0
- Not use condom with regular partner because Others	25.7	4.8	39.3	3.3	29.8	4.3
(N)	(962)	(860)	(412)	(364)	(1374)	(1224)

**Table 6.4:** Percent experiencing sexual intercourse with non-regular partners by marital status

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Have sexual intercourse with non-regular partner in last 12 months</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	26.7	26.8	0.3	0.0	21.9	22.1
(N)	(1406)	(1454)	(310)	(307)	(1716)	(1761)
- Married	6.6	9.2	0.4	0.0	4.6	6.7
(N)	(594)	(742)	(277)	(279)	(871)	(1021)
- Single	52.4	59.3	0.0	0.0	52.2	59.2
(N)	(517)	(408)	(2)	(1)	(519)	(409)
- Separated/divorced/widowed	22.0	26.0	0.0	0.0	19.9	23.9
(N)	(295)	(304)	(31)	(27)	(326)	(331)
<b>Cambodia</b>						
- Yes	51.9	71.1	3.8	0.0	47.9	66.7
(N)	(291)	(301)	(26)	(20)	(317)	(321)
- Married	20.0	25.3	0.0	0.0	13.8	20.2
(N)	(40)	(79)	(18)	(20)	(58)	(99)
- Single	75.0	89.6	100.0	-	75.2	89.6
(N)	(144)	(212)	(1)	-	(145)	(212)
- Separated/divorced/widowed	32.7	40.0	0.0	-	30.7	40.0
(N)	(107)	(10)	(7)	-	(114)	(10)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	11.4	10.7	0.9	1.2	7.4	5.9
(N)	(175)	(168)	(11)	(171)	(285)	(339)
- Married	8.2	5.8	1.1	0.0	4.7	2.6
(N)	(98)	(120)	(95)	(145)	(193)	(265)
- Single	21.2	24.2	0.0	100.0	19.3	26.5
(N)	(52)	(33)	(5)	(1)	(57)	(34)
- Separated/divorced/widowed	4.0	20.0	0.0	4.0	2.9	10.0
(N)	(25)	(15)	(10)	(25)	(35)	(40)
<b>Total (weighted)</b>						
- Yes	27.7	30.6	0.6	0.5	21.9	23.3
(N)	(1790)	(1829)	(486)	(584)	(2276)	(2413)
- Married	7.6	9.6	0.7	0.0	5.0	6.2
(N)	(726)	(927)	(424)	(515)	(1150)	(1442)
- Single	52.5	65.3	9.1	66.7	51.8	65.3
(N)	(669)	(600)	(11)	(3)	(680)	(603)
- Separated/divorced/widowed	22.5	25.9	0.0	2.9	20.0	21.7
(N)	(395)	(301)	(51)	(68)	(446)	(369)

**Table 6.5:** Percent distribution of characteristics of non – regular partners

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Number of non-regular partners in the last 12 month</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Mean	4.1	3.2	1.0	-	4.1	3.2
(N)	(359)	(355)	(1)	-	(360)	(355)
<b>Cambodia</b>						
- Mean	5.4	5.0	2.0	-	5.3	5.0
(N)	(146)	(190)	(1)	-	(147)	(190)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Mean	3.6	2.3	1.0	1.0	3.5	2.2
(N)	(19)	(17)	(1)	(2)	(20)	(19)
<b>Total (weighted)</b>						
- Mean	4.4	3.7	1.3	1.0	4.4	3.7
(N)	(475)	(506)	(3)	(3)	(478)	(510)
<b>Who were your non-regular partners in last 12 months</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Boy friend	0.3	0.5	-	-	0.3	0.5
- Girl friend	19.7	18.1	-	-	19.7	18.1
- Friend	1.1	2.3	(1)	-	1.3	2.3
- Fiance	1.3	0.3	-	-	1.3	0.3
- Male sex worker	0.3	1.3	-	-	0.3	1.3
- Female sex worker	83.2	82.4	-	-	83.0	82.4
- Client	-	1.6	-	-	-	1.6
- Seafood procession worker	0.3	-	-	-	0.3	-
(N)	(375)	(387)	(1)	-	(376)	(387)
<b>Cambodia</b>						
- Boy friend	0.0	-	-	-	0.0	-
- Girl friend	3.3	6.1	-	-	3.3	6.1
- Friend	0.0	-	(1)	-	.7	-
- Fiance	7.9	-	(1)	-	8.6	-
- Male sex worker	0.0	0.5	-	-	0.0	0.5
- Female sex worker	97.4	94.4	-	-	96.7	94.4
- Client	0.0	-	-	-	0.0	-
(N)	(151)	(214)	(1)	-	(152)	(214)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Boy friend	0.0	0.0	(1)	(2)	4.8	10.5
- Girl friend	55.0	82.4	-	-	52.4	73.7
- Friend	0.0	-	-	-	0.0	-
- Fiance	0.0	-	-	-	0.0	-
- Male sex worker	0.0	-	-	-	0.0	-
- Female sex worker	45.0	29.4	-	-	42.9	26.3
- Client	0.0	-	-	-	0.0	-
(N)	(20)	(17)	(1)	(2)	(21)	(19)
<b>Total (weighted)</b>						
- Boy friend	0.2	0.4	(1)	(3)	0.4	0.9
- Girl friend	16.5	17.5	-	-	16.4	17.4
- Friend	0.7	1.4	(2)	-	1.1	1.4
- Fiance	3.1	0.2	(1)	-	3.3	0.2
- Male sex worker	0.2	0.9	-	-	0.2	0.9
- Female sex worker	85.7	83.6	-	-	85.2	83.2
- Client	-	0.9	-	-	-	0.9
- Seafood procession worker	0.2	-	-	-	0.2	-
(N)	(546)	(555)	(3)	(3)	(549)	(558)

**Table 6.6:** Consistency of condom use and use at last sexual intercourse among male migrants with regular partners, non-regular partners and sex workers

	Myanmar		Cambodia	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Consistency of condom use</b>				
<b>Regular partners</b>				
- Always	2.4	16.7	-	37.5
- Most of the times	14.3	11.7	-	37.5
- Sometimes	73.8	50.7	-	0.0
- Never in the last 12 months	7.1	18.1	-	25.0
- No response	2.4	2.9	-	0.0
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>-</b>	<b>100</b>
<b>(Weighted N)</b>	<b>(42)</b>	<b>(420)</b>	<b>-</b>	<b>(8)</b>
<b>(Unweighted N)</b>	<b>(37)</b>	<b>(420)</b>	<b>-</b>	<b>(8)</b>
<b>Non-regular partners</b>				
- Always	20.9	44.4	60.0	58.3
- Most of the times	7.7	9.3	0.0	8.3
- Sometimes	17.6	14.8	20.0	16.7
- Never in the last 12 months	52.7	22.2	20.0	16.7
- No response	1.1	9.3	0.0	0.0
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>
<b>(Weighted N)</b>	<b>(91)</b>	<b>(108)</b>	<b>(15)</b>	<b>(12)</b>
<b>(Unweighted N)</b>	<b>(93)</b>	<b>(108)</b>	<b>(17)</b>	<b>(12)</b>
<b>Sex workers</b>				
- Always	73.4	87.0	87.5	92.2
- Most of the times	10.0	6.7	4.7	3.4
- Sometimes	9.7	2.3	7.8	4.5
- Never in the last 12 months	5.9	1.7	0.0	0.0
- No response	1.0	2.3	0.0	0.0
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>
<b>(Weighted N)</b>	<b>(289)</b>	<b>(299)</b>	<b>(128)</b>	<b>(179)</b>
<b>(Unweighted N)</b>	<b>(322)</b>	<b>(299)</b>	<b>(147)</b>	<b>(179)</b>
<b>Condom use the last time</b>				
<b>Regular partners</b>				
- Yes	45.9	49.7	-	80.0
- No	48.6	37.5	-	0.0
- Don't remember	0.0	7.0	-	20.0
- No response	5.4	5.8	-	0.0
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>-</b>	<b>100</b>
<b>(Weighted N)</b>	<b>(37)</b>	<b>(344)</b>	<b>-</b>	<b>(5)</b>
<b>(Unweighted N)</b>	<b>(33)</b>	<b>(291)</b>	<b>-</b>	<b>(6)</b>
<b>Non-regular partners</b>				
- Yes	36.7	78.6	66.7	100.0
- No	57.8	9.5	33.3	0.0
- Don't remember	2.2	-	0.0	-
- No response	3.3	11.9	0.0	0.0
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>
<b>(Weighted N)</b>	<b>(90)</b>	<b>(84)</b>	<b>(15)</b>	<b>(10)</b>
<b>(Unweighted N)</b>	<b>(92)</b>	<b>(79)</b>	<b>(17)</b>	<b>(11)</b>
<b>Sex workers</b>				
- Yes	88.1	94.6	96.1	97.2
- No	10.9	3.1	3.1	2.8
- Don't remember	0.7	-	0.8	-
- No response	0.4	2.4	0.0	0.0
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>
<b>(Weighted N)</b>	<b>(285)</b>	<b>(294)</b>	<b>(128)</b>	<b>(179)</b>
<b>(Unweighted N)</b>	<b>(316)</b>	<b>(328)</b>	<b>(147)</b>	<b>(205)</b>



**Table 6.6a:** Condom use at last sex with regular partners, and higher risk sex with, non-regular partners and sex workers (15-49)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Condom use at last higher risk sex</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Use a condom at last sex with a spouse or cohabiting partner (N)	57.1 (21)	48.4 (128)	66.7 (6)	50.0 (42)	59.3 (27)	48.8 (170)
- Use a condom at last sex with non-regular partner (N)	28.9 (76)	91.5 (59)	- (1)	-	28.6 (77)	91.5 (59)
- Use a condom at last sex with sex worker (N)	89.9 (304)	97.5 (318)	-	-	89.9 (304)	97.5 (318)
<b>Cambodia</b>						
- Use a condom at last sex with a spouse or cohabiting partner (N)	(3)	83.3 (6)	-	-	33.3 (3)	83.3 (6)
- Use a condom at last sex with non-regular partner (N)	64.7 (17)	100.0 (11)	- (1)	-	61.1 (18)	100.0 (11)
- Use a condom at last sex with sex worker (N)	96.6 (146)	97.1 (205)	-	-	96.6 (146)	97.1 (205)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Use a condom at last sex with a spouse or cohabiting partner (N)	40.0 (10)	64.4 (45)	60.0 (5)	42.5 (40)	46.8 (15)	54.1 (85)
- Use a condom at last sex with non-regular partner (N)	72.7 (11)	81.8 (11)	- (1)	(2)	66.7 (12)	84.6 (13)
- Use a condom at last sex with sex worker (N)	77.8 (9)	80.0 (5)	-	-	77.8 (9)	80.0 (5)
<b>Total (weighted)</b>						
- Use a condom at last sex with a spouse or cohabiting partner (N)	48.7 (39)	55.9 (195)	66.7 (15)	45.3 (106)	53.7 (54)	52.2 (301)
- Use a condom at last sex with non-regular partner (N)	42.6 (101)	90.1 (81)	- (3)	(3)	41.0 (104)	90.5 (84)
- Use a condom at last sex with sex worker (N)	91.4 (409)	97.0 (466)	-	-	91.4 (409)	97.0 (466)

**Table 6.6b:** Mean number of multiple partners and condom use in last year among young people age 15-24

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Young people having multiple partners (non-regular partner) in last year</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Young people using a condom during pre-marital sex	10.0	88.9	-	-	10.0	88.9
(N)	(168)	(104)	(1)	-	(169)	(104)
- Young people having multiple partners (non-regular partner) in the last year	3.8	65.4	2.0	-	3.8	65.4
(N)	(168)	(104)	(1)	-	(169)	(104)
- Young people using a condom at last higher risk sex						
- With non-regular partner	13.2	85.7	-	-	13.2	85.7
(N)	(38)	(21)	-	-	(38)	(21)
- with sex worker	88.8	95.8	-	-	88.8	95.8
(N)	(143)	(95)	-	-	(143)	(95)
- Young people using a condom at last higher risk sex of all young people surveyed (percent)						
- with non-regular partner	0.54	2.8	-	-	0.54	2.8
(N)	(920)	(752)	-	-	(920)	(752)
- with sex worker	13.80	12.6	-	-	13.80	12.6
(N)	(920)	(752)	-	-	(920)	(752)
<b>Young people having multiple partners (non-regular partner) in last year</b>						
<b>Coastal Provinces</b>						
<b>Cambodia</b>						
- Young people using a condom during pre-marital sex	75.0	100.0	-	-	66.7	100.0
(N)	(66)	(93)	(1)	-	(67)	(93)
- Young people having multiple partners (non-regular partner) in the last year	5.1	89.2	2.0	-	5.1	89.2
(N)	(66)	(93)	(1)	-	(67)	(93)
- Young people using a condom at last higher risk sex						
With non-regular partner	75.0	100.0	0.0	-	66.7	100.0
(N)	(8)	(3)	(1)	-	(9)	(3)
- with sex worker	97.0	98.0	-	-	97.0	98.0
(N)	(66)	(102)	-	-	(66)	(102)
- Young people using a condom at last higher risk sex of all young people surveyed (percent)						
- with non-regular partner	2.63	0.4	-	-	2.63	0.4
(N)	(228)	(241)	-	-	(228)	(241)
- with sex worker	28.07	42.3	-	-	28.07	42.3
(N)	(228)	(241)	-	-	(228)	(241)

Table 6.6 b: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Young people having multiple partners (non-regular partner) in last year</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Young people using a condom during pre-marital sex	-	100.0	-	(1)	-	100.0
(N)	(8)	(6)	-	(1)	(8)	(7)
- Young people having multiple partners (non-regular partner) in the last year	5.5	33.3	-	-	5.5	28.6
(N)	(8)	(6)	-	(1)	(8)	(7)
- Young people using a condom at last higher risk sex						
- With non-regular partner	66.7	100.0	-	100.0	66.7	100.0
(N)	(3)	(3)	-	(1)	(3)	(4)
- with sex worker	80.0	100.0	-	-	80.0	100.0
(N)	(5)	(1)	-	-	(5)	(1)
- Young people using a condom at last higher risk sex of all young people surveyed (percent)						
- with non-regular partner	1.87	3.3	-	-	1.87	3.3
(N)	(107)	(91)	-	-	(107)	(91)
- with sex worker	3.74	1.1	-	-	3.74	1.1
(N)	(107)	(91)	-	-	(107)	(91)
<b>Total (weighted)</b>						
- Young people using a condom during pre-marital sex	22.2	91.3	-	100.0	21.6	91.7
(N)	(219)	(203)	(1)	(1)	(220)	(204)
- Young people having multiple partners (non-regular partner) in the last year	4.2	75.4	2.0	0.0	4.2	75.0
(N)	(219)	(203)	(1)	(1)	(220)	(204)
- Young people using a condom at last higher risk sex						
- With non-regular partner	26.5	88.9	-	100.0	26.5	89.3
(N)	(49)	(27)	(1)	(1)	(50)	(28)
- with sex worker	91.1	97.0	-	-	91.1	97.0
(N)	(214)	(189)	-	-	(214)	(189)
- Young people using a condom at last higher risk sex of all young people surveyed (percent)						
- with non-regular partner	1.09	3.2	-	0.7	1.09	2.8
(N)	(1190)	(856)	-	(135)	(1190)	(991)
- with sex worker	16.39	22.1	-	-	16.39	22.1
(N)	(1190)	(856)	-	-	(1190)	(856)

**Table 6.7:** Percentage distribution of reasons for not using a condom with non-regular partners and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not use a condom with Non-regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Not available	9.3	20.0	-	-	9.1	20.0
- Partner objected	1.9	20.0	-	-	1.8	20.0
- Don't like	18.5	20.0	-	-	18.2	20.0
- Used Others contraceptive method	1.9	0.0	-	-	1.8	0.0
- Didn't think it was necessary	53.7	40.0	-	-	52.7	40.0
- Didn't think of it	13.0	20.0	(1)	-	14.5	20.0
- Others	5.6	-	-	-	5.5	-
(N)	(54)	(5)	(1)	-	(55)	(5)
<b>Cambodia</b>						
- Partner objected	16.7	-	(1)	-	28.6	-
- Don't like	16.7	-	-	-	14.3	-
- Didn't think it was necessary	66.7	-	-	-	57.1	-
(N)	(6)	-	(1)	-	(7)	-
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Not available	(1)	-	-	-	(1)	-
- Don't like	-	(1)	-	-	-	(1)
- Used Others contraceptive method	-	-	(1)	-	(1)	-
- Didn't think it was necessary	(2)	-	(1)	-	(3)	-
- Others	-	(1)	-	-	-	(1)
(N)	(3)	(2)	(2)	-	(4)	(2)
<b>Total (weighted)</b>						
- Not available	10.3	12.5	-	-	9.8	12.5
- Partner objected	3.4	12.5	(1)	-	4.8	12.5
- Don't like	17.2	37.5	-	-	16.4	37.5
- Used Others contraceptive method	1.7	-	(2)	-	4.8	-
- Didn't think it was necessary	55.2	25.0	(2)	-	54.8	25.0
- Didn't think of it	10.3	12.5	(1)	-	11.3	12.5
- Others	5.2	25.0	-	-	4.9	25.0
(N)	(58)	(8)	(4)	-	62	(8)
<b>Why not use a condom with Sex worker</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Not available	9.7	-	-	-	9.7	-
- Too expensive	6.5	-	-	-	6.5	-
- Partner objected	12.9	12.5	-	-	12.9	12.5
- Don't like	48.4	62.5	-	-	48.4	62.5
- Didn't think it was necessary	22.6	25.0	-	-	22.6	25.0

**Table 6.7:** (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not use a condom with Sex worker</b>						
- Didn't think of it	6.5	37.5	-	-	6.5	37.5
- Others	12.9	-	-	-	12.9	-
(N)	(31)	(8)	-	-	(31)	(8)
<b>Cambodia</b>						
- Not available	-	16.7	-	-	-	16.7
- Don't like	-	16.7	-	-	-	16.7
- Didn't think it was necessary	20.0	16.7	-	-	20.0	16.7
- Others	80.0	50.0	-	-	80.0	50.0
(N)	(5)	(6)	-	-	(5)	(6)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Not available	(2)	-	-	-	(2)	-
- Too expensive	(2)	-	-	-	(2)	-
- Don't like	(2)	(1)	-	-	(2)	(1)
(N)	(4)	(1)	-	-	(4)	(1)
<b>Total (weighted)</b>						
- Not available	11.4	7.1	-	-	11.4	7.1
- Too expensive	8.8	-	-	-	8.8	-
- Partner objected	8.8	7.1	-	-	8.8	7.1
- Don't like	4.2	50.0	-	-	4.9	50.0
- Didn't think it was necessary	20.0	21.4	-	-	20.0	21.4
- Didn't think of it	5.7	21.4	-	-	5.7	21.4
- Others	20.0	21.4	-	-	20.0	21.4
(N)	(35)	(14)	-	-	(35)	(14)

**Table 6.8:** Percentage distribution of sources of condoms reported by users with regular partners, non-regular partners, and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Where can obtain a condom for use with regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Grocery / Shop	10.7	19.9	(1)	4.4	12.5	16.0
- Drug store	50.0	4.4	(1)	0.0	46.9	3.3
- Health Center	10.7	3.7	-	4.4	9.4	3.9
- Family planning clinic	-	1.5	-	0.0	-	1.1
- Government hospital	-	0.7	-	4.4	-	1.7
- Private clinic	-	0.7	-	-	-	-
- Volunteer health worker	14.3	0.7	-	0.0	12.5	-
- Peer educator / NGO	10.7	-	(1)	-	12.5	12.7
- Peer educator	-	2.2	-	8.9	-	3.9
- NGO	-	14.1	-	6.7	-	0.6
- Partner	-	0.7	-	0.0	-	0.6

Table 6.8: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Where can obtain a condom for use with regular partner</b>						
- Sex worker	-	0.7	-	0.0	-	0.6
- Health care provider for foreigners	-	22.1	-	11.1	-	19.3
- Health volunteer for foreigners	-	14.0	-	31.1	-	18.2
- Condom Boxes	-	13.2	-	26.7	-	16.6
- Friend	3.6	0.7	-	0.0	3.1	0.6
- Others	0.0	-	(1)	-	3.1	-
- <b>Don't know</b>	-	<b>0.0</b>	-	<b>2.2</b>	-	<b>0.6</b>
(N)	<b>100</b>	<b>100</b>	-	<b>100</b>	<b>100</b>	<b>100</b>
<b>Total</b>	<b>(28)</b>	<b>(136)</b>	<b>(4)</b>	<b>(45)</b>	<b>(32)</b>	<b>(181)</b>
<b>Cambodia</b>						
- Grocery / Shop	12.5	16.7	-	-	12.5	16.7
- Drug store	37.5	-	-	-	37.5	-
- Health Center	-	16.7	-	-	-	16.7
- Government hospital	-	16.7	-	-	-	16.7
- Health volunteer for foreigners	-	50.0	-	-	-	50.0
- Entertainment work place/ brothel / bar	12.5	-	-	-	12.5	-
- Friend	12.5	-	-	-	12.5	-
- Others	25.0	-	-	-	25.0	-
(N)	<b>100</b>	<b>100</b>	-	-	<b>100</b>	<b>100</b>
<b>Total</b>	<b>(8)</b>	<b>(6)</b>	-	-	<b>(8)</b>	<b>(6)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Grocery / Shop	10.0	9.8	12.5	2.3	11.1	6.3
- Drug store	40.0	3.9	37.5	0.0	38.9	2.1
- Health Center	0.0	7.8	25.0	13.6	11.1	10.5
- Family planning clinic	-	0.0	-	2.3	-	1.1
- Government hospital	-	5.9	-	2.3	-	4.2
- Private clinic	-	0.0	-	2.3	-	1.1
- Guesthouse	-	2.0	-	0.0	-	1.1
- Volunteer health worker	-	2.0	-	-	-	-
- Peer educator / NGO	40.0	-	25.0	-	33.3	-
- Peer educator	-	7.8	-	22.7	-	14.7
- NGO	-	13.7	-	9.1	-	11.6
- Health volunteer for foreigners	-	39.2	-	25.0	-	32.6
- Condom Boxes	-	0.0	-	13.6	-	10.5
- Drop in	-	0.0	-	2.3	-	1.1
- Others	10.0	-	0.0	-	5.6	-
- Never buy condom	27.3	-	0.0	-	25.0	-
- Don't know	0.0	0.0	-	2.3	-	1.1
(N)	<b>100</b>	-	<b>100</b>	-	<b>100</b>	-
<b>Total</b>	<b>(10)</b>	<b>(51)</b>	<b>(8)</b>	<b>(44)</b>	<b>(18)</b>	<b>(95)</b>
<b>Total (weighted)</b>						
- Grocery / Shop	10.2	15.3	17.6	2.6	12.1	10.9
- Drug store	44.9	4.2	35.3	0.0	42.4	2.7
- Health Center	6.1	5.6	17.6	10.3	9.1	7.3
- Family planning clinic	-	0.9	-	1.7	-	1.2
- Government hospital	-	3.3	-	2.6	-	3.0
- Private clinic	-	0.5	-	1.7	-	0.9
- Volunteer health worker	6.1	1.4	0.0	1.7	4.5	1.5

Table 6.8: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Where can obtain a condom for use with regular partner</b>						
- Peer educator / NGO	20.4	-	23.5	-	21.2	-
- Peer educator	-	4.7	-	18.1	-	9.4
- NGO	-	14.0	-	8.6	-	12.1
- Entertainment work place/ brothel / bar	2.0		0.0		1.5	
- Guesthouse	-	0.9	-	0.0	-	0.6
- Partner	-	0.5	-	0.0	-	0.3
- Sex worker	-	0.5	-	0.0	-	0.3
- Health care provider for foreigners	-	12.1	-	3.4	-	9.1
- Health volunteer for foreigners	-	25.1	-	26.7	-	25.7
- Condom Boxes	-	10.7	-	18.1	-	13.3
- Drop in	-	0.0	-	1.7	-	0.6
- Friend	4.1	0.5	0.0	0.0	3.0	0.3
- Others	6.1	-	5.9	-	6.1	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(49)</b>	<b>(215)</b>	<b>(17)</b>	<b>(116)</b>	<b>(66)</b>	<b>(331)</b>
<b>Where can obtain a condom for use with non-regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Grocery / Shop	6.3	45.8	-	-	6.3	45.8
- Drug store	13.9	10.2	(1)	-	15.0	10.2
- Health Center	1.3	1.7	-	-	1.3	1.7
- Family planning clinic	-	1.7	-	-	-	1.7
- Volunteer health worker	1.3	-	-	-	1.3	-
- Guesthouse	-	1.7	-	-	-	1.7
- Partner	-	3.4	-	-	-	3.4
- Health care provider for foreigners	-	6.8	-	-	-	6.8
- Health volunteer for foreigners	-	6.8	-	-	-	6.8
- Vending machine	-	1.7	-	-	-	1.7
- Condom Boxes	-	6.8	-	-	-	6.8
- Convenient store	-	1.7	-	-	-	1.7
- Peer educator / NGO	5.1	3.4	-	-	5.0	3.4
- Friend	7.6	8.5	-	-	7.5	8.5
- Others	2.5	-	-	-	2.5	-
- Never buy condom	62.0	-	-	-	-	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(79)</b>	<b>(59)</b>	<b>(1)</b>	<b>-</b>	<b>(80)</b>	<b>(59)</b>
<b>Coastal Provinces</b>						
<b>Cambodia</b>						
- Grocery / Shop	5.9	36.4	-	-	5.6	36.4
- Drug store	47.1	-	-	-	44.4	-
- Entertainment work place/ brothel / bar	5.9	-	-	-	5.6	-
- Peer educator / NGO	11.8	-	-	-	11.1	-
- Health volunteer for foreigners	-	54.5	-	-	-	54.5
- Snooker club	-	9.1	-	-	-	9.1
- Others	5.9	-	-	-	5.6	-
- Never buy condom	23.5	-	(1)	-	27.8	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(17)</b>	<b>(11)</b>	<b>(1)</b>	<b>-</b>	<b>(18)</b>	<b>(11)</b>

Table 6.8: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Where can obtain a condom for use with non-regular partner</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Grocery / Shop	9.1	10.0	-	-	8.3	8.3
- Drug store	45.5	10.0	-	-	41.7	8.3
- Volunteer health worker	-	10.0	-	-	-	8.3
- Peer educator / NGO	0.0	-	(1)	-	8.3	-
- Peer educator	-	0.0	-	(1)	-	8.3
- NGO	-	10.0	-	-	-	8.3
- Partner	-	0.0	-	(1)	-	8.3
- Sex worker	-	10.0	-	-	-	8.3
- Health volunteer for foreigners	-	20.0	-	-	-	16.7
- Gas station	-	10.0	-	-	-	-
- Condom boxes	-	20.0	-	-	-	16.7
- Friend	18.2	-	-	-	16.7	-
- Never buy condom	27.3	-	-	-	25.0	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>
<b>(N)</b>	<b>(11)</b>	<b>(10)</b>	<b>(1)</b>	<b>(2)</b>	<b>(12)</b>	<b>(12)</b>
<b>Total (weighted)</b>						
- Grocery / Shop	6.7	36.7	-	-	6.5	34.9
- Drug store	24.0	8.9	(1)	-	24.1	8.4
- Health Center	1.0	1.3	-	-	0.9	1.2
- Family planning clinic	-	1.3	-	-	-	1.2
- Volunteer health worker	1.0	2.5	-	-	0.9	2.4
- Entertainment work place/ brothel / bar	1.0	-	-	-	0.9	-
- Peer educator / NGO	4.8	-	(2)	-	6.5	-
- Peer educator	-	0.0	-	(2)	-	2.4
- NGO	-	3.8	-	-	-	3.6
- Guesthouse	-	1.3	-	-	-	1.2
- Partner	-	2.5	-	(2)	-	4.8
- Sex worker	-	2.5	-	-	-	2.4
- Health care provider for foreigners	-	3.8	-	-	-	3.6
- Health volunteer for foreigners	-	15.2	-	-	-	14.5
- Gas station	-	2.5	-	-	-	2.4
- Vending machine	-	1.3	-	-	-	1.2
- Condom boxes	-	8.9	-	-	-	8.4
- Snooker club	-	1.3	-	-	-	1.2
- Convenient store	-	1.3	-	-	-	1.2
- Friend	8.7	5.1	-	-	8.3	4.8
- Others	2.9	-	-	-	2.8	-
- Never buy condom	50.0	-	(1)	-	49.1	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(104)</b>	<b>(79)</b>	<b>(4)</b>	<b>(4)</b>	<b>(108)</b>	<b>(83)</b>



Table 6.8: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Where can obtain a condom for use with sex worker</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Grocery / Shop	3.9	2.8	-	-	3.9	2.8
- Drug store	14.7	-	-	-	14.7	-
- Health Center	2.0	-	-	-	2.0	-
- Family planning clinic	0.3	-	-	-	0.3	-
- Government hospital	0.3	-	-	-	0.3	-
- FB clinic	0.3	-	-	-	0.3	-
- Entertainment work place/ brothel / bar	50.0	40.8	-	-	50.0	40.8
- Guesthouse	-	0.6	-	-	-	0.6
- Partner	-	0.9	-	-	-	0.9
- Sex worker	-	46.2	-	-	-	46.2
- Peer educator / NGO	2.3	-	-	-	2.3	-
- Peer educator	-	0.3	-	-	-	0.3
- NGO	-	0.6	-	-	-	0.6
- Health care provider for foreigners	-	2.2	-	-	-	2.2
- Health volunteer for foreigners	-	0.3	-	-	-	0.3
- Condom boxes	-	3.8	-	-	-	3.8
- Friend	3.6	0.3	-	-	3.6	0.3
- Others	15.7	0.3	-	-	15.7	0.3
- Never buy condom	5.2	-	-	-	5.2	-
- Don't know	-	0.6	-	-	-	0.6
<b>Total (N)</b>	<b>100 (306)</b>	<b>100 (316)</b>	<b>-</b>	<b>-</b>	<b>100 (306)</b>	<b>100 (316)</b>
<b>Coastal Provinces</b>						
<b>Cambodia</b>						
- Grocery / Shop	5.4	0.5	-	-	5.4	0.5
- Drug store	8.2	0.5	-	-	8.2	0.5
- Family planning clinic	1.4	-	-	-	1.4	-
- Government hospital	6.8	-	-	-	6.8	-
- Health Center	1.4	-	-	-	1.4	-
- FB clinic	0.7	-	-	-	0.7	-
- Volunteer health worker	2.7	-	-	-	2.7	-
- Entertainment work place/ brothel / bar	72.1	38.5	-	-	72.1	38.5
- Partner	-	0.5	-	-	-	0.5
- Sex worker	-	52.2	-	-	-	52.2
- Peer educator / NGO	0.7	-	-	-	0.7	-
- Health volunteer for foreigners	-	3.4	-	-	-	3.4
- Condom boxes	-	3.4	-	-	-	3.4
- Friend	0.7	1.0	-	-	0.7	1.0
<b>Total (N)</b>	<b>100 (147)</b>	<b>100 (205)</b>	<b>-</b>	<b>-</b>	<b>100 (147)</b>	<b>100 (205)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Grocery / Shop	11.1	-	-	-	11.1	-
- Drug store	55.6	-	-	-	55.6	-
- Entertainment work place/ brothel / bar	22.2	-	-	-	22.2	-
- Sex worker	-	50.0	-	-	-	50.0
- Health volunteer for foreigners	-	25.0	-	-	-	25.0
- Friend	-	25.0	-	-	-	25.0
- Never buy condom	11.1	-	-	-	11.1	-
<b>Total (N)</b>	<b>100 (9)</b>	<b>100 (4)</b>	<b>-</b>	<b>-</b>	<b>100 (9)</b>	<b>100 (4)</b>

Table 6.8: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Where can obtain a condom for use with sex worker</b>						
<b>Total (weighted)</b>						
- Grocery / Shop	4.6	1.9	-	-	4.6	1.9
- Drug store	14.3	0.2	-	-	14.3	0.2
- Family planning clinic	0.7	-	-	-	0.7	-
- Government hospital	2.4	-	-	-	2.4	-
- Health Center	1.7	-	-	-	1.7	-
- FB clinic	0.5	-	-	-	0.5	-
- Volunteer health worker	1.9	-	-	-	1.9	-
- Entertainment work place/ brothel / bar	55.7	39.2	-	-	55.7	39.2
- Guesthouse	-	0.4	-	-	-	0.4
- Partner	-	0.6	-	-	-	0.6
- Sex worker	-	48.5	-	-	-	48.5
- Health care provider for foreigners	-	1.3	-	-	-	1.3
- Health volunteer for foreigners	-	1.9	-	-	-	1.9
- Peer educator / NGO	1.7	-	-	-	1.7	-
- Peer educator	-	0.2	-	-	-	0.2
- NGO	-	0.4	-	-	-	0.4
- Condom boxes	-	3.7	-	-	-	3.7
- Friend	2.4	-	-	-	2.4	-
- Others	10.2	0.2	-	-	10.2	0.2
- Don't know	-	0.4	-	-	-	0.4
- Never buy condom	3.9	-	-	-	3.9	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(413)</b>	<b>(464)</b>	<b>-</b>	<b>-</b>	<b>(413)</b>	<b>(464)</b>

Table 6.9: Percentage distribution and mean of time used to obtain condom as reported by users of condoms with regular partners, non-regular partners and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Approximate time to obtain a condom when you need with Regular-partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <10 minutes	29.6	57.5	28.6	42.2	29.4	53.6
- 10 minutes	33.3	14.9	0.0	31.1	26.5	19.0
- 15-30 minutes	22.2	24.6	14.3	15.6	20.6	22.3
- >30 minutes	14.8	3.0	57.1	11.1	23.5	5.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(27)</b>	<b>(134)</b>	<b>(7)</b>	<b>(45)</b>	<b>(34)</b>	<b>(179)</b>
<b>Mean</b>	<b>24.1</b>	<b>9.35</b>	<b>61.5</b>	<b>10.18</b>	<b>31.8</b>	<b>9.55</b>

Table 6.9: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Approximate time to obtain a condom when you need with Regular-partner</b>						
<b>Cambodia</b>						
- <10 minutes	16.7	83.3	-	-	-	83.3
- 10 minutes	33.3	16.7	-	-	33.3	16.7
- 15-30 minutes	33.3	-	-	-	33.3	-
- >30 minutes	16.7	-	-	-	16.7	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(6)</b>	<b>(6)</b>	<b>-</b>	<b>-</b>	<b>(6)</b>	<b>(6)</b>
<b>Mean</b>	<b>30.3</b>	<b>4.83</b>	<b>-</b>	<b>-</b>	<b>30.3</b>	<b>4.83</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- <10 minutes	25.0	67.3	12.5	63.4	18.8	65.6
- 10 minutes	12.5	12.2	37.5	12.2	25.0	12.2
- 15-30 minutes	37.5	12.2	25.0	12.2	31.3	12.2
- >30 minutes	25.0	8.2	25.0	12.2	25.0	10.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(49)</b>	<b>(8)</b>	<b>(41)</b>	<b>(16)</b>	<b>(90)</b>
<b>Mean</b>	<b>26.8</b>	<b>6.20</b>	<b>44.3</b>	<b>6.08</b>	<b>35.6</b>	<b>6.15</b>
<b>Total (weighted)</b>						
- <10 minutes	26.2	62.3	15.8	63.3	23.0	64.7
- 10 minutes	26.2	14.0	26.3	21.4	26.2	16.9
- 15-30 minutes	28.6	18.8	21.1	15.3	26.2	18.3
- >30 minutes	19.0	4.8	36.8	-	24.6	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(42)</b>	<b>(207)</b>	<b>(19)</b>	<b>(111)</b>	<b>(61)</b>	<b>(318)</b>
<b>Mean</b>	<b>25.7</b>	<b>7.98</b>	<b>49.6</b>	<b>7.54</b>	<b>33.4</b>	<b>7.83</b>
<b>Approximate time to obtain a condom with you need with non-regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <10 minutes	43.8	37.9	-	-	43.8	37.9
- 10 minutes	21.9	32.8	-	-	21.9	32.8
- 15-30 minutes	21.9	29.3	-	-	21.9	29.3
- >30 minutes	12.5	-	-	-	12.5	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(32)</b>	<b>(58)</b>	<b>-</b>	<b>-</b>	<b>(32)</b>	<b>(58)</b>
<b>Mean</b>	<b>19.3</b>	<b>10.57</b>	<b>-</b>	<b>-</b>	<b>19.3</b>	<b>10.57</b>
<b>Approximate time to obtain a condom with you need with non-regular partner</b>						
<b>Coastal Provinces</b>						
<b>Cambodia</b>						
- <10 minutes	53.8	27.3	-	-	53.8	27.3
- 10 minutes	15.4	63.6	-	-	15.4	63.6
- 15-30 minutes	30.8	-	-	-	30.8	-
- >30 minutes	-	9.1	-	-	-	9.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(13)</b>	<b>(13)</b>	<b>-</b>	<b>-</b>	<b>(13)</b>	<b>(13)</b>
<b>Mean</b>	<b>12.6</b>	<b>35.00</b>	<b>-</b>	<b>-</b>	<b>12.6</b>	<b>35.00</b>

Table 6.9: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Approximate time to obtain a condom with you need with non-regular partner</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- <10 minutes	25.0	66.7	-	(1)	22.2	63.6
- 10 minutes	25.0	22.2	-	(1)	22.2	27.3
- 15-30 minutes	37.5	11.1	(1)	-	44.4	9.1
- >30 minutes	12.5	-	-	-	11.1	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(7)</b>	<b>(1)</b>	<b>(2)</b>	<b>(9)</b>	<b>(9)</b>
<b>Mean</b>	<b>27.2</b>	<b>6.22</b>	<b>15.0</b>	<b>7.50</b>	<b>25.8</b>	<b>6.45</b>
<b>Total (weighted)</b>						
- <10 minutes	41.5	42.1	-	(2)	40.0	42.5
- 10 minutes	20.8	34.2	-	(2)	20.0	35.0
- 15-30 minutes	28.3	22.4	(2)	-	30.9	21.3
- >30 minutes	9.4	1.3	-	-	9.1	1.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(53)</b>	<b>(76)</b>	<b>(2)</b>	<b>(4)</b>	<b>(55)</b>	<b>(80)</b>
<b>Mean</b>	<b>20.0</b>	<b>12.76</b>	<b>15.0</b>	<b>7.50</b>	<b>19.8</b>	<b>12.53</b>
<b>Approximate time to obtain a condom with you need with Sex worker</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- <10 minutes	80.9	85.6	-	-	80.9	85.6
- 10 minutes	10.2	6.4	-	-	10.2	6.4
- 15-30 minutes	7.8	7.3	-	-	7.8	7.3
- >30 minutes	1.0	0.6	-	-	1.0	0.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(293)</b>	<b>(313)</b>	<b>-</b>	<b>-</b>	<b>(293)</b>	<b>(313)</b>
<b>Mean</b>	<b>5.2</b>	<b>4.66</b>	<b>-</b>	<b>-</b>	<b>5.2</b>	<b>4.66</b>
<b>Cambodia</b>						
- <10 minutes	90.5	99.0	-	-	90.5	99.0
- 10 minutes	5.4	0.5	-	-	5.4	0.5
- 15-30 minutes	4.1	-	-	-	4.1	-
- >30 minutes	-	0.5	-	-	-	0.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(147)</b>	<b>(203)</b>	<b>-</b>	<b>-</b>	<b>(147)</b>	<b>(203)</b>
<b>Mean</b>	<b>4.7</b>	<b>3.40</b>	<b>-</b>	<b>-</b>	<b>4.7</b>	<b>3.40</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- <10 minutes	37.5	50.0	-	-	37.5	50.0
- 10 minutes	25.0	-	-	-	25.0	-
- 15-30 minutes	25.0	50.0	-	-	25.0	50.0
- >30 minutes	12.5	-	-	-	12.5	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(11)</b>	<b>-</b>	<b>-</b>	<b>(8)</b>	<b>(11)</b>
<b>Mean</b>	<b>18.8</b>	<b>10.50</b>	<b>-</b>	<b>-</b>	<b>18.8</b>	<b>10.50</b>
<b>Total (weighted)</b>						
- <10 minutes	82.9	90.2	-	-	82.9	90.2
- 10 minutes	9.3	3.9	-	-	9.3	3.9
- 15-30 minutes	7.3	5.2	-	-	7.3	5.2
- >30 minutes	1.0	0.7	-	-	1.0	0.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(399)</b>	<b>(459)</b>	<b>-</b>	<b>-</b>	<b>(399)</b>	<b>(459)</b>
<b>Mean</b>	<b>5.6</b>	<b>4.26</b>	<b>-</b>	<b>-</b>	<b>5.6</b>	<b>4.26</b>

**Table 6.10:** Percentage distribution of consistency of access to condoms among users of condoms with regular partners, non-regular partners, and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Can obtain a condom every time with <u>regular partner</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	92.6	92.4	66.7	95.6	87.9	93.2
- No	7.4	7.6	33.3	4.4	12.1	6.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(27)</b>	<b>(132)</b>	<b>(6)</b>	<b>(45)</b>	<b>(33)</b>	<b>(177)</b>
<b>Cambodia</b>						
- Yes	80.0	100.0	-	-	80.0	100.0
- No	20.0	-	-	-	20.0	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(5)</b>	<b>(6)</b>	<b>-</b>	<b>-</b>	<b>(5)</b>	<b>(6)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	77.8	90.0	100.0	90.7	87.5	90.3
- No	22.2	10.0	0.0	9.3	12.5	9.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(9)</b>	<b>(50)</b>	<b>(7)</b>	<b>(43)</b>	<b>(16)</b>	<b>(93)</b>
<b>Total (weighted)</b>						
- Yes	86.4	91.8	88.9	92.2	87.1	92.0
- No	13.6	8.2	11.1	7.8	12.9	8.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(44)</b>	<b>(208)</b>	<b>(18)</b>	<b>(115)</b>	<b>(62)</b>	<b>(323)</b>
<b>Can obtain a condom every time with <u>non-regular partner</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	80.6	93.1	(1)	-	81.3	93.1
- No	19.4	6.9	-	-	18.8	6.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(31)</b>	<b>(58)</b>	<b>(1)</b>	<b>-</b>	<b>(32)</b>	<b>(58)</b>
<b>Can obtain a condom every time with <u>non-regular partner</u></b>						
<b>Cambodia</b>						
- Yes	92.3	100.0	-	-	92.3	100.0
- No	7.7	-	-	-	7.7	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(13)</b>	<b>(11)</b>	<b>-</b>	<b>-</b>	<b>(13)</b>	<b>(11)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	75.0	70.0	(1)	(2)	77.8	69.2
- No	25.0	30.0	-	(1)	22.2	30.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(10)</b>	<b>(1)</b>	<b>(3)</b>	<b>(9)</b>	<b>(13)</b>
<b>Total (weighted)</b>						
- Yes	81.1	88.5	(3)	60.0	82.1	86.7
- No	18.9	11.5	-	40.0	17.9	13.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(53)</b>	<b>(78)</b>	<b>(3)</b>	<b>(5)</b>	<b>(56)</b>	<b>(83)</b>

Table 6.10: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Can obtain a condom every time with <u>sex worker</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	96.6	98.7	-	-	96.6	98.7
- No	3.4	1.3	-	-	3.4	1.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(293)</b>	<b>(318)</b>	<b>-</b>	<b>-</b>	<b>(293)</b>	<b>(318)</b>
<b>Cambodia</b>						
- Yes	99.3	99.0	-	-	99.3	99.0
- No	0.7	1.0	-	-	0.7	1.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(147)</b>	<b>(205)</b>	<b>-</b>	<b>-</b>	<b>(147)</b>	<b>(205)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	87.5	75.0	-	-	87.5	60.0
- No	12.5	25.0	-	-	12.5	40.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(4)</b>	<b>-</b>	<b>-</b>	<b>(8)</b>	<b>(5)</b>
<b>Total (weighted)</b>						
- Yes	97.2	98.5	-	-	97.2	98.1
- No	2.8	1.5	-	-	2.8	1.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(398)</b>	<b>(464)</b>	<b>-</b>	<b>-</b>	<b>(398)</b>	<b>(466)</b>

Table 6.11: Percentage distribution of ever use of drugs before sexual intercourse with regular partners, non-regular partners and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever used drug <u>regular partner</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	4.7	3.5	0.0	1.4	3.5	3.0
- No	95.3	96.5	100.0	98.6	96.5	97.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(780)</b>	<b>(978)</b>	<b>(281)</b>	<b>(283)</b>	<b>(1061)</b>	<b>(1261)</b>
<b>Cambodia</b>						
- Yes	1.4	-	0.0	-	1.2	-
- No	98.6	100.0	100	100.0	98.8	100.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(143)</b>	<b>(84)</b>	<b>(21)</b>	<b>(20)</b>	<b>(164)</b>	<b>(104)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	2.5	8.3	1.0	1.4	1.8	4.7
- No	97.5	91.7	99.0	98.6	98.2	95.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(122)</b>	<b>(132)</b>	<b>(100)</b>	<b>(146)</b>	<b>(222)</b>	<b>(278)</b>

Table 6.11: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever used drug regular partner</b>						
<b>Total (weighted)</b>						
- Yes	3.8	4.2	0.5	1.3	2.8	3.3
- No	96.2	95.8	99.5	98.7	97.2	96.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1020)</b>	<b>(1159)</b>	<b>(439)</b>	<b>(520)</b>	<b>(1459)</b>	<b>(1679)</b>
<b>If yes, have frequently used</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Always	-	6.3	-	(1)	-	8.8
- Most of the time	15.8	9.4	-	-	15.8	8.8
- Sometimes	84.2	84.4	-	(1)	84.2	82.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(38)</b>	<b>(32)</b>	<b>-</b>	<b>(2)</b>	<b>(38)</b>	<b>(34)</b>
<b>Cambodia</b>						
- Always	-	-	-	-	-	-
- Most of the time	-	-	-	-	-	-
- Sometimes	(2)	-	-	-	(2)	-
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>(N)</b>	<b>(2)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(2)</b>	<b>-</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Always	-	0.0	-	(1)	-	8.3
- Most of the time	(1)	10.0	-	-	(1)	8.3
- Sometimes	(2)	90.0	(1)	(1)	(3)	83.3
<b>Total</b>	<b>-</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>
<b>(N)</b>	<b>(3)</b>	<b>(10)</b>	<b>(1)</b>	<b>(2)</b>	<b>(4)</b>	<b>(12)</b>
<b>Total (weighted)</b>						
- Always	-	4.4	-	50.0	-	9.8
- Most of the time	17.5	8.9	-	0.0	16.7	7.8
- Sometimes	82.5	86.7	(2)	50.0	83.3	82.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(40)</b>	<b>(45)</b>	<b>(2)</b>	<b>(6)</b>	<b>(42)</b>	<b>(51)</b>
<b>Ever used drug non-regular partner</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	9.8	18.3	-	-	9.6	18.3
- No	90.2	81.7	(1)	-	90.4	81.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(82)</b>	<b>(82)</b>	<b>(1)</b>	<b>-</b>	<b>(83)</b>	<b>(82)</b>
<b>Cambodia</b>						
- Yes	-	-	-	-	-	-
- No	100.0	100.0	(1)	-	100.0	100.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(17)</b>	<b>(13)</b>	<b>(1)</b>	<b>-</b>	<b>(18)</b>	<b>(13)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	-	15.4	-	-	-	14.3
- No	100.0	84.6	(1)	(1)	100.0	85.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(11)</b>	<b>(13)</b>	<b>(1)</b>	<b>(1)</b>	<b>(12)</b>	<b>(14)</b>
<b>Total (weighted)</b>						
- Yes	6.6	16.0	-	-	6.4	15.7
- No	93.4	84.0	(3)	(2)	93.6	84.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(106)</b>	<b>(106)</b>	<b>(3)</b>	<b>(2)</b>	<b>(109)</b>	<b>(108)</b>

Table 6.11: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>If yes, have frequently used</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Always	-	-	-	-	-	-
- Most of the time	12.5	13.3	-	-	12.5	13.3
- Sometimes	87.5	86.7	-	-	87.5	86.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(15)</b>	<b>-</b>	<b>-</b>	<b>(8)</b>	<b>(15)</b>
<b>Cambodia</b>						
- Always	-	-	-	-	-	-
- Most of the time	-	-	-	-	-	-
- Sometimes	-	-	-	-	-	-
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>(N)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Always	-	-	-	-	-	-
- Most of the time	-	(2)	-	-	-	(2)
- Sometimes	-	(2)	-	-	-	(2)
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>(N)</b>	<b>-</b>	<b>(2)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(2)</b>
<b>Total (weighted)</b>						
- Always	-	-	-	-	-	-
- Most of the time	14.3	18.8	-	-	14.3	18.8
- Sometimes	85.7	81.3	-	-	85.7	81.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(7)</b>	<b>(16)</b>	<b>-</b>	<b>-</b>	<b>(7)</b>	<b>(16)</b>
<b>Ever used drug with sex workers</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	24.1	16.6	-	-	24.1	16.6
- No	75.9	83.4	-	-	75.9	83.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(307)</b>	<b>(325)</b>	<b>-</b>	<b>-</b>	<b>(307)</b>	<b>(325)</b>
<b>Cambodia</b>						
- Yes	1.4	1.0	-	-	1.4	1.0
- No	98.6	99.0	-	-	98.6	99.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(148)</b>	<b>(204)</b>	<b>-</b>	<b>-</b>	<b>(148)</b>	<b>(204)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Yes	-	(1)	-	-	-	(1)
- No	100.0	(3)	-	-	100.0	(3)
<b>Total</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>-</b>
<b>(N)</b>	<b>(9)</b>	<b>(4)</b>	<b>-</b>	<b>-</b>	<b>(9)</b>	<b>(4)</b>
<b>Total (weighted)</b>						
- Yes	16.0	10.9	-	-	16.0	10.9
- No	84.0	89.1	-	-	84.0	89.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(413)</b>	<b>(470)</b>	<b>-</b>	<b>-</b>	<b>(413)</b>	<b>(470)</b>



Table 6.11: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>If yes, have frequently used</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Always	11.4	4.0	-	-	11.4	4.0
- Most of the time	10.0	18.0	-	-	10.0	18.0
- Sometimes	78.6	78.0	-	-	78.6	78.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(70)</b>	<b>(50)</b>	<b>-</b>	<b>-</b>	<b>(70)</b>	<b>(50)</b>
<b>Cambodia</b>						
- Always	(1)	-	-	-	(1)	-
- Most of the time	(1)	-	-	-	(1)	-
- Sometimes	-	(1)	-	-	-	(1)
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>(N)</b>	<b>(2)</b>	<b>(1)</b>	<b>-</b>	<b>-</b>	<b>(2)</b>	<b>(1)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Always	-	-	-	-	-	-
- Most of the time	-	-	-	-	-	-
- Sometimes	-	(1)	-	-	-	(1)
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>(N)</b>	<b>-</b>	<b>(1)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(1)</b>
<b>Total (weighted)</b>						
- Always	12.7	4.3	-	-	12.7	4.3
- Most of the time	11.1	17.0	-	-	11.1	17.0
- Sometimes	76.2	78.7	-	-	76.2	78.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(63)</b>	<b>(47)</b>	<b>-</b>	<b>-</b>	<b>(63)</b>	<b>(47)</b>

Table 6.12: Percentage distribution of consumption of alcohol before sexual intercourse with regular partners, non-regular partners and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever use of alcohol with <u>Regular partner</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	53.2	56.1	5.0	22.3	40.5	48.5
- No	46.8	43.9	95.0	77.7	59.5	51.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(780)</b>	<b>(978)</b>	<b>(280)</b>	<b>(283)</b>	<b>(1060)</b>	<b>(1261)</b>
<b>Cambodia</b>						
- Yes	56.7	47.6	42.9	5.0	54.9	39.4
- No	43.3	52.4	57.1	95.0	45.1	60.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(141)</b>	<b>(84)</b>	<b>(21)</b>	<b>(20)</b>	<b>(162)</b>	<b>(104)</b>

Table 6.12: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever use of alcohol with <u>Regular partner</u></b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Yes	53.5	27.3	8.0	8.9	32.9	17.6
- No	46.7	72.7	92.0	91.1	67.1	82.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(122)</b>	<b>(1320)</b>	<b>(100)</b>	<b>(146)</b>	<b>(222)</b>	<b>(278)</b>
<b>Total (weighted)</b>						
- Yes	53.6	49.9	7.8	15.2	39.8	39.1
- No	46.4	50.1	92.2	84.8	60.2	60.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1018)</b>	<b>(1159)</b>	<b>(438)</b>	<b>(521)</b>	<b>(1456)</b>	<b>(1680)</b>
<b>If yes, have frequently used</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Always	6.8	2.6	0.0	3.2	6.6	2.6
- Most of the time	8.3	7.5	14.3	1.6	8.5	6.9
- Sometimes	85.0	90.0	85.7	95.2	85.0	90.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(412)</b>	<b>(549)</b>	<b>(14)</b>	<b>(62)</b>	<b>(426)</b>	<b>(611)</b>
<b>Cambodia</b>						
- Always	3.8	-	0.0	-	3.4	-
- Most of the time	20.3	-	0.0	-	18.2	-
- Sometimes	75.9	100.0	100.0	(1)	78.4	100.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(79)</b>	<b>(40)</b>	<b>(9)</b>	<b>(1)</b>	<b>(88)</b>	<b>(41)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Always	4.6	2.8	0.0	8.3	4.1	4.2
- Most of the time	12.3	13.9	0.0	16.7	11.0	14.6
- Sometimes	83.1	83.3	100.0	75.0	84.9	81.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(65)</b>	<b>(36)</b>	<b>(8)</b>	<b>(12)</b>	<b>(73)</b>	<b>(48)</b>
<b>Total (weighted)</b>						
- Always	5.9	2.4	0.0	4.0	5.5	2.6
- Most of the time	10.7	7.8	5.9	5.3	10.4	7.5
- Sometimes	83.4	89.8	94.1	90.7	84.1	89.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(543)</b>	<b>(578)</b>	<b>(34)</b>	<b>(75)</b>	<b>(577)</b>	<b>(653)</b>
<b>Ever use of alcohol with <u>Non - regular partner</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	68.3	54.2	-	-	67.5	54.2
- No	31.7	45.8	(1)	-	32.5	45.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(82)</b>	<b>(83)</b>	<b>(1)</b>	<b>-</b>	<b>(83)</b>	<b>(83)</b>
<b>Cambodia</b>						
- Yes	82.4	53.8	(1)	-	83.3	53.8
- No	17.6	46.2	-	-	16.7	46.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(17)</b>	<b>(13)</b>	<b>(1)</b>	<b>-</b>	<b>(8)</b>	<b>(13)</b>

Table 6.12: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever use of alcohol with <u>Non - regular partner</u></b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Yes	50.0	38.5	(1)	-	54.5	33.3
- No	50.0	61.5	-	(2)	45.5	66.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(10)</b>	<b>(13)</b>	<b>(1)</b>	<b>(2)</b>	<b>(11)</b>	<b>(15)</b>
<b>Total (weighted)</b>						
- Yes	67.3	50.9	(2)	-	67.6	49.5
- No	32.7	49.1	(2)	(3)	32.4	50.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(104)</b>	<b>(106)</b>	<b>(4)</b>	<b>(3)</b>	<b>(108)</b>	<b>(109)</b>
<b>If yes, have frequently used</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Always	8.9	8.9	-	-	8.9	8.9
- Most of the time	10.7	22.2	-	-	10.7	22.2
- Sometimes	80.4	68.9	-	-	80.4	68.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(56)</b>	<b>(45)</b>	<b>-</b>	<b>-</b>	<b>(56)</b>	<b>(45)</b>
<b>Cambodia</b>						
- Always	21.4	-	-	-	20.0	-
- Most of the time	21.4	14.3	-	-	20.0	14.3
- Sometimes	57.1	85.7	(1)	-	60.0	85.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(14)</b>	<b>(7)</b>	<b>(1)</b>	<b>-</b>	<b>(15)</b>	<b>(7)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Always	0.0	-	-	-	0.0	-
- Most of the time	0.0	40.0	-	-	0.0	40.0
- Sometimes	100	60.0	(1)	-	100	60.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(5)</b>	<b>(5)</b>	<b>(1)</b>	<b>-</b>	<b>(6)</b>	<b>(5)</b>
<b>Total (weighted)</b>						
- Always	10.0	5.6	-	-	9.6	5.6
- Most of the time	11.4	24.1	-	-	11.0	24.1
- Sometimes	78.6	70.4	(3)	-	79.5	70.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(70)</b>	<b>(54)</b>	<b>(3)</b>	<b>-</b>	<b>(73)</b>	<b>(54)</b>
<b>Ever use of alcohol with <u>sex Worker</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	92.6	89.5	-	-	92.6	89.5
- No	7.4	10.5	-	-	7.4	10.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(309)</b>	<b>(325)</b>	<b>-</b>	<b>-</b>	<b>(309)</b>	<b>(325)</b>
<b>Cambodia</b>						
- Yes	85.2	83.9	-	-	85.2	83.9
- No	14.1	16.1	-	-	14.1	16.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(149)</b>	<b>(205)</b>	<b>-</b>	<b>-</b>	<b>(149)</b>	<b>(205)</b>

Table 6.12: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever use of alcohol with sex Worker</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	66.7	(1)	-	-	66.7	(1)
- No	33.3	(3)	-	-	33.3	(3)
<b>Total</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>-</b>
<b>(N)</b>	<b>(9)</b>	<b>(4)</b>	<b>-</b>	<b>-</b>	<b>(9)</b>	<b>(4)</b>
<b>Total (weighted)</b>						
- Yes	89.2	86.4	-	-	89.2	86.4
- No	10.6	13.6	-	-	10.6	13.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(417)</b>	<b>(471)</b>	<b>-</b>	<b>-</b>	<b>(417)</b>	<b>(471)</b>
<b>If yes, have frequently used</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Always	19.9	17.7	-	-	19.9	17.7
- Most of the time	24.6	32.3	-	-	24.6	32.3
- Sometimes	55.5	50.0	-	-	55.5	50.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(281)</b>	<b>(288)</b>	<b>-</b>	<b>-</b>	<b>(281)</b>	<b>(288)</b>
<b>Cambodia</b>						
- Always	22.4	15.1	-	-	22.4	15.1
- Most of the time	40.0	21.1	-	-	40.0	21.1
- Sometimes	37.6	63.9	-	-	37.6	63.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(125)</b>	<b>(166)</b>	<b>-</b>	<b>-</b>	<b>(125)</b>	<b>(166)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Always	33.3	-	-	-	33.3	-
- Most of the time	50.0	-	-	-	50.0	-
- Sometimes	16.7	(1)	-	-	16.7	(1)
<b>Total</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>-</b>
<b>(N)</b>	<b>(6)</b>	<b>(1)</b>	<b>-</b>	<b>-</b>	<b>(6)</b>	<b>(1)</b>
<b>Total (weighted)</b>						
- Always	21.1	16.6	-	-	21.1	16.6
- Most of the time	29.9	28.1	-	-	29.9	28.1
- Sometimes	49.0	55.3	-	-	49.0	55.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(365)</b>	<b>(398)</b>	<b>-</b>	<b>-</b>	<b>(365)</b>	<b>(398)</b>

**Table 6.13:** Percentage distribution of personal preference or distastes for using condom with regular partners, non-regular partners and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Condom will reduce pleasure with <u>regular partner</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	67.9	46.8	100.0	25.0	74.3	42.0
- No	32.1	53.2	0.0	75.0	25.7	58.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(28)</b>	<b>(111)</b>	<b>(7)</b>	<b>(32)</b>	<b>(35)</b>	<b>(143)</b>
<b>Cambodia</b>						
- Yes	(3)	(1)	-	-	(3)	(1)
- No	(1)	(3)	-	-	(1)	(3)
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>(N)</b>	<b>(4)</b>	<b>(4)</b>	<b>-</b>	<b>-</b>	<b>(4)</b>	<b>(4)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	80.0	53.7	40.0	17.0	66.7	39.3
- No	20.0	46.3	60.0	83.0	33.3	60.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(10)</b>	<b>(82)</b>	<b>(5)</b>	<b>(53)</b>	<b>(15)</b>	<b>(153)</b>
<b>Total (weighted)</b>						
- Yes	73.3	49.0	66.7	20.2	71.7	40.4
- No	26.7	51.0	33.3	79.8	28.3	59.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(45)</b>	<b>(158)</b>	<b>(15)</b>	<b>(84)</b>	<b>(60)</b>	<b>(282)</b>
<b>Condom will reduce pleasure with <u>non-regular partner</u></b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	72.4	60.4	(1)	-	73.3	60.4
- No	27.6	39.6	-	-	26.7	39.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(29)</b>	<b>(53)</b>	<b>(1)</b>	<b>-</b>	<b>(30)</b>	<b>(53)</b>
<b>Cambodia</b>						
- Yes	42.9	22.2	-	-	42.9	22.2
- No	57.1	77.8	-	-	57.1	77.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(14)</b>	<b>(9)</b>	<b>-</b>	<b>-</b>	<b>(14)</b>	<b>(9)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	100.0	41.2	(1)	(2)	100.0	42.9
- No	0.0	58.8	-	(2)	0.0	57.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(17)</b>	<b>(1)</b>	<b>(4)</b>	<b>(9)</b>	<b>(21)</b>
<b>Total (weighted)</b>						
- Yes	73.1	51.9	(3)	(2)	74.5	51.8
- No	26.9	48.1	-	(2)	25.5	48.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(52)</b>	<b>(79)</b>	<b>(3)</b>	<b>(4)</b>	<b>(55)</b>	<b>(83)</b>

Table 6.13: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Condom will reduce pleasure with sex worker</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	72.3	60.9	-	-	72.3	60.9
- No	27.7	39.9	-	-	27.7	39.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(274)</b>	<b>(258)</b>	<b>-</b>	<b>-</b>	<b>(274)</b>	<b>(258)</b>
<b>Cambodia</b>						
- Yes	61.8	61.2	-	-	61.8	61.2
- No	38.2	38.8	-	-	38.2	38.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(123)</b>	<b>(147)</b>	<b>-</b>	<b>-</b>	<b>(123)</b>	<b>(147)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	87.5	71.4	-	-	87.5	71.4
- No	12.5	28.6	-	-	12.5	28.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(7)</b>	<b>-</b>	<b>-</b>	<b>(8)</b>	<b>(7)</b>
<b>Total (weighted)</b>						
- Yes	69.8	61.3	-	-	69.8	61.3
- No	30.2	38.7	-	-	30.2	38.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(361)</b>	<b>(411)</b>	<b>-</b>	<b>-</b>	<b>(361)</b>	<b>(411)</b>

Table 6.14: Percentage distribution of negotiation skills to convince a partner to use condoms among migrants who are used of condom with regular partners, non-regular partner and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Can convince regular partner to use condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	89.7	88.8	83.3	78.0	88.6	86.3
- No	10.3	11.2	16.7	22.0	11.4	13.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(29)</b>	<b>(134)</b>	<b>(6)</b>	<b>(41)</b>	<b>(35)</b>	<b>(175)</b>
<b>Cambodia</b>						
- Yes	60.0	100.0	-	-	60.0	100.0
- No	40.0	-	-	-	40.0	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(5)</b>	<b>(5)</b>	<b>-</b>	<b>-</b>	<b>(5)</b>	<b>(5)</b>

Table 6.14: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Can convince regular partner to use condom</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Yes	80.0	95.9	100.0	77.5	88.9	87.6
- No	20.0	4.1	0.0	22.5	11.1	12.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(10)</b>	<b>(49)</b>	<b>(8)</b>	<b>(40)</b>	<b>(18)</b>	<b>(89)</b>
<b>Total (weighted)</b>						
- Yes	83.0	91.8	94.7	77.4	86.4	86.9
- No	17.0	8.2	5.3	22.6	13.6	13.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(47)</b>	<b>(208)</b>	<b>(19)</b>	<b>(106)</b>	<b>(46)</b>	<b>(314)</b>
<b>Can convince non-regular partner to use condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	90.0	91.8	(1)	-	90.3	91.8
- No	10.0	8.2	-	-	9.7	8.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(30)</b>	<b>(61)</b>	<b>(1)</b>	<b>-</b>	<b>(31)</b>	<b>(61)</b>
<b>Cambodia</b>						
- Yes	100.0	100.0	(1)	-	100.0	100.0
- No	0.0	0.0	-	-	0.0	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(14)</b>	<b>(11)</b>	<b>(1)</b>	<b>-</b>	<b>(15)</b>	<b>(11)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Yes	75.0	88.9	(1)	100.0	77.8	90.0
- No	25.0	11.1	-	0.0	22.2	10.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(9)</b>	<b>(1)</b>	<b>(1)</b>	<b>(9)</b>	<b>(10)</b>
<b>Total (weighted)</b>						
- Yes	88.5	92.4	(1)	100.0	89.1	92.6
- No	11.5	7.6	-	0.0	10.9	7.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(52)</b>	<b>(79)</b>	<b>(3)</b>	<b>(2)</b>	<b>(55)</b>	<b>(81)</b>
<b>Can convince sex worker to use condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	95.1	83.8	-	-	95.1	83.8
- No	4.9	16.2	-	-	4.9	16.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(284)</b>	<b>(315)</b>	<b>-</b>	<b>-</b>	<b>(284)</b>	<b>(315)</b>
<b>Cambodia</b>						
- Yes	95.2	100.0	-	-	95.2	100.0
- No	4.8	0.0	-	-	4.8	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(145)</b>	<b>(205)</b>	<b>-</b>	<b>-</b>	<b>(145)</b>	<b>(205)</b>

Table 6.14: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Can convince sex worker to use condom</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	100.0	(3)	-	-	100.0	(3)
- No	0.0	-	-	-	0.0	-
<b>Total</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>-</b>
<b>(N)</b>	<b>(7)</b>	<b>(3)</b>	<b>-</b>	<b>-</b>	<b>(7)</b>	<b>(3)</b>
<b>Total (weighted)</b>						
- Yes	95.3	90.2	-	-	95.3	90.2
- No	4.7	9.8	-	-	4.7	9.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(387)</b>	<b>(460)</b>	<b>-</b>	<b>-</b>	<b>(387)</b>	<b>(460)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	100.0	(3)	-	-	100.0	(3)
- No	0.0	-	-	-	0.0	-
<b>Total</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>-</b>
<b>(N)</b>	<b>(7)</b>	<b>(3)</b>	<b>-</b>	<b>-</b>	<b>(7)</b>	<b>(3)</b>
<b>Total (weighted)</b>						
- Yes	95.3	90.2	-	-	95.3	90.2
- No	4.7	9.8	-	-	4.7	9.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(387)</b>	<b>(460)</b>	<b>-</b>	<b>-</b>	<b>(387)</b>	<b>(460)</b>

Table 6.15: Percentage ability to deny sexual intercourse if partners do not want to use condom, among migrants who are users of condom with regular partners, non-regular partners and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Can deny when regular partner don't want to use condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	71.4	52.7	85.7	73.8	74.3	57.8
- No	28.6	47.3	14.3	26.2	25.7	42.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(28)</b>	<b>(131)</b>	<b>(7)</b>	<b>(42)</b>	<b>(35)</b>	<b>(173)</b>
<b>Cambodia</b>						
- Yes	20.0	0.0	-	-	20.0	0.0
- No	80.0	100.0	-	-	80.0	100.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(5)</b>	<b>(5)</b>	<b>-</b>	<b>-</b>	<b>(5)</b>	<b>(5)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	33.3	52.1	100.0	63.9	64.7	57.1
- No	66.7	47.9	0.0	36.1	35.3	42.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(9)</b>	<b>(48)</b>	<b>(8)</b>	<b>(36)</b>	<b>(17)</b>	<b>(84)</b>



Table 6.15: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Can deny when regular partner don't want to use condom</b>						
<b>Total (weighted)</b>						
- Yes	53.3	51.2	95.0	67.7	66.2	56.6
- No	46.7	48.8	5.0	32.3	33.8	43.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(45)</b>	<b>(203)</b>	<b>(20)</b>	<b>(99)</b>	<b>(65)</b>	<b>(302)</b>
<b>Can deny when non-regular partner don't want to use condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	56.7	77.6	(1)	-	58.1	77.6
- No	43.3	22.4	-	-	41.9	22.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(30)</b>	<b>(58)</b>	<b>(1)</b>	<b>-</b>	<b>(31)</b>	<b>(58)</b>
<b>Cambodia</b>						
- Yes	92.3	100.0	-	-	85.7	100.0
- No	7.7	0.0	(1)	-	14.3	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(13)</b>	<b>(11)</b>	<b>(1)</b>	<b>-</b>	<b>(14)</b>	<b>(11)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	37.5	80.0	(1)	(2)	44.4	75.0
- No	62.5	20.0	-	(2)	55.6	25.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(8)</b>	<b>(10)</b>	<b>(1)</b>	<b>(4)</b>	<b>(9)</b>	<b>(12)</b>
<b>Total (weighted)</b>						
- Yes	59.6	80.8	(3)	(2)	60.7	79.3
- No	40.4	19.2	(1)	(2)	39.3	20.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(52)</b>	<b>(78)</b>	<b>(4)</b>	<b>(4)</b>	<b>(56)</b>	<b>(82)</b>
<b>Can deny when sex worker does not want to use condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	79.9	83.9	-	-	79.9	83.9
- No	20.1	16.1	-	-	20.1	16.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(288)</b>	<b>(311)</b>	<b>-</b>	<b>-</b>	<b>(288)</b>	<b>(311)</b>
<b>Cambodia</b>						
- Yes	91.7	97.5	-	-	91.7	97.5
- No	8.3	2.5	-	-	8.3	2.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(145)</b>	<b>(203)</b>	<b>-</b>	<b>-</b>	<b>(145)</b>	<b>(203)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	100.0	(3)	-	-	100.0	(3)
- No	0.0	-	-	-	0.0	-
<b>Total</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>-</b>
<b>(N)</b>	<b>(7)</b>	<b>(3)</b>	<b>-</b>	<b>-</b>	<b>(7)</b>	<b>(3)</b>
<b>Total (weighted)</b>						
- Yes	84.4	89.5	-	-	84.4	89.5
- No	15.6	10.5	-	-	15.6	10.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(391)</b>	<b>(455)</b>	<b>-</b>	<b>-</b>	<b>(391)</b>	<b>(455)</b>

**Table 6.16:** Percentage distribution of decision to deny sexual in case of partners refusing to use a condom, among migrants who are users of condom with regular partners, non-regular partners and sex workers

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What are you going to do if regular partner refuse to use a condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Refuse to have sexual intercourse	11.1	20.5	0.0	28.2	9.1	22.3
- Accept to have without a condom	18.5	39.4	66.7	30.8	27.3	37.3
- Convince until agree to use	70.4	39.4	33.3	41.0	63.6	39.8
- Others	0.0	0.8	0.0	0.0	0.0	0.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(27)</b>	<b>(127)</b>	<b>(6)</b>	<b>(39)</b>	<b>(33)</b>	<b>(166)</b>
<b>Cambodia</b>						
- Refuse to have sexual intercourse	20.0	-	-	-	20.0	-
- Accept to have without a condom	80.0	100.0	-	-	80.0	100.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(5)</b>	<b>(5)</b>	<b>-</b>	<b>-</b>	<b>(5)</b>	<b>(5)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Refuse to have sexual intercourse	11.1	9.8	71.4	5.9	37.5	8.0
- Accept to have without a condom	22.2	17.1	28.6	20.6	25.0	18.7
- Convince until agree to use	44.4	73.2	0.0	73.5	25.0	73.3
- Others	22.2	0.0	0.0	0.0	12.5	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(9)</b>	<b>(41)</b>	<b>(7)</b>	<b>(34)</b>	<b>(16)</b>	<b>(45)</b>
<b>Total (weighted)</b>						
- Refuse to have sexual intercourse	11.6	16.0	50.0	13.8	23.0	15.3
- Accept to have without a condom	25.6	32.1	38.9	24.5	29.5	29.5
- Convince until agree to use	55.8	51.3	11.1	61.7	42.6	54.8
- Others	7.0	0.5	0.0	0.0	4.9	0.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(43)</b>	<b>(187)</b>	<b>(18)</b>	<b>(94)</b>	<b>(61)</b>	<b>(281)</b>
<b>What are you going to do if non-regular partner refuses to use a condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Refuse to have sexual intercourse	43.3	55.2	-	-	41.9	55.2
- Accept to have without a condom	27.7	20.7	(1)	-	29.0	20.7
- Convince until agree to use	26.7	24.1	-	-	25.8	24.1
- Others	3.3	0.0	-	-	3.2	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(30)</b>	<b>(58)</b>	<b>(1)</b>	<b>-</b>	<b>(31)</b>	<b>(58)</b>
<b>Cambodia</b>						
- Refuse to have sexual intercourse	50.0	90.0	-	-	46.7	90.0
- Accept to have without a condom	42.9	10.0	(1)	-	46.7	10.0
- Convince until agree to use	7.1	-	-	-	6.7	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(14)</b>	<b>(10)</b>	<b>(1)</b>	<b>-</b>	<b>(15)</b>	<b>(10)</b>

Table 6.16: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What are you going to do if non-regular partner refuses to use a condom</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Refuse to have sexual intercourse	42.9	62.5	(1)	0.0	50.0	55.6
- Accept to have without a condom	42.9	-	-	-	37.5	-
- Convince until agree to use	14.3	37.5	-	100.0	12.5	44.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(7)</b>	<b>(8)</b>	<b>(1)</b>	<b>(1)</b>	<b>(8)</b>	<b>(9)</b>
<b>Total (weighted)</b>						
- Refuse to have sexual intercourse	45.1	61.6	(2)	0.0	45.5	60.0
- Accept to have without a condom	33.3	15.1	(2)	0.0	34.5	14.7
- Convince until agree to use	19.6	23.3	-	100.0	18.2	25.3
- Others	2.0	0.0	-	0.0	1.8	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(51)</b>	<b>(73)</b>	<b>(4)</b>	<b>(2)</b>	<b>(55)</b>	<b>(75)</b>
<b>What are you going to do if sex worker refuses to use a condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Refuse to have sexual intercourse	57.4	65.2	-	-	57.4	65.2
- Accept to have without a condom	12.4	12.6	-	-	12.4	12.6
- Convince until agree to use	29.8	21.5	-	-	29.8	21.5
- Others	0.4	0.7	-	-	0.4	0.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(282)</b>	<b>(302)</b>	<b>-</b>	<b>-</b>	<b>(282)</b>	<b>(302)</b>
<b>Coastal Provinces</b>						
<b>Cambodia</b>						
- Refuse to have sexual intercourse	86.3	97.5	-	-	86.3	97.5
- Accept to have without a condom	6.8	2.5	-	-	6.8	2.5
- Convince until agree to use	5.5	-	-	-	5.5	-
- Others	1.4	-	-	-	1.4	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(146)</b>	<b>(201)</b>	<b>-</b>	<b>-</b>	<b>(146)</b>	<b>(201)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Refuse to have sexual intercourse	42.9	(1)	-	-	42.9	(1)
- Accept to have without a condom	57.1	(1)	-	-	57.1	(1)
<b>Total</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>-</b>
<b>(N)</b>	<b>(7)</b>	<b>(2)</b>	<b>-</b>	<b>-</b>	<b>(7)</b>	<b>(2)</b>
<b>Total (weighted)</b>						
- Refuse to have sexual intercourse	66.6	77.7	-	-	66.6	77.7
- Accept to have without a condom	10.1	8.6	-	-	10.1	8.6
- Convince until agree to use	22.5	13.3	-	-	22.5	13.3
- Others	0.8	0.5	-	-	0.8	0.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>-</b>	<b>-</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(386)</b>	<b>(444)</b>	<b>-</b>	<b>-</b>	<b>(386)</b>	<b>(444)</b>

**Table 7.1:** Percentage distribution of access to health services for illness requiring treatment

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>When you were ill you go to gov. service / gov. hospital</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	25.1	43.0	27.0	69.3	25.4	47.2
- No	9.0	23.7	17.9	19.4	10.5	23.0
- Not ill	65.8	33.3	55.2	11.3	64.1	29.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2025)</b>	<b>(2043)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2422)</b>	<b>(2434)</b>
<b>Percent not going among those who were ill</b>	<b>26.4</b>	<b>35.5</b>	<b>39.9</b>	<b>21.9</b>	<b>29.2</b>	<b>32.8</b>
<b>(N)</b>	<b>(692)</b>	<b>(1362)</b>	<b>(178)</b>	<b>(347)</b>	<b>(870)</b>	<b>(1709)</b>
<b>Cambodia</b>						
- Yes	56.7	45.1	73.0	18.9	58.0	43.0
- No	10.5	7.7	13.5	21.6	10.8	8.8
- Not ill	32.8	47.2	13.5	59.5	31.3	48.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100.0</b>
<b>(N)</b>	<b>(427)</b>	<b>(428)</b>	<b>(37)</b>	<b>(37)</b>	<b>(464)</b>	<b>(465)</b>
<b>Percent not going among those who were ill</b>	<b>15.7</b>	<b>14.6</b>	<b>15.6</b>	<b>53.3</b>	<b>15.7</b>	<b>17.0</b>
<b>(N)</b>	<b>(287)</b>	<b>(226)</b>	<b>(32)</b>	<b>(15)</b>	<b>(319)</b>	<b>(241)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	12.1	63.6	33.0	62.6	21.9	63.1
- No	12.5	31.8	18.1	26.9	15.1	29.5
- Not ill	75.5	4.7	48.9	10.6	63.0	7.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(484)</b>	<b>(485)</b>
<b>Percent not going among those who were ill</b>	<b>50.8</b>	<b>33.3</b>	<b>35.3</b>	<b>30.0</b>	<b>40.8</b>	<b>31.8</b>
<b>(N)</b>	<b>(63)</b>	<b>(246)</b>	<b>(116)</b>	<b>(203)</b>	<b>(179)</b>	<b>(449)</b>
<b>Total (weighted)</b>						
- Yes	27.4	46.8	32.0	63.7	28.5	50.7
- No	9.8	22.8	17.8	23.3	11.7	22.9
- Not ill	62.7	30.3	50.3	13.0	59.9	26.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2593)</b>	<b>(2611)</b>	<b>(776)</b>	<b>(771)</b>	<b>(3369)</b>	<b>(3382)</b>
<b>Percent not going among those who were ill</b>	<b>26.4</b>	<b>32.7</b>	<b>35.8</b>	<b>26.8</b>	<b>29.1</b>	<b>31.1</b>
<b>(N)</b>	<b>(966)</b>	<b>(1817)</b>	<b>(386)</b>	<b>(671)</b>	<b>(1352)</b>	<b>(2490)</b>
<b>Why not go to gov. hospital</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- too far	32.2	7.4	12.7	17.6	26.7	8.8
- expensive / no money	8.9	0.8	18.3	5.4	11.6	1.5
- not confident	21.1	-	5.6	-	16.7	-
- don't like / bad service	5.6	4.0	12.7	4.1	7.6	4.0
- no ID card	18.9	48.8	42.3	29.7	25.5	46.2
- symptom not serious	7.8	14.4	0.0	4.1	5.6	13.0
- Do not know / never go for treatment / never go there	-	7.6	-	5.4	-	7.3

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not go to gov. hospital</b>						
- Have no health center / have no hospital	-	0.6	-	4.1	-	1.1
- No medical doctor	-	0.2	-	0.0	-	0.2
- Wait for long times	-	4.5	-	1.4	-	4.0
- No person picked up to hospital	-	0.0	-	1.4	-	0.2
- Can not speak Thai	-	1.5	-	5.4	-	2.0
- Take medicine but un-recovery	-	0.2	-	0.0	-	0.2
- Have no times to go because of unknowing schedule of boat departure and arrival	-	1.1	-	0.0	-	0.9
- have no right to use services / have no hospital card	-	8.7	-	21.6	-	10.5
- Others	5.6	-	8.5	-	6.4	-
<b>Total (N)</b>	<b>100 (180)</b>	<b>100 (471)</b>	<b>100 (71)</b>	<b>100 (74)</b>	<b>100 (251)</b>	<b>100 (545)</b>
<b>Cambodia</b>						
- too far	8.9	18.2	20.0	12.5	10.0	17.1
- expensive / no money	-	-	-	-	-	-
- not confident	26.7	-	0.0	-	24.0	-
- don't like / bad service	13.3	-	0.0	-	12.0	-
- no ID card	46.7	33.3	60.0	75.0	48.0	41.5
- symptom not serious	2.2	-	20.0	-	4.0	-
- Do not know / never go for treatment / never go there	-	42.4	-	12.5	-	36.6
- Wait for long times	-	3.0	-	0.0	-	2.4
- have no right to use services / have no hospital card	-	3.0	-	0.0	-	2.4
- Others	2.2	-	0.0	-	2.0	-
<b>Total (N)</b>	<b>100 (45)</b>	<b>100 (33)</b>	<b>100 (5)</b>	<b>100 (8)</b>	<b>100 (50)</b>	<b>100 (41)</b>
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- too far	36.7	3.8	27.5	4.9	31.4	4.3
- expensive / no money	13.3	3.8	32.5	0.0	24.3	2.1
- not confident	33.3	-	10.0	-	20.0	-
- don't like / bad service	0.0	-	15.0	-	8.6	-
- no ID card	6.7	83.5	5.0	83.6	5.7	83.6
- symptom not serious	6.7	3.8	0.0	0.0	2.9	2.1
- Wait for long times	-	2.5	-	0.0	-	1.4
- Can not speak Thai	-	0.0	-	3.3	-	1.4
- Take medicine	-	1.3	-	4.9	-	2.9
- have no right to use services / have no hospital card	-	1.3	-	1.6	-	1.4
- Others	3.3	-	10.0	-	7.1	-
<b>Total (N)</b>	<b>100 (30)</b>	<b>100 (79)</b>	<b>100 (40)</b>	<b>100 (61)</b>	<b>100 (70)</b>	<b>100 (140)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not go to gov. hospital</b>						
<b>Total (weighted)</b>						
- too far	29.3	7.1	20.7	9.5	26.3	7.6
- expensive / no money	8.4	1.5	25.2	1.7	14.3	1.6
- not confident	24.5	-	7.4	-	18.5	-
- don't like / bad service	5.6	2.9	13.3	1.7	8.3	2.6
- no ID card	20.9	56.1	23.7	63.7	21.9	57.9
- symptom not serious	6.8	11.4	0.7	1.7	4.7	9.1
- Do not know / never go for treatment / never go there	-	8.1	-	2.2	-	6.7
- Have no health center / have no hospital	-	0.5	-	1.7	-	0.8
- Wait for long times	-	3.3	-	2.2	-	3.0
- No person picked up to hospital	-	0.0	-	0.6	-	0.1
- Can not speak Thai	-	1.4	-	5.0	-	2.2
- Take medicine	-	0.3	-	1.1	-	0.5
- Take medicine but un-recovery	-	0.2	-	0.0	-	0.1
- Have no times to go because of unknowing schedule of boat departure and arrival	-	0.7	-	0.0	-	0.5
- have no right to use services / have no hospital card	-	6.5	-	8.9	-	7.1
- Others	4.4	-	8.9	-	6.0	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(249)</b>	<b>(581)</b>	<b>(135)</b>	<b>(179)</b>	<b>(384)</b>	<b>(760)</b>
<b>When you were ill do you go to private hospital</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	11.0	14.5	6.3	19.4	10.2	15.3
- No	23.2	52.2	38.4	69.3	25.7	54.9
- Not ill	65.9	33.3	55.3	11.3	64.1	29.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2024)</b>	<b>(2042)</b>	<b>(396)</b>	<b>(391)</b>	<b>(2420)</b>	<b>(2433)</b>
<b>Percent not going among those who were ill</b>	<b>67.9</b>	<b>78.2</b>	<b>85.9</b>	<b>78.1</b>	<b>71.5</b>	<b>78.2</b>
<b>(N)</b>	<b>(691)</b>	<b>(1351)</b>	<b>(177)</b>	<b>(347)</b>	<b>(868)</b>	<b>(1708)</b>
<b>Cambodia</b>						
- Yes	47.5	37.4	59.5	16.2	48.5	35.7
- No	19.7	15.4	27.0	24.3	20.3	16.1
- Not ill	32.8	47.2	13.5	59.5	31.3	48.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(428)</b>	<b>(37)</b>	<b>(37)</b>	<b>(464)</b>	<b>(465)</b>
<b>Percent not going among those who were ill</b>	<b>29.3</b>	<b>29.2</b>	<b>31.2</b>	<b>60.0</b>	<b>29.5</b>	<b>31.1</b>
<b>(N)</b>	<b>(287)</b>	<b>(226)</b>	<b>(32)</b>	<b>(15)</b>	<b>(319)</b>	<b>(241)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>When you were ill do you go to private hospital</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	10.1	17.4	30.4	33.9	19.6	25.2
- No	14.4	77.9	20.7	55.5	17.4	67.4
- Not ill	75.5	4.7	48.9	10.6	63.0	7.4
<b>Total</b>	<b>100</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>
<b>(N)</b>	<b>(257)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(484)</b>	<b>(485)</b>
<b>Percent not going among those who were ill</b>	<b>58.7</b>	<b>81.7</b>	<b>40.5</b>	<b>62.1</b>	<b>46.9</b>	<b>72.8</b>
<b>(N)</b>	<b>(63)</b>	<b>(246)</b>	<b>(116)</b>	<b>(203)</b>	<b>(179)</b>	<b>(449)</b>
<b>Total (weighted)</b>						
- Yes	16.1	18.3	20.9	26.7	17.2	20.2
- No	21.1	51.3	28.9	60.3	22.9	53.4
- Not ill	62.8	30.3	50.3	13.0	59.9	26.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2592)</b>	<b>(2610)</b>	<b>(776)</b>	<b>(771)</b>	<b>(3368)</b>	<b>(3381)</b>
<b>Percent not going among those who were ill</b>	<b>56.8</b>	<b>73.7</b>	<b>58.0</b>	<b>69.3</b>	<b>57.1</b>	<b>72.5</b>
<b>(N)</b>	<b>(965)</b>	<b>(1817)</b>	<b>(386)</b>	<b>(671)</b>	<b>(1351)</b>	<b>(2488)</b>
<b>Why not go to private hospital</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- too far	24.4	7.1	13.8	8.3	21.7	7.3
- expensive / no money	29.9	27.7	30.9	21.2	30.1	26.4
- not confident	25.3	-	7.2	-	20.8	-
- don't like / bad service	2.0	5.1	11.8	6.8	4.4	5.4
- no ID card	11.2	10.7	27.0	14.8	15.2	11.5
- symptom not serious	1.5	5.6	0.0	0.4	1.2	4.5
- don't know how to go there	0.7	31.1	5.3	16.3	1.8	28.1
- too large	2.6	-	1.3	-	2.3	-
- Have no health center / have no hospital	-	3.4	-	4.9	-	3.7
- have no right to use services / have no hospital card	-	5.5	-	24.6	-	9.3
- Others	2.4	4.0	2.6	2.8	2.5	3.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(455)</b>	<b>(1045)</b>	<b>(152)</b>	<b>(264)</b>	<b>(607)</b>	<b>(1309)</b>
<b>Cambodia</b>						
- too far	9.8	10.6	0.0	0.0	8.7	9.3
- expensive / no money	20.7	54.5	40.0	55.6	22.8	54.7
- not confident	52.4	-	50.0	-	52.2	-
- don't like / bad service	2.4	1.5	0.0	0.0	2.2	1.3
- no ID card	8.5	6.1	0.0	0.0	7.6	5.3
- symptom not serious	1.2	-	10.0	-	2.2	-
- don't know how to go there	-	25.8	-	44.4	-	28.0
- have no right to use services / have no hospital card	-	1.5	-	0.0	-	1.3
- Others	4.9	-	0.0	-	4.3	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(82)</b>	<b>(66)</b>	<b>(10)</b>	<b>(9)</b>	<b>(92)</b>	<b>(75)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not go to private hospital</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- too far	33.3	5.1	10.9	16.9	20.7	9.7
- expensive / no money	25.0	67.2	37.0	39.5	31.7	56.4
- not confident	27.8	-	32.6	-	30.5	-
- don't like / bad service	0.0	1.5	4.3	6.5	2.4	3.4
- no ID card	8.3	14.4	10.9	14.5	9.8	14.4
- symptom not serious	2.8	0.5	0.0	0.8	1.2	0.6
- don't know how to go there	-	5.6	-	8.1	-	6.6
- Others	2.8	5.6	4.3	13.6	3.7	8.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(36)</b>	<b>(195)</b>	<b>(46)</b>	<b>(124)</b>	<b>(82)</b>	<b>(319)</b>
<b>Total (weighted)</b>						
- too far	23.4	6.7	12.2	12.2	20.1	8.1
- expensive / no money	28.1	39.1	33.3	30.3	29.6	36.8
- not confident	29.2	-	18.0	-	25.9	-
- don't like / bad service	1.9	4.0	8.6	6.6	3.8	4.6
- no ID card	10.5	11.4	20.3	14.4	13.4	12.2
- symptom not serious	1.7	4.0	0.5	0.7	1.3	3.2
- don't know how to go there	0.6	24.3	3.2	12.9	1.3	21.3
- too large	1.9	-	0.9	-	1.6	-
- Have no health center / have no hospital	-	2.4	-	2.4	-	2.4
- have no right to use services / have no hospital card	-	3.9	-	12.4	-	6.1
- Others	2.8	4.3	3.2	7.9	2.9	5.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(534)</b>	<b>(1311)</b>	<b>(222)</b>	<b>(458)</b>	<b>(756)</b>	<b>(1769)</b>
<b>When you were ill do you go to private clinic</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	14.8	31.7	16.1	39.6	15.0	33.0
- No	19.2	35.0	28.7	49.1	20.8	37.3
- Not ill	66.0	33.3	55.2	11.3	64.2	29.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2019)</b>	<b>(2042)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2416)</b>	<b>(2433)</b>
<b>Percent not going among those who were ill</b>	<b>56.6</b>	<b>52.5</b>	<b>64.0</b>	<b>55.3</b>	<b>58.1</b>	<b>53.1</b>
<b>(N)</b>	<b>(686)</b>	<b>(1362)</b>	<b>(178)</b>	<b>(347)</b>	<b>(864)</b>	<b>(1711)</b>
<b>Cambodia</b>						
- Yes	53.9	38.8	67.6	27.0	55.0	37.8
- No	13.3	14.0	18.9	13.5	13.8	14.0
- Not ill	32.8	47.2	13.5	59.5	31.3	48.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(428)</b>	<b>(37)</b>	<b>(37)</b>	<b>(464)</b>	<b>(465)</b>
<b>Percent not going among those who were ill</b>	<b>19.9</b>	<b>26.5</b>	<b>21.9</b>	<b>33.3</b>	<b>20.1</b>	<b>27.0</b>
<b>(N)</b>	<b>(287)</b>	<b>(226)</b>	<b>(32)</b>	<b>(15)</b>	<b>(319)</b>	<b>(241)</b>



Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>When you were ill do you go to private clinic</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	9.0	31.0	23.3	43.2	15.7	36.7
- No	15.2	64.3	27.8	46.3	21.1	55.9
- Not ill	75.8	4.7	48.9	10.6	63.1	7.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(256)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(483)</b>	<b>(485)</b>
<b>Percent not going among those who were ill</b>	<b>62.9</b>	<b>67.5</b>	<b>54.3</b>	<b>51.7</b>	<b>57.3</b>	<b>60.4</b>
<b>(N)</b>	<b>(62)</b>	<b>(246)</b>	<b>(116)</b>	<b>(203)</b>	<b>(178)</b>	<b>(449)</b>
<b>Total (weighted)</b>						
- Yes	19.4	32.6	21.9	40.9	20.0	34.5
- No	17.7	37.1	27.8	46.1	20.0	39.1
- Not ill	62.9	30.3	50.3	13.0	60.0	26.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2586)</b>	<b>(2611)</b>	<b>(776)</b>	<b>(772)</b>	<b>(3362)</b>	<b>(3383)</b>
<b>Percent not going among those who were ill</b>	<b>47.7</b>	<b>53.2</b>	<b>56.0</b>	<b>53.0</b>	<b>50.0</b>	<b>53.1</b>
<b>(N)</b>	<b>(959)</b>	<b>(1820)</b>	<b>(386)</b>	<b>(672)</b>	<b>(1345)</b>	<b>(2490)</b>
<b>Why not go to private clinic</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- too far	18.5	5.2	10.5	2.2	16.6	4.5
- expensive / no money	35.9	45.0	40.4	68.1	36.9	49.9
- not confident	29.3	-	3.5	-	23.2	-
- don't like / bad service	1.9	7.9	7.9	9.7	3.3	8.3
- no ID card	9.0	3.7	27.2	3.2	13.3	3.6
- don't know how to go there	0.0	23.6	7.9	9.2	1.9	20.6
- too large	3.0	-	1.8	-	2.7	-
- symptom not serious	-	6.3	-	0.5	-	5.1
- have no right to use services / have no hospital card	-	2.3	-	4.9	-	2.8
- Others	2.4	5.9	0.9	2.2	2.1	5.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(368)</b>	<b>(695)</b>	<b>(114)</b>	<b>(185)</b>	<b>(482)</b>	<b>(880)</b>
<b>Cambodia</b>						
- too far	3.7	23.3	0.0	0.0	3.3	21.9
- expensive / no money	31.5	55.0	28.6	100.0	31.1	57.8
- not confident	50.0	-	57.1	-	50.8	-
- don't like / bad service	1.9	3.3	0.0	0.0	1.6	3.1
- no ID card	7.4	-	0.0	-	6.6	-
- don't know how to go there	1.9	18.3	0.0	0.0	1.6	17.2
- too large	1.9	-	0.0	-	1.6	-
- Others	1.9	-	14.3	-	3.3	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(54)</b>	<b>(60)</b>	<b>(7)</b>	<b>(4)</b>	<b>(61)</b>	<b>(64)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not go to private clinic</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- too far	21.6	4.4	14.5	10.7	17.2	6.8
- expensive / no money	40.5	64.4	33.9	72.8	36.4	67.7
- not confident	27.0	-	29.0	-	28.3	-
- don't like / bad service	0.0	5.0	4.8	1.9	3.0	3.8
- no ID card	2.7	16.9	9.7	5.8	7.1	12.5
- don't know how to go there	2.7	3.8	0.0	3.9	1.0	3.8
- Others	5.4	5.6	8.1	4.9	7.1	5.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(37)</b>	<b>(160)</b>	<b>(62)</b>	<b>(103)</b>	<b>(99)</b>	<b>(263)</b>
<b>Total (weighted)</b>						
- too far	17.3	5.9	12.1	6.6	15.6	6.6
- expensive / no money	36.2	51.4	36.9	70.6	36.4	70.6
- not confident	31.3	-	17.8	-	26.9	-
- don't like / bad service	1.6	6.8	6.1	5.5	3.1	5.5
- no ID card	7.8	7.4	17.8	4.6	11.1	4.6
- don't know how to go there	0.7	17.3	3.7	6.3	1.7	6.3
- too large	2.3	-	0.9	-	1.9	-
- have no right to use services / have no hospital card	-	1.5	-	2.3	-	2.3
- Others	2.8	9.6	4.7	4.1	3.4	4.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(434)</b>	<b>(940)</b>	<b>(214)</b>	<b>(347)</b>	<b>(648)</b>	<b>(1287)</b>
<b>When you were ill do you go to Health Center</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	15.7	28.5	9.3	41.9	14.7	30.7
- No	18.3	38.2	35.5	46.8	21.1	39.5
- Not ill	66.0	33.3	55.2	11.3	64.2	29.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2020)</b>	<b>(2039)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2417)</b>	<b>(2430)</b>
<b>Percent not going among those who were ill</b>	<b>53.9</b>	<b>57.3</b>	<b>27.6</b>	<b>79.2</b>	<b>59.0</b>	<b>56.3</b>
<b>(N)</b>	<b>(687)</b>	<b>(1360)</b>	<b>(51)</b>	<b>(347)</b>	<b>(865)</b>	<b>(1706)</b>
<b>Cambodia</b>						
- Yes	37.5	44.9	56.8	24.3	39.0	43.2
- No	29.7	7.9	29.7	16.2	29.7	8.6
- Not ill	32.8	47.2	13.5	59.5	31.3	48.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(428)</b>	<b>(37)</b>	<b>(37)</b>	<b>(464)</b>	<b>(465)</b>
<b>Percent not going among those who were ill</b>	<b>44.3</b>	<b>15.0</b>	<b>34.4</b>	<b>40.0</b>	<b>43.3</b>	<b>16.6</b>
<b>(N)</b>	<b>(287)</b>	<b>(226)</b>	<b>(32)</b>	<b>(15)</b>	<b>(319)</b>	<b>(241)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not go to Health Center</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	8.9	65.8	18.6	70.0	13.5	67.8
- No	15.6	29.6	32.3	19.4	23.4	24.8
- Not ill	75.5	4.7	49.1	10.6	63.1	7.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(257)</b>	<b>(226)</b>	<b>(227)</b>	<b>(483)</b>	<b>(484)</b>
<b>Percent not going among those who were ill</b>	<b>63.5</b>	<b>31.0</b>	<b>63.5</b>	<b>21.7</b>	<b>63.5</b>	<b>26.8</b>
<b>(N)</b>	<b>(63)</b>	<b>(245)</b>	<b>(115)</b>	<b>(203)</b>	<b>(178)</b>	<b>(448)</b>
<b>Total (weighted)</b>						
- Yes	17.7	37.2	16.0	55.6	17.3	41.4
- No	19.5	32.4	33.7	31.4	22.7	32.2
- Not ill	62.8	30.4	50.3	13.0	60.0	26.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2589)</b>	<b>(2606)</b>	<b>(775)</b>	<b>(771)</b>	<b>(3364)</b>	<b>(3377)</b>
<b>Percent not going among those who were ill</b>	<b>52.4</b>	<b>46.6</b>	<b>67.8</b>	<b>36.1</b>	<b>56.8</b>	<b>43.7</b>
<b>(N)</b>	<b>(962)</b>	<b>(1817)</b>	<b>(385)</b>	<b>(671)</b>	<b>(1347)</b>	<b>(2485)</b>
<b>Why not go to Health Center</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- too far	23.6	18.0	12.8	53.9	20.5	24.8
- expensive / no money	12.4	3.3	30.5	3.9	17.5	3.4
- not confident	44.7	-	6.4	-	33.8	-
- don't like / bad service	2.8	10.6	12.8	14.6	5.6	11.4
- no ID card	9.0	11.9	29.8	2.8	14.9	10.2
- symptom not serious	1.4	6.0	0.0	0.6	1.0	5.0
- don't know how to go there	0.8	41.1	3.5	18.0	1.6	36.7
- Others	5.3	9.0	4.2	6.2	5.0	8.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(356)</b>	<b>(762)</b>	<b>(141)</b>	<b>(178)</b>	<b>(497)</b>	<b>(940)</b>
<b>Cambodia</b>						
- too far	2.4	0.0	0.0	16.7	2.2	2.6
- expensive / no money	2.4	6.1	0.0	33.3	2.2	10.3
- not confident	83.7	-	100.0	-	85.1	-
- don't like / bad service	4.1	15.2	0.0	33.3	3.7	17.9
- no ID card	5.7	-	0.0	-	5.2	-
- don't know how to go there	-	75.8	-	0.0	-	64.1
- Have no times to go because of unknowing schedule of boat departure and arrival	-	3.0	-	16.7	-	5.1
- Others	1.6	-	0.0	-	1.5	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(123)</b>	<b>(33)</b>	<b>(11)</b>	<b>(6)</b>	<b>(134)</b>	<b>(39)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not go to Health Center</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- too far	25.6	17.3	26.4	31.7	26.1	22.4
- expensive / no money	23.1	6.7	26.4	29.3	25.2	14.7
- not confident	46.2	-	26.4	-	33.3	-
- don't like / bad service	0.0	13.3	5.6	4.9	3.6	10.3
- no ID card	2.6	8.0	6.9	2.4	5.4	6.0
- symptom not serious	2.6	-	2.8	-	2.7	-
- medicine not enough	-	18.7	-	0.0	-	12.1
- don't know how to go there	-	17.3	-	19.5	-	18.1
- Wait for long times	-	2.7	-	4.9	-	3.4
- No have Health Center	-	4.0	-	2.4	-	3.4
- Others	0.0	11.9	5.6	4.9	3.6	9.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(39)</b>	<b>(75)</b>	<b>(72)</b>	<b>(41)</b>	<b>(111)</b>	<b>(116)</b>
<b>Total (weighted)</b>						
- too far	19.2	17.3	19.0	46.4	19.1	23.7
- expensive / no money	11.7	3.9	27.5	12.4	17.1	5.7
- not confident	53.4	-	19.8	-	41.8	-
- don't like / bad service	2.7	11.2	8.9	12.0	4.8	11.4
- no ID card	7.4	10.9	17.4	2.6	10.8	9.0
- symptom not serious	1.2	5.0	1.2	0.4	1.2	4.0
- don't know how to go there	0.6	38.4	1.6	18.0	0.9	33.9
- No have Health Center	-	2.8	-	2.1	-	2.6
- medicine not enough	-	3.3	-	0.4	-	2.6
- Others	3.8	7.3	4.7	5.6	4.2	7.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(489)</b>	<b>(828)</b>	<b>(258)</b>	<b>(233)</b>	<b>(747)</b>	<b>(1061)</b>
<b>When you were ill do you go to traditional healer/quack doc.</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	5.7	5.4	5.5	2.3	5.6	4.9
- No	28.2	61.2	39.3	86.4	30.0	65.3
- Not ill	66.2	33.3	55.2	11.3	64.3	29.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2015)</b>	<b>(2041)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2412)</b>	<b>(2432)</b>
<b>Percent not going among those who were ill</b>	<b>72.6</b>	<b>91.9</b>	<b>87.6</b>	<b>97.4</b>	<b>84.2</b>	<b>93.0</b>
<b>(N)</b>	<b>(782)</b>	<b>(1359)</b>	<b>(178)</b>	<b>(347)</b>	<b>(860)</b>	<b>(1707)</b>
<b>Cambodia</b>						
- Yes	33.0	21.1	18.9	0.0	31.9	19.4
- No	34.2	31.6	67.6	40.5	36.9	32.3
- Not ill	32.8	47.3	13.5	59.5	31.3	48.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(427)</b>	<b>(37)</b>	<b>(37)</b>	<b>(464)</b>	<b>(464)</b>
<b>Percent not going among those who were ill</b>	<b>50.9</b>	<b>60.0</b>	<b>78.1</b>	<b>100.0</b>	<b>53.6</b>	<b>62.5</b>
<b>(N)</b>	<b>(287)</b>	<b>(225)</b>	<b>(32)</b>	<b>(15)</b>	<b>(319)</b>	<b>(240)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>When you were ill do you go to traditional healer/quack doc</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	1.2	7.4	11.0	13.7	5.8	10.3
- No	23.3	88.0	40.1	75.8	31.2	82.3
- Not ill	75.5	4.7	48.9	10.6	63.0	7.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(257)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(484)</b>	<b>(485)</b>
<b>Percent not going among those who were ill</b>	<b>95.2</b>	<b>92.3</b>	<b>78.4</b>	<b>73.9</b>	<b>84.4</b>	<b>88.9</b>
<b>(N)</b>	<b>(63)</b>	<b>(246)</b>	<b>(116)</b>	<b>(119)</b>	<b>(179)</b>	<b>(449)</b>
<b>Total (weighted)</b>						
- Yes	8.8	8.0	8.9	8.0	8.8	8.0
- No	28.2	61.6	40.9	79.0	31.1	65.6
- Not ill	63.0	30.4	50.3	13.0	60.0	26.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2584)</b>	<b>(2609)</b>	<b>(776)</b>	<b>(771)</b>	<b>(3360)</b>	<b>(3380)</b>
<b>Percent not going among those who were ill</b>	<b>76.2</b>	<b>88.5</b>	<b>82.1</b>	<b>90.8</b>	<b>77.9</b>	<b>91.5</b>
<b>(N)</b>	<b>(957)</b>	<b>(1816)</b>	<b>(386)</b>	<b>(671)</b>	<b>(1343)</b>	<b>(2424)</b>
<b>Why not go to traditional healer/quack doc</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- too far	10.5	0.4	11.0	1.5	10.6	0.6
- expensive / no money	7.2	0.7	27.1	2.4	11.6	1.1
- not confident	53.9	-	7.7	-	43.8	-
- don't like / bad service	9.4	31.7	18.7	57.0	11.4	37.1
- no ID card	4.3	1.2	25.2	0.3	8.9	1.0
- symptom not serious	1.6	12.5	0.0	7.6	1.3	11.5
- don't know how to go there	0.4	16.9	5.8	7.0	1.6	14.8
- Not have traditional healer/quack doc.	-	34.2	-	22.3	-	31.7
- Others	3.4	2.4	3.2	1.8	3.4	2.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(553)</b>	<b>(1213)</b>	<b>(155)</b>	<b>(328)</b>	<b>(708)</b>	<b>(1541)</b>
<b>Cambodia</b>						
- too far	2.1	-	4.0	-	2.4	-
- expensive / no money	0.7	0.8	0.0	6.7	0.6	1.4
- not confident	64.3	-	68.0	-	64.9	-
- don't like / bad service	2.1	22.0	4.0	33.3	2.4	23.1
- no ID card	0.7	0.0	0.0	6.7	4.2	0.7
- symptom not serious	4.9	5.3	0.0	0.0	4.2	4.8
- don't know how to go there	0.0	37.1	4.0	26.7	0.6	36.1
- Not have traditional healer/quack doc.	-	33.3	-	26.7	-	32.7
- Others	0	1.6	12	0	1.8	1.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(143)</b>	<b>(132)</b>	<b>(25)</b>	<b>(15)</b>	<b>(168)</b>	<b>(147)</b>

Table 7.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why not go to traditional healer/quack doc</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- too far	20.7	1.8	11.1	1.8	14.9	1.8
- expensive / no money	13.8	1.8	23.3	8.3	19.6	4.6
- not confident	48.3	-	40.0	-	43.2	-
- don't like / bad service	5.2	64.4	8.9	43.5	7.4	55.4
- no ID card	1.7	0.9	6.7	1.2	4.7	1.0
- symptom not serious	3.4	0.5	1.1	4.8	2.0	2.3
- don't know how to go there	-	24.8	-	36.3	-	29.7
- Not have traditional healer/quack doc.	-	4.1	-	1.8	-	3.1
- Others	1.7	1.9	7.8	2.4	5.5	2.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(58)</b>	<b>(222)</b>	<b>(90)</b>	<b>(168)</b>	<b>(148)</b>	<b>(390)</b>
<b>Total (weighted)</b>						
- too far	10.4	0.7	10.5	1.7	10.4	1.0
- expensive / no money	7.0	1.0	23.2	5.4	12.0	2.2
- not confident	54.9	-	28.0	-	46.7	-
- don't like / bad service	7.5	39.1	12.7	49.8	9.1	42.0
- no ID card	3.4	1.1	14.3	0.8	6.7	1.0
- symptom not serious	2.4	9.0	0.6	6.1	1.9	8.2
- don't know how to go there	0.3	20.3	2.9	21.9	1.1	20.7
- Not have traditional healer/quack doc.	-	26.7	-	12.3	-	22.7
- Others	2.7	2.3	6.0	1.9	3.7	1.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(710)</b>	<b>(1563)</b>	<b>(314)</b>	<b>(594)</b>	<b>(1024)</b>	<b>(2157)</b>

Table 7.2: Percentage distribution of migrants' perception of the quality of services, their satisfaction and the perceived convenience of the services

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Quality of health service have you ever received</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- good	92.1	94.6	93.9	94.2	92.5	94.5
- not good	1.4	4.0	2.5	3.5	1.6	3.9
- not sure	6.5	1.4	3.7	2.3	5.9	1.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(661)</b>	<b>(1321)</b>	<b>(163)</b>	<b>(344)</b>	<b>(824)</b>	<b>(1665)</b>
<b>Cambodia</b>						
- good	98.9	92.0	96.8	100.0	98.7	92.5
- not good	0.0	7.1	3.2	0.0	0.3	6.7
- not sure	1.1	0.9	0.0	0.0	1.0	0.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(282)</b>	<b>(427)</b>	<b>(31)</b>	<b>(37)</b>	<b>(313)</b>	<b>(464)</b>

Table 7.2: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Quality of health service have you ever received</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- good	93.0	99.6	81.2	97.4	85.4	98.6
- not good	1.8	0.0	1.0	1.5	1.3	0.7
- not sure	5.3	0.4	17.8	1.0	13.3	0.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(57)</b>	<b>(233)</b>	<b>(101)</b>	<b>(195)</b>	<b>(158)</b>	<b>(428)</b>
<b>Total (weighted)</b>						
- good	94.0	95.5	87.6	96.0	92.3	95.6
- not good	1.1	3.4	1.7	2.5	1.3	3.2
- not sure	4.9	1.1	10.7	1.5	6.5	1.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(924)</b>	<b>(1759)</b>	<b>(346)</b>	<b>(651)</b>	<b>(1270)</b>	<b>(2410)</b>
<b>Satisfaction with the quality of treatment</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- fully satisfied	73.9	49.6	92.6	70.3	77.6	53.9
- somewhat satisfied	22.9	49.0	6.2	26.7	19.6	44.4
- not satisfied	3.2	1.4	1.2	2.9	2.8	1.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(658)</b>	<b>(1319)</b>	<b>(162)</b>	<b>(344)</b>	<b>(820)</b>	<b>(1663)</b>
<b>Cambodia</b>						
- fully satisfied	99.3	48.2	96.8	40.5	99.0	47.6
- somewhat satisfied	0.7	4.4	0.0	0.0	0.6	4.1
- not satisfied	0.0	47.3	3.2	59.5	0.3	48.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(281)</b>	<b>(427)</b>	<b>(31)</b>	<b>(37)</b>	<b>(312)</b>	<b>(464)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- fully satisfied	89.5	56.9	74.3	73.8	79.7	64.6
- somewhat satisfied	10.5	42.7	18.8	26.2	15.8	35.1
- not satisfied	0.0	0.4	6.9	0.0	4.4	0.2
<b>Total</b>	<b>100</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>
<b>(N)</b>	<b>(57)</b>	<b>(232)</b>	<b>(101)</b>	<b>(195)</b>	<b>(158)</b>	<b>(427)</b>
<b>Total (weighted)</b>						
- fully satisfied	82.4	56.0	83.5	72.7	82.7	60.5
- somewhat satisfied	15.7	43.0	12.1	25.9	14.7	38.3
- not satisfied	2.0	1.0	4.3	1.4	2.6	1.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(920)</b>	<b>(1756)</b>	<b>(346)</b>	<b>(656)</b>	<b>(1266)</b>	<b>(2412)</b>
<b>How convenient was the services you received</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- convenient	95.6	93.9	96.9	95.6	95.9	94.3
- not convenient	4.4	6.1	3.1	4.4	4.1	5.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(657)</b>	<b>(1318)</b>	<b>(163)</b>	<b>(343)</b>	<b>(820)</b>	<b>1661</b>

Table 7.2: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>How convenient was the services you received</b>						
<b>Cambodia</b>						
- convenient	99.3	93.3	96.7	100.0	99.0	93.8
- not convenient	0.7	6.7	3.3	0.0	1.0	6.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(281)</b>	<b>(427)</b>	<b>(31)</b>	<b>(37)</b>	<b>(311)</b>	<b>(464)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- convenient	94.8	98.3	90.0	98.0	91.8	98.1
- not convenient	5.2	1.7	10.0	2.0	8.2	1.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(58)</b>	<b>(233)</b>	<b>(100)</b>	<b>(196)</b>	<b>(158)</b>	<b>(429)</b>
<b>Total (weighted)</b>						
- convenient	96.5	94.9	93.3	97.0	95.7	95.4
- not convenient	3.5	5.1	6.7	3.0	4.3	4.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(921)</b>	<b>(1756)</b>	<b>(344)</b>	<b>(656)</b>	<b>(1265)</b>	<b>(2412)</b>

Table 7.3: Percentage distribution of migrants' knowledge of their right to access health services

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Do you know that you have right to access health service</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	74.0	77.0	76.8	92.0	74.5	79.4
- No	24.2	17.9	22.7	7.3	24.0	16.2
- Not sure	1.8	5.1	0.5	0.8	1.6	4.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1982)</b>	<b>(2018)</b>	<b>(396)</b>	<b>(386)</b>	<b>(2378)</b>	<b>(2404)</b>
<b>Cambodia</b>						
- Yes	56.7	74.8	71.1	59.5	57.9	73.5
- No	42.6	19.5	26.3	37.8	41.3	21.0
- Not sure	0.7	5.8	2.6	2.7	0.9	5.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(425)</b>	<b>(416)</b>	<b>(38)</b>	<b>(37)</b>	<b>(463)</b>	<b>(453)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	77.9	80.7	83.2	86.9	80.4	83.5
- No	21.7	19.3	16.4	13.1	19.2	16.5
- Not sure	0.4	-	0.4	-	0.4	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(238)</b>	<b>(226)</b>	<b>(198)</b>	<b>(484)</b>	<b>(436)</b>
<b>Total (weighted)</b>						
- Yes	72.2	79.1	79.8	92.7	74.0	82.2
- No	26.4	16.6	19.6	6.9	24.9	14.4
- Not sure	1.4	4.4	0.5	0.4	1.2	3.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2556)</b>	<b>(2571)</b>	<b>(774)</b>	<b>(752)</b>	<b>(3330)</b>	<b>(3323)</b>



**Table 7.4:** Percent with knowledge of modern contraceptive methods among male and female migrants age 15-49, distributed by marital status, ever-married and single persons

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Knowledge of modern contraceptive methods (ever married)</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Pill	83.2	93.2	83.8	96.0	83.3	93.9
- IUD	15.9	11.5	23.1	31.8	17.8	16.1
- Injection	75.2	75.7	74.7	87.7	75.1	78.5
- Sterilization	46.7	32.6	26.9	38.1	41.6	33.8
- Vasectomy	50.2	27.5	49.0	27.5	49.9	27.5
- Norplant	23.9	15.0	28.9	36.8	25.2	19.9
- Condom	50.3	56.6	33.1	39.7	45.9	52.7
- Others	1.6	0.1	1.3	0.0	1.5	0.1
(N)	(891)	(1022)	(308)	(302)	(1199)	1324
<b>Cambodia</b>						
- Pill	88.4	97.8	88.0	90.0	88.4	96.3
- IUD	14.3	29.2	16.0	30.0	14.5	29.4
- Injection	44.2	75.3	60.0	90.0	46.5	78.0
- Sterilization	2.0	4.5	4.0	0.0	2.3	3.7
- Vasectomy	1.4	4.5	0.0	0.0	1.2	3.7
- Norplant	2.0	30.3	0.0	35.0	1.7	31.2
- Condom	63.3	85.4	36.0	90.0	59.3	86.2
- Others	0.7	1.1	0.0	0.0	0.6	0.9
(N)	(147)	(86)	(25)	(20)	(127)	(105)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Pill	87.8	85.6	90.5	96.6	89.0	91.6
- IUD	12.2	11.0	41.9	25.0	20.4	18.7
- Injection	86.2	56.8	93.3	83.4	89.5	71.5
- Sterilization	47.2	31.4	50.5	40.7	48.7	36.5
- Vasectomy	67.5	25.4	81.0	28.3	73.7	27.0
- Norplant	13.0	11.9	46.7	23.4	28.5	18.3
- Condom	56.1	74.6	56.2	77.2	56.1	76.0
- Others	2.4	3.4	3.8	0.0	3.1	1.5
(N)	(123)	(118)	(105)	(145)	(228)	(263)
<b>Total (weighted)</b>						
- Pill	84.7	91.8	86.5	95.9	85.2	93.1
- IUD	15.0	12.4	30.1	29.3	19.5	17.9
- Injection	73.7	71.6	81.3	85.8	76.0	76.2
- Sterilization	41.7	30.0	35.0	39.4	39.7	33.1
- Vasectomy	47.9	25.4	59.2	28.3	51.2	26.3
- Norplant	19.3	15.4	34.3	30.9	23.8	20.4
- Condom	52.9	64.0	42.1	63.0	49.7	63.7
- Others	1.6	0.7	2.1	0.2	1.8	0.6
(N)	(1122)	(1209)	(475)	(580)	(1597)	(1789)

Table 7.4: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Knowledge of modern contraceptive methods (single)</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Pill	68.3	82.8	49.4	91.8	66.9	83.5
- IUD	10.6	9.9	10.1	36.1	10.5	11.8
- Injection	59.6	63.7	44.9	79.5	58.5	64.8
- Sterilization	38.1	30.1	18.0	39.7	36.6	30.8
- Vasectomy	36.7	28.4	23.6	28.8	35.8	28.4
- Norplant	14.9	12.3	21.3	28.8	15.4	13.5
- Condom	45.6	60.8	20.2	35.6	43.7	59.0
- Others	1.2	0.3	0.0	0.0	1.1	0.3
(N)	(1135)	(914)	(89)	(73)	(1224)	(987)
<b>Cambodia</b>						
- Pill	71.2	88.3	76.9	94.1	71.4	88.6
- IUD	10.7	17.4	0.0	23.5	10.2	17.7
- Injection	26.7	62.2	38.5	70.6	27.2	62.6
- Sterilization	1.4	2.1	0.0	0.0	1.4	2.0
- Vasectomy	1.8	1.5	0.0	0.0	1.7	1.4
- Norplant	1.4	19.5	0.0	5.9	1.4	18.9
- Condom	60.1	88.3	23.1	88.2	58.5	88.3
- Others	0.0	0.0	0.0	0.0	0.0	0.0
(N)	(281)	(333)	(13)	(17)	(294)	(350)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Pill	74.1	67.7	64.8	95.1	69.6	78.0
- IUD	14.1	12.0	17.2	37.0	15.6	21.5
- Injection	71.1	48.1	63.9	84.0	67.7	61.7
- Sterilization	41.5	15.0	30.3	51.9	36.2	29.0
- Vasectomy	61.5	13.5	59.0	44.4	60.3	25.2
- Norplant	7.4	12.0	18.9	32.1	12.8	19.6
- Condom	58.5	82.7	45.1	75.3	52.1	79.9
- Others	0.7	1.5	0.8	0.0	0.8	0.9
(N)	(135)	(133)	(122)	(81)	(257)	(214)
<b>Total (weighted)</b>						
- Pill	69.7	81.4	61.3	94.3	68.3	82.9
- IUD	11.1	12.2	14.9	34.7	11.8	14.9
- Injection	55.9	61.0	58.1	80.7	56.3	63.4
- Sterilization	32.5	21.6	26.1	42.3	31.4	24.0
- Vasectomy	34.9	19.9	47.7	34.7	37.0	21.7
- Norplant	11.5	13.8	18.8	27.3	12.7	15.4
- Condom	50.1	70.6	38.0	59.1	48.0	69.2
- Others	0.9	0.5	0.7	0.0	0.9	0.4
(N)	(1474)	(1290)	(303)	(176)	(1777)	(1466)

Table 7.4: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Knowledge of modern contraceptive methods (Total)</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Pill	74.8	88.3	76.1	95.2	75.0	89.4
- IUD	12.9	10.7	20.2	32.6	14.1	14.3
- Injection	66.4	70.0	68.0	86.1	66.7	72.7
- Sterilization	41.9	31.4	24.9	38.4	39.1	32.6
- Vasectomy	42.6	27.9	43.3	27.7	42.8	27.9
- Norplant	18.9	13.7	27.2	35.2	20.2	17.2
- Condom	47.6	58.6	30.2	38.9	44.8	55.4
- Others	1.4	0.2	1.0	0.0	1.3	0.2
(N)	(2026)	(1936)	(397)	(375)	(2423)	2311
<b>Cambodia</b>						
- Pill	77.1	90.3	84.2	91.9	77.7	90.4
- IUD	11.9	19.9	10.5	27.0	11.8	20.5
- Injection	32.7	64.9	52.6	81.1	34.3	66.2
- Sterilization	1.6	2.6	2.6	0.0	1.7	2.4
- Vasectomy	1.6	2.1	0.0	0.0	1.5	2.0
- Norplant	1.6	21.8	0.0	21.6	1.5	21.8
- Condom	61.2	87.7	31.6	89.2	58.8	87.8
- Others	0.2	0.2	0.0	0.0	0.2	0.2
(N)	(428)	(422)	(38)	(37)	(466)	(459)
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Pill	80.6	76.1	76.7	96.0	78.8	85.5
- IUD	13.2	11.6	28.6	29.3	20.4	20.0
- Injection	78.3	52.2	77.5	83.6	77.9	67.1
- Sterilization	44.2	22.7	39.6	44.7	42.1	33.1
- Vasectomy	64.3	19.1	69.2	34.1	66.6	26.2
- Norplant	10.1	12.0	31.7	26.5	20.2	18.9
- Condom	57.4	78.9	50.2	76.5	54.0	77.8
- Others	1.6	2.4	2.2	0.0	1.9	1.3
(N)	(258)	(251)	(227)	(226)	(485)	(477)
<b>Total (weighted)</b>						
- Pill	76.2	86.5	76.7	95.5	76.3	88.6
- IUD	12.8	12.3	24.2	30.6	15.4	16.5
- Injection	63.6	66.2	72.2	84.6	65.6	70.5
- Sterilization	36.5	25.6	31.5	40.1	35.3	29.0
- Vasectomy	40.5	22.6	54.7	29.9	43.8	24.3
- Norplant	14.9	14.6	28.3	30.1	18.0	18.2
- Condom	51.3	67.4	40.5	62.2	48.8	66.2
- Others	1.2	0.6	1.5	0.1	1.3	0.5
(N)	(2596)	(2500)	(778)	(756)	(3375)	(3256)

**Table 7.5:** Percent who have used specified modern contraceptive methods among ever-married male and female migrants

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever used modern contraceptive method</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Pill	44.2	71.3	48.7	66.2	45.4	70.1
- IUD	1.4	1.2	1.6	4.2	1.4	1.9
- Injection	29.6	40.0	30.8	44.7	29.9	41.1
- Sterilization	2.9	2.4	1.0	4.6	2.4	2.9
- Vasectomy	2.3	0.5	0.6	0.0	1.9	0.4
- Norplant	1.0	0.6	0.6	1.4	0.9	0.8
- Condom	4.2	25.3	1.0	19.0	3.4	23.8
- Others	0.3	0.0	0.0	0.4	0.3	0.1
(N)	(876)	(923)	(308)	(284)	(1184)	(1207)
<b>Cambodia</b>						
- Pill	37.9	53.1	56.5	64.7	40.5	55.1
- IUD	1.4	0.0	4.3	5.9	1.8	1.0
- Injection	12.4	23.5	13.0	29.4	12.5	24.5
- Sterilization	0.7	0.0	0.0	0.0	0.6	0.0
- Vasectomy	0.0	1.2	0.0	0.0	0.0	1.0
- Norplant	2.1	2.5	0.0	0.0	1.8	2.0
- Condom	8.3	29.6	0.0	0.0	7.1	24.5
- Others	0.0	1.2	0.0	0.0	0.0	1.0
(N)	(145)	(81)	(23)	(17)	(168)	(98)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Pill	53.7	60.0	46.3	73.2	50.9	66.8
- IUD	1.6	0.0	3.8	2.6	2.6	1.3
- Injection	33.3	13.8	36.2	50.3	34.6	32.6
- Sterilization	0.0	6.2	7.6	4.6	3.5	5.4
- Vasectomy	3.3	0.0	4.8	2.0	3.9	1.0
- Norplant	0.0	0.0	4.8	0.0	2.2	0.0
- Condom	8.1	53.1	12.4	38.6	10.1	45.6
- Others	0.0	2.1	0.0	0.0	0.0	1.0
(N)	(123)	(145)	(105)	(153)	(228)	(298)
<b>Total (weighted)</b>						
- Pill	45.3	67.5	48.6	70.1	46.3	68.3
- IUD	1.4	0.8	2.5	3.4	1.8	1.6
- Injection	28.3	33.2	32.1	47.0	29.5	37.6
- Sterilization	2.1	3.1	3.6	4.5	2.5	3.5
- Vasectomy	2.2	0.4	2.1	0.9	2.2	0.6
- Norplant	0.9	0.6	2.1	0.6	1.3	0.6
- Condom	5.4	32.0	5.3	28.0	5.4	30.7
- Others	0.3	99.5	0.0	99.8	0.2	99.6
(N)	(1108)	(1133)	(473)	(532)	(1581)	(1665)

**Table 7.6:** Percent currently using specified modern contraceptive method among currently married male and female migrants

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Currently use modern contraceptive method</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Pill	35.4	34.0	34.7	44.9	35.1	36.3
- IUD	0.3	0.3	0.0	2.0	0.2	0.6
- Injection	24.6	18.5	25.3	27.2	24.8	20.4
- Sterilization	2.5	2.2	2.5	6.0	2.5	3.0
- Vasectomy	2.4	0.5	1.4	0.0	2.1	0.4
- Norplant	0.7	0.5	0.4	1.0	0.6	0.6
- Condom	2.5	8.5	0.7	7.0	2.0	8.2
- Others	0.3	-	0.0	-	0.2	-
<b>Contraceptive Prevalence Rate (in case of multiple methods used, only method of highest efficacy would be counted)</b>	<b>63.5</b>	<b>61.6</b>	<b>65.1</b>	<b>84.8</b>	<b>64.0</b>	<b>65.9</b>
(N)	(564)	(1112)	(275)	(301)	(839)	(1413)
<b>Cambodia</b>						
- Pill	40.0	15.2	44.4	57.9	41.4	18.2
- IUD	0.0	0.0	5.6	5.3	1.7	0.4
- Injection	15.0	6.3	16.7	26.3	15.5	7.6
- Sterilization	0.0	0.0	5.6	0.0	1.7	0.0
- Vasectomy	0.0	0.4	0.0	0.0	0.0	0.4
- Norplant	0.0	0.8	0.0	0.0	0.0	0.7
- Condom	7.5	2.7	0.0	0.0	5.2	2.5
- Others	0.0	0.4	0.0	0.0	0.0	0.4
<b>Contraceptive Prevalence Rate (in case of multiple methods used, only method of highest efficacy would be counted)</b>	<b>51.3</b>	<b>25.4</b>	<b>69.2</b>	<b>89.5</b>	<b>55.8</b>	<b>29.9</b>
(N)	(39)	(256)	(13)	(19)	(52)	(275)
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Pill	36.7	43.8	25.3	52.7	31.1	48.3
- IUD	1.0	0.0	1.1	1.8	1.0	0.9
- Injection	17.3	6.9	13.7	30.8	15.5	19.1
- Sterilization	1.0	5.6	4.2	3.0	2.6	4.3
- Vasectomy	3.1	0.0	3.2	0.0	3.1	0.0
- Norplant	0.0	0.0	1.1	0.0	0.5	0.0
- Condom	7.1	12.3	5.3	18.9	6.2	20.1
- Others	0.0	1.3	0.0	0.0	0.0	0.6
<b>Contraceptive Prevalence Rate (in case of multiple methods used, only method of highest efficacy would be counted)</b>	<b>57.7</b>	<b>75.0</b>	<b>44.1</b>	<b>96.3</b>	<b>51.1</b>	<b>85.8</b>
(N)	(97)	(160)	(93)	(169)	(190)	(329)

Table 7.6: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Currently use modern contraceptive method</b>						
<b>Total (weighted)</b>						
- Pill	36.0	33.0	31.4	49.2	34.2	37.6
- IUD	0.4	0.2	0.7	1.9	0.5	0.7
- Injection	22.5	14.4	20.5	29.0	21.7	18.5
- Sterilization	2.1	2.6	3.3	4.2	2.5	3.0
- Vasectomy	2.3	0.4	2.1	0.0	2.3	0.3
- Norplant	0.4	0.5	0.7	0.5	0.5	0.5
- Condom	3.9	10.9	2.4	12.9	3.3	10.9
- Others	0.3	0.3	0.0	0.0	0.2	0.2
<b>Contraceptive Prevalence Rate (in case of multiple methods used, only method of highest efficacy would be counted)</b>	<b>61.4</b>	<b>58.9</b>	<b>56.8</b>	<b>91.9</b>	<b>59.7</b>	<b>68.3</b>
(N)	(700)	(1475)	(381)	(575)	(1081)	(2050)

Table 7.7: Percentage distribution of family size and mean family size of currently married women age 15-49 from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Whether you have children</b>				
- Yes	71.8	75.5	72.6	83.5
- No	28.2	24.5	27.4	16.5
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
(N)	(277)	(306)	(95)	(170)
<b>How many children do you have</b>				
- 1	42.2	42.4	43.5	41.5
- 2	31.2	30.7	23.2	30.3
- 3	17.1	14.3	17.4	12.0
- 4	3.5	6.9	5.8	10.6
- 5	2.5	4.3	5.8	2.1
- 6	2.0	0.4	1.4	2.1
- 7	1.0	0.0	1.4	0.7
- 8	0.5	0.0	0.0	0.7
- 9	0.0	0.9	1.4	0.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
(N)	(199)	(231)	(69)	(142)
<b>Mean number of children</b>	<b>2.06</b>	<b>2.06</b>	<b>2.26</b>	<b>2.14</b>

**Table 7.8:** Percentage distribution of who made decision to have children among currently married mothers age 15-49 from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Who made decision to have children</b>				
- Myself	3.5	7.0	8.7	4.9
- My spouse	6.0	2.2	7.2	9.2
- Myself and my spouse	89.4	89.9	84.1	85.9
- Others	1.0	0.9	0.0	0.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(199)</b>	<b>(228)</b>	<b>(69)</b>	<b>(142)</b>
<b>How many children do you want</b>				
- 0	0.5	-	0.0	-
- 1	5.5	8.2	10.1	9.9
- 2	31.2	28.6	29.0	37.3
- 3	37.2	42.9	29.0	30.3
- 4	11.1	7.8	15.9	9.9
- 5	10.6	10.0	10.1	2.8
- 6	2.0	1.3	1.4	2.8
- 7	0.5	0.4	0.4	0.7
- 8	0.5	-	0.4	-
- 9	0.5	0.0	1.4	0.7
- Don't know	0.5	0.0	1.4	2.1
- No response	0.0	0.9	1.4	3.5
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(199)</b>	<b>(231)</b>	<b>(69)</b>	<b>(142)</b>
<b>Mean desired family size</b>	<b>3.02</b>	<b>2.88</b>	<b>3.00</b>	<b>2.72</b>

**Table 7.9:** Percentage distribution and mean age of youngest child of currently married women age 15-49 from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Age of youngest child</b>				
- 0	8.5	8.7	5.8	13.4
- 1	6.5	16.0	27.5	9.9
- 2	14.6	11.7	17.4	12.0
- 3	11.6	8.2	5.8	5.6
- 4	12.6	9.1	13.0	7.7
- 5	11.1	5.2	7.2	5.6
- 6	9.5	7.8	2.9	11.3
- 7	4.5	3.9	2.9	9.2
- 8	4.0	6.9	4.3	2.1
- 9	4.0	3.9	0.0	2.8
- 10	4.5	4.8	1.4	2.1
- 11	1.0	2.2	0.0	2.8

**Table 7.9:** (Cont.)

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Age of youngest child</b>				
- 12	2.5	3.5	4.3	2.1
- 13	0.5	0.4	0.0	0.7
- 14	1.0	2.6	2.9	2.1
- 15	0.5	0.4	0.0	2.1
- 16	0.5	0.0	1.4	2.1
- 17	1.0	0.4	0.0	0.7
- 18	1.0	0.9	1.4	0.0
- 19	-	0.4	-	1.4
- 20 +	0.5	2.9	1.4	4.2
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(199)</b>	<b>(231)</b>	<b>(69)</b>	<b>(142)</b>
<b>Percent less than 5 years old</b>	<b>53.8</b>	<b>53.7</b>	<b>69.5</b>	<b>68.6</b>
<b>Mean age</b>	<b>5.0</b>	<b>5.48</b>	<b>4.3</b>	<b>6.03</b>

**Table 7.10:** Percentage distribution of planned pregnancy status of pregnancy of youngest child among currently married mothers from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Did you want to be pregnant with your youngest child</b>				
- Yes	96.0	92.7	89.9	91.3
- No	4.0	7.3	8.7	8.7
Don't know	0.0	-	1.4	-
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>
<b>(N)</b>	<b>(198)</b>	<b>(124)</b>	<b>(69)</b>	<b>(69)</b>

**Table 7.11:** Percentage distribution of country of birth of the youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Place of birth</b>				
- Myanmar	24.3	29.3	25.0	15.9
- Thailand	75.7	70.7	75.0	84.1
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(107)</b>	<b>(123)</b>	<b>(48)</b>	<b>(69)</b>



**Table 7.12:** Percentage distribution of place of delivery of the youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Place of delivery</b>				
- Government hospital	67.5	88.6	59.4	53.6
- Private hospital	13.3	3.8	6.3	0.0
- Private clinic	6.0	0.0	0.0	14.3
- Health center	2.4	1.3	6.3	25.0
- Health volunteer / health worker	0.0	0.0	15.6	1.8
- Traditional doctor	4.8	6.3	3.1	0.0
- Family planning clinic	0.0	0.0	0.0	1.8
- Others	6.0	0.0	9.4	3.6
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(83)</b>	<b>(124)</b>	<b>(48)</b>	<b>(69)</b>

**Table 7.13:** Percentage experiencing complications during or after delivery of the youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Experience complications</b>				
- Yes	11.4	6.7	5.9	31.0
- No	88.6	93.3	94.1	69.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(88)</b>	<b>(90)</b>	<b>(34)</b>	<b>(58)</b>

**Table 7.14:** Percentage distribution of attendance by medical doctor at delivery of the Youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Attendance by medical doctor at delivery</b>				
- Yes	76.1	83.3	86.1	94.8
- No	23.9	16.7	13.9	5.2
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(88)</b>	<b>(90)</b>	<b>(36)</b>	<b>(58)</b>

**Table 7.15:** Percentage distribution of get or seek any antenatal care for youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Did you get or seek any antenatal care for youngest child</b>				
- Yes	83.0	93.3	91.7	100.0
- No	17.0	6.7	8.3	0.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(88)</b>	<b>(90)</b>	<b>(36)</b>	<b>(58)</b>

**Table 7.16:** Percentage distribution of where get or seek for youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Where did you get or seek</b>				
- Government hospital	74.0	88.1	48.5	53.4
- Private hospital	2.7	6.0	6.1	-
- Private clinic	13.7	3.6	0.0	10.3
- Health center	9.6	1.2	9.1	29.3
- Traditional doctor	-	1.2	21.2	-
- Others	0.0	0.0	15.2	6.9
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(73)</b>	<b>(84)</b>	<b>(33)</b>	<b>(58)</b>

**Table 7.17:** Percentage distribution of not get or seek any antenatal care for youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Why you did not get or seek any antenatal care</b>				
- Too far	13.3	20.0	(1)	(1)
- No register	26.7	80.0		
- No vehicles	20.0	-		
- No health personnel provide services	6.7	-		
- Others	33.3	-	(2)	
<b>Total</b>	<b>100.0</b>	<b>100.0</b>		
<b>(N)</b>	<b>(15)</b>	<b>(11)</b>	<b>(3)</b>	<b>(1)</b>

**Table 7.18:** Percentage distribution of access to postpartum care after delivery of the youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Received postpartum care</b>				
- Yes	68.2	83.3	91.2	100.0
- No	31.8	16.7	8.8	0.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(88)</b>	<b>(90)</b>	<b>(34)</b>	<b>(58)</b>

**Table 7.19:** Percentage distribution of place of postpartum care services among currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Place of postpartum care</b>				
- Government hospital	71.9	82.7	58.1	53.6
- Private hospital	1.8	8.0	6.5	0.0
- Private clinic	11.8	1.3	0.0	10.7
- Health center	0.0	5.3	3.2	33.9
- Health volunteer / health worker	0.0	2.7	19.4	1.8
- Family planning clinic	1.8	0.0	3.2	0.0
- Others	3.6	0.0	9.7	0.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(57)</b>	<b>(75)</b>	<b>(31)</b>	<b>(58)</b>

**Table 7.20:** Percentage distribution of access to school among the youngest child of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Attend school</b>				
- Yes	1.3	61.1	23.1	93.8
- No	98.7	38.9	76.9	6.3
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(79)</b>	<b>(18)</b>	<b>(39)</b>	<b>(32)</b>

**Table 7.21:** Percentage distribution of reasons of no access to school among young children of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Reason for child not attending school</b>				
- Age not qualify	74.4	-	86.7	-
- Do not have right to enroll child	14.1	-	3.3	-
- Do not have Thai ID card	5.1	-	0.0	-
- Have financial problem	0.0	50.0	10.0	0.0
- Intend to enroll child in Myanmar	5.1	12.5	0.0	
- Too far	-	12.5	-	0.0
- Do not want to study	-	0.0	-	33.3
- No response	1.3	25.0	0.0	66.7
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(78)</b>	<b>(8)</b>	<b>(30)</b>	<b>(3)</b>

**Table 7.22:** Percentage distribution of attend school among young children of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Attend school</b>				
- Yes	-	56.0	-	93.8
- No	-	44.0	-	6.3
<b>Total</b>	-	<b>100</b>	-	<b>100.0</b>
<b>(N)</b>	-	<b>(25)</b>	-	<b>(32)</b>

**Table 7.23:** Percentage distribution of reason for child who is 5 to 12 years not attending school of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Reason for child not attending school</b>				
- Do not have Thai ID card	-	20.0	-	
- Have financial problem	-	40.0	-	
- Intend to enroll child in Myanmar	-	30.0	-	
- Too far	-	10.0	-	
- Do not want to study	-		-	(1)
<b>Total</b>	-	<b>100</b>	-	
<b>(N)</b>	-	<b>10</b>	-	<b>(1)</b>

**Table 7.24:** Percentage distribution of access of health services of young children of female currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Whether your child can go to health center or government hospital</b>				
- Yes	93.7	100.0	84.6	97.1
- No	6.3	0.0	15.4	2.9
<b>Total</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>	<b>100</b>
<b>(N)</b>	<b>(79)</b>	<b>(25)</b>	<b>(39)</b>	<b>(34)</b>

**Table 7.25:** Percentage distribution of reasons of no access to health services among young children of currently married women from Myanmar

	Provinces of Residence			
	Coastal Provinces		Chiengmai and Tak	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Reason for child not going to health center</b>				
- Do not have ID card	80.0	14.3	83.3	0.0
- Do not have money	20.0	28.6	16.7	0.0
- Child live in Myanmar	-	42.9	-	0.0
- Too far	-	1.0	-	0.0
- Not sick	-	0.0	-	100.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>(N)</b>	<b>(5)</b>	<b>(7)</b>	<b>(6)</b>	<b>(1)</b>

**Table 8.1:** General mass media exposure of migrants : television, radio and newspaper

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>During the last 1 month how often have you watched television</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- every days	42.9	35.6	40.1	67.9	42.4	41.5
- once a week	20.1	21.9	30.2	16.1	21.7	20.8
- once per 2/3 weeks	10.8	8.8	2.8	0.9	9.4	7.3
- not watch in last 4 weeks	5.7	5.2	2.8	1.8	5.2	4.5
- once a month	16.4	11.6	12.1	4.6	15.7	10.4
- not have TV	4.2	17.0	12.1	8.7	5.5	15.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2018)</b>	<b>(970)</b>	<b>(397)</b>	<b>(218)</b>	<b>(2415)</b>	<b>(1188)</b>
<b>Cambodia</b>						
- every days	10.5	26.6	42.1	56.7	13.1	28.9
- once a week	18.7	26.9	13.2	3.3	18.2	25.0
- once per 2/3 weeks	25.7	28.9	7.9	16.7	24.2	27.9
- not watch in last 4 weeks	-	8.0	-	0.0	-	7.4
- once a month	41.4	-	34.2	-	40.8	-
- not have TV	3.7	9.7	2.6	23.3	3.6	10.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(350)</b>	<b>(38)</b>	<b>(30)</b>	<b>(466)</b>	<b>(380)</b>

Table 8.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>During the last 1 month how often have you watched television</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- every days	54.3	28.7	25.7	35.6	40.9	31.8
- once a week	14.3	26.9	21.7	24.3	17.8	25.7
- once per 2/3 weeks	9.3	17.6	11.1	10.7	10.1	14.5
- not watch in last 4 weeks	0.0	12.5	1.8	4.5	0.8	8.9
- once a month	17.8	7.9	27.9	10.7	22.5	9.2
- not have TV	4.3	6.5	11.9	14.1	7.9	9.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(216)</b>	<b>(226)</b>	<b>(177)</b>	<b>(484)</b>	<b>(393)</b>
<b>Total (weighted)</b>						
- every days	40.2	32.1	32.8	48.4	38.5	36.2
- once a week	18.9	24.1	25.2	20.4	20.3	23.2
- once per 2/3 weeks	12.7	15.0	7.2	7.4	11.4	13.0
- not watch in last 4 weeks	3.9	7.5	2.2	3.2	3.5	6.4
- once a month	20.3	8.4	21.0	8.0	20.4	8.3
- not have TV	4.1	12.9	11.6	12.6	5.9	12.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2591)</b>	<b>(1531)</b>	<b>(775)</b>	<b>(525)</b>	<b>(3366)</b>	<b>(2056)</b>
<b>How often have listened radio</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- every days	16.8	6.8	3.3	4.1	14.6	6.3
- once a week	11.2	8.7	9.6	2.3	11.0	7.5
- once per 2/3 weeks	7.9	7.9	2.5	3.2	7.0	7.0
- not watch in last 4 weeks	4.8	2.6	0.5	2.3	4.1	2.5
- once a month	24.2	15.0	11.6	27.4	22.1	17.3
- not have TV	35.1	59.1	72.5	60.7	41.2	59.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2020)</b>	<b>(968)</b>	<b>(397)</b>	<b>(219)</b>	<b>(2417)</b>	<b>(1187)</b>
<b>Cambodia</b>						
- every days	2.3	0.6	10.8	3.8	3.0	0.8
- once a week	5.4	4.0	0.0	0.0	5.0	3.7
- once per 2/3 weeks	11.2	21.8	0.0	26.9	10.3	22.1
- not watch in last 4 weeks	-	9.2	-	0.0	-	8.5
- once a month	73.1	0.9	70.3	0.0	72.8	0.8
- not have TV	8.0	63.6	18.9	69.2	8.8	64.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(349)</b>	<b>(37)</b>	<b>(26)</b>	<b>(464)</b>	<b>(375)</b>

Table 8.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>How often have listened radio</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- every days	32.3	15.3	5.7	16.5	19.8	15.8
- once a week	12.2	20.4	13.7	13.6	12.9	17.3
- once per 2/3 weeks	9.4	12.5	7.5	6.3	8.5	9.7
- not watch in last 4 weeks	2.0	11.1	2.6	9.7	2.3	10.5
- once a month	29.9	15.7	26.4	9.7	28.3	13.0
- not have TV	14.2	25.0	44.1	44.3	28.3	33.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(254)</b>	<b>(216)</b>	<b>(227)</b>	<b>(176)</b>	<b>(481)</b>	<b>(392)</b>
<b>Total (weighted)</b>						
- every days	17.4	7.6	4.9	11.3	14.5	8.6
- once a week	10.6	10.7	11.2	8.8	10.7	10.2
- once per 2/3 weeks	8.6	11.8	4.9	6.0	7.8	10.3
- not watch in last 4 weeks	3.6	6.0	1.5	6.5	3.2	6.1
- once a month	32.2	12.4	21.6	15.8	29.8	13.2
- not have TV	27.6	51.6	55.8	51.5	34.1	51.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2584)</b>	<b>(1530)</b>	<b>(776)</b>	<b>(520)</b>	<b>(3360)</b>	<b>(2050)</b>
<b>How often read newspaper</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- every days	2.4	3.9	0.3	1.8	2.1	3.5
- once a week	6.4	7.8	8.6	8.3	6.8	7.9
- once per 2/3 weeks	9.6	8.2	2.3	4.6	8.4	7.6
- not watch in last 4 weeks	7.6	8.9	4.0	2.8	7.0	7.7
- once a month	38.4	27.1	14.6	43.6	34.5	30.2
- not have TV	35.6	44.1	70.2	39.0	41.3	43.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2013)</b>	<b>(959)</b>	<b>(396)</b>	<b>(218)</b>	<b>(2409)</b>	<b>(1177)</b>
<b>Cambodia</b>						
- every days	1.2	0.3	0.0	3.8	1.1	0.5
- once a week	5.4	8.9	0.0	0.0	5.0	8.3
- once per 2/3 weeks	5.6	23.6	14.3	26.9	6.3	23.8
- not watch in last 4 weeks	-	12.4	-	0.0	-	11.5
- once a month	84.3	1.4	80.0	0.0	84.0	1.3
- not have TV	3.5	53.4	5.7	69.2	3.7	54.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(348)</b>	<b>(35)</b>	<b>(26)</b>	<b>(462)</b>	<b>(374)</b>

Table 8.1: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>How often read newspaper</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- every days	2.3	10.2	2.7	2.3	2.5	6.7
- once a week	19.0	25.0	15.0	10.9	17.1	18.7
- once per 2/3 weeks	15.1	11.6	12.8	7.5	14.0	9.7
- not watch in last 4 weeks	8.9	10.2	0.9	19.0	5.2	14.1
- once a month	27.5	22.2	38.9	29.3	32.9	25.4
- not have TV	27.1	20.8	29.6	31.0	28.3	25.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(216)</b>	<b>(226)</b>	<b>(174)</b>	<b>(484)</b>	<b>(390)</b>
<b>Total (weighted)</b>						
- every days	2.2	4.7	1.4	2.1	2.1	4.1
- once a week	8.5	12.3	11.5	9.5	9.2	11.6
- once per 2/3 weeks	10.0	12.1	8.2	7.4	9.6	10.9
- not watch in last 4 weeks	6.7	9.9	2.2	12.2	5.7	10.5
- once a month	43.1	20.8	29.7	33.3	40.0	24.0
- not have TV	29.5	40.2	47.0	35.6	33.5	39.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2585)</b>	<b>(1520)</b>	<b>(771)</b>	<b>(517)</b>	<b>(3356)</b>	<b>(2037)</b>

Table 8.2: Exposure to Mass Media and IEC Intervention before moving to Thailand

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Before you move to Thailand did you know of HIV/AIDS</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	64.1	73.2	32.1	56.4	58.8	70.5
- No	35.9	26.8	67.9	43.6	41.2	29.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2021)</b>	<b>(2045)</b>	<b>(396)</b>	<b>(390)</b>	<b>(2417)</b>	<b>(2435)</b>
<b>Cambodia</b>						
- Yes	95.8	99.1	86.8	97.4	95.1	98.9
- No	4.2	0.9	13.2	2.6	4.9	1.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(428)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(466)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	74.8	59.0	67.4	57.1	71.3	58.1
- No	25.2	41.0	32.6	42.9	28.7	41.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(256)</b>	<b>(227)</b>	<b>(224)</b>	<b>(485)</b>	<b>(480)</b>
<b>Total (weighted)</b>						
- Yes	70.5	74.5	52.4	58.6	66.4	70.9
- No	29.5	25.5	47.6	41.4	33.6	29.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2592)</b>	<b>(2610)</b>	<b>(776)</b>	<b>(766)</b>	<b>(3368)</b>	<b>(3376)</b>



**Table 8.3:** Sources of knowledge about STIs / HIV/AIDS

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What are the sources from where you have come to know about HIV / AIDS / STIs</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Radio	20.2	13.3	2.6	2.7	17.6	11.7
- TV	25.5	31.5	32.1	25.4	26.4	30.6
- Cinema	4.5	3.9	2.0	3.0	4.1	3.8
- Newspaper	9.8	9.3	5.3	5.7	9.2	8.8
- Hording / Placard / Billboard/Wall writing	16.4	17.7	11.9	34.0	15.7	20.2
- Poster	20.2	27.4	13.9	48.4	19.3	30.6
- Bruchure / Pamphlets / Booklets	47.2	78.8	22.8	80.6	43.7	79.1
- Public Announcement	17.4	6.0	0.7	9.0	14.9	6.4
- Drama / Street Play / Puppet show	3.8	1.2	5.6	1.2	4.0	1.2
- Other	1.3	2.8	5.3	3.0	1.9	2.8
(N)	(1785)	(1843)	(302)	(335)	(2087)	(2178)
<b>Cambodia</b>						
- Radio	22.3	13.3	34.2	0.0	23.3	12.2
- TV	71.6	41.8	60.5	36.8	70.7	41.4
- Cinema	1.2	1.6	5.3	0.0	1.5	1.5
- Newspaper	15.4	1.4	26.3	0.0	16.3	1.3
- Hording / Placard / Billboard/Wall writing	12.1	6.1	7.9	5.3	11.7	6.0
- Poster	45.5	28.7	26.3	28.9	43.9	28.8
- Bruchure / Pamphlets / Booklets	16.6	83.6	21.1	86.8	17.0	83.9
- Public Announcement	6.4	6.8	2.6	15.8	6.1	7.5
- Drama / Street Play /Puppet show	3.1	0.7	0.0	0.0	2.8	0.6
- Other	5.0	12.6	21.1	0.0	6.3	11.6
(N)	(422)	(428)	(38)	(38)	(460)	(466)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Radio	46.4	29.2	40.5	19.2	43.7	24.6
- TV	45.9	51.2	65.1	41.1	54.7	46.6
- Cinema	26.2	9.2	36.4	2.3	30.8	6.0
- Newspaper	35.6	15.2	39.5	3.3	37.4	9.7
- Hording / Placard / Billboard/Wall writing	23.6	24.4	42.6	31.8	32.2	27.8
- Poster	27.9	8.4	40.5	32.2	33.6	19.4
- Bruchure / Pamphlets / Booklets	45.5	81.6	64.6	81.3	54.2	81.5
- Public Announcement	13.7	6.4	45.6	6.1	28.3	6.3
- Drama / Street Play / Puppet show	1.7	3.2	27.2	1.4	13.3	2.4
- Other	0.0	3.6	1.0	2.8	0.5	3.2
(N)	(233)	(250)	(195)	(214)	(428)	(464)

Table 8.3: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What are the sources from where you have come to know about HIV / AIDS / STIs</b>						
<b>Total (weighted)</b>						
- Radio	25.1	16.2	24.5	11.4	25.0	15.1
- TV	36.3	36.7	51.2	34.3	39.5	36.1
- Cinema	7.7	4.5	20.5	2.4	10.5	4.0
- Newspaper	15.2	9.2	24.6	4.1	17.2	8.0
- Hording / Placard / Billboard/Wall writing	17.0	17.1	28.0	31.4	19.3	20.3
- Poster	25.6	24.2	28.8	38.8	26.2	27.5
- Bruchure / Pamphlets / Booklets	42.1	80.1	45.1	81.3	42.7	80.3
- Public Announcement	15.0	6.2	24.7	7.7	17.1	6.5
- Drama / Street Play / Puppet show	3.3	1.5	16.9	1.3	6.2	1.5
- Other	1.6	4.5	3.8	2.7	2.1	4.1
<b>(N)</b>	<b>(2336)</b>	<b>(2423)</b>	<b>(640)</b>	<b>(700)</b>	<b>(2976)</b>	<b>(3123)</b>

Table 8.4: Experience on education and training on the spread of STIs / HIV/AIDS

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Anyone approach you to edu./train on spread of STIs/HIV/AIDS</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	21.1	49.7	15.4	68.8	20.2	52.8
- No	67.0	47.7	60.7	26.3	65.9	44.3
- Never heard before	11.9	2.6	23.9	4.9	13.9	3.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2022)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2419)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Yes	59.5	94.4	26.3	94.7	56.8	94.4
- No	39.1	5.6	73.7	5.3	41.9	5.6
- Never heard before	1.4	-	0.0	-	1.3	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(427)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(465)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	26.0	73.3	37.6	74.3	31.4	73.8
- No	64.3	26.4	48.2	25.7	56.8	26.0
- Never heard before	9.7	0.4	14.2	0.0	11.8	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(226)</b>	<b>(226)</b>	<b>(484)</b>	<b>(484)</b>
<b>Total (weighted)</b>						
- Yes	27.5	60.2	27.2	72.7	27.4	63.0
- No	62.5	38.0	54.9	25.1	60.7	35.1
- Never heard before	10.0	1.8	17.9	2.2	11.8	1.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2593)</b>	<b>(2613)</b>	<b>(776)</b>	<b>(770)</b>	<b>(3369)</b>	<b>(3383)</b>

Table 8.4: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Who are these individuals</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Government doctor	4.2	1.0	1.6	2.6	3.9	1.3
- Private Doctor	2.3	0.1	0.0	0.0	2.0	0.1
- Health Center Staff	28.1	6.1	13.1	18.2	26.2	8.6
- Village health volunteer	16.9	6.0	11.5	13.8	16.2	7.6
- FP clinic / STIs	2.6	0.9	1.6	8.6	2.5	2.5
- Friends / Peer educators	17.6	6.6	18.0	8.9	17.6	7.1
- Spouse	0.2	0.8	0.0	0.0	0.2	0.6
- Family member	0.2	0.9	0.0	0.7	0.2	0.9
- Visiting health workers	3.5	1.1	0.0	1.1	3.1	1.1
- Worker from NGO	8.2	33.4	6.6	27.5	8.0	32.1
- Mobile clinic	0.2	1.1	1.6	0.7	0.4	1.0
- Gov. mobile clinic	0.7	0.2	0.0	1.9	0.6	0.5
- NGO mobile	7.3	3.3	0.0	9.3	6.4	4.6
- NGO small group training	31.6	40.2	59.0	34.6	35.0	39.0
- Health volunteer for foreigners	30.4	23.9	0.0	39.4	26.6	27.2
- Other	0.7	0.1	0.0	0.0	0.6	0.1
(N)	(427)	(1016)	(61)	(269)	(488)	(1285)
<b>Cambodia</b>						
- Government doctor	3.9	0.2	10.0	0.0	4.2	0.2
- Private Doctor	1.2	-	0.0	-	1.1	-
- Health Center Staff	0.8	1.5	0.0	0.0	0.8	1.4
- Village health volunteer	0.4	0.2	0.0	0.0	0.4	0.2
- FP clinic / STIs	14.2	2.2	0.0	2.8	13.6	2.3
- Spouse	2.0	-	0.0	-	1.9	-
- Family member	0.4	0.2	0.0	0.0	0.4	0.2
- Health care provider for foreigners	3.5	3.0	10.0	2.8	3.8	3.0
- NGO Mobile clinic	0.0	-	20.0	-	0.8	-
- NGO small group training	3.1	1.0	30.0	0.0	4.2	0.9
- Health volunteer for foreigner	80.7	95.0	30.0	100.0	78.8	95.5
- Other	0.4	0.2	10.0	0.0	0.8	0.2
(N)	(254)	(404)	(10)	(36)	(264)	(440)
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Government doctor	1.5	13.2	11.8	6.0	7.2	9.8
- Private Doctor	1.5	-	4.7	-	3.3	-
- Health Center Staff	23.9	21.2	35.3	35.9	30.3	28.1
- Village health volunteer	7.5	9.0	25.9	20.4	17.8	14.3
- FP clinic / STIs	4.5	8.5	4.7	9.6	4.6	9.0
- Friends / Peer educators	3.0	16.9	15.3	18.6	9.9	17.7
- Spouse	0.0	1.6	4.7	1.8	2.6	1.7
- Family member	0.0	1.1	7.1	1.8	3.9	1.4
- Visiting health workers	0.0	2.1	9.4	0.6	5.3	1.4
- Health care provider for foreigners	20.9	58.2	37.6	25.1	30.3	42.7
- Mobile clinic	3.0	0.0	4.7	4.2	3.9	2.0
- Gov. mobile clinic	6.0	1.1	4.7	0.6	5.3	0.8
- NGO mobile	11.9	1.1	35.3	4.2	25.0	2.5
- NGO small group training	35.8	13.2	49.4	31.1	43.4	21.6
- Health volunteer for foreigner	49.3	54.5	42.4	41.3	45.4	48.3
- Other	0.0	-	1.2	-	0.7	-
(N)	(67)	(189)	(85)	(167)	(152)	(356)

Table 8.4: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Who are these individuals</b>						
<b>Total (weighted)</b>						
- Government doctor	3.7	3.4	9.0	4.3	4.9	3.6
- Private Doctor	1.4	0.1	3.3	0.0	1.8	0.0
- Health Center Staff	19.1	7.9	28.1	26.5	21.1	12.8
- Village health volunteer	10.3	5.6	21.3	16.5	12.8	8.5
- FP clinic / STIs	2.2	2.4	3.8	8.6	2.6	4.0
- Friends / Peer educators	14.2	7.8	15.2	13.6	14.4	9.3
- Spouse	0.7	0.8	3.3	0.9	1.3	0.8
- Family member	0.3	0.8	4.8	1.3	1.3	0.9
- Visiting health workers	1.8	1.1	6.6	0.7	2.9	1.0
- Health care provider for foreigners	8.8	31.8	28.6	24.9	13.3	30.0
- Mobile clinic	0.6	0.6	3.8	2.5	1.3	1.1
- Gov. mobile clinic	1.4	0.3	3.3	1.1	1.8	0.5
- NGO mobile	5.8	2.1	25.7	6.1	10.3	3.1
- NGO small group training	23.5	25.7	51.2	30.8	29.8	27.1
- Health volunteer for foreigner	49.2	46.3	31.3	43.8	45.1	45.7
- Other	0.4	0.1	1.4	0.0	0.7	0.1
(N)	(712)	(1571)	(211)	(559)	(923)	(2130)

Table 8.5: Languages used in the educating and training process about spread of STIs / HIV / AIDS

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What language did you receive in educating or training about spread of STIs / HIV / AIDS</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Burmese	91.1	94.9	82.8	94.9	90.1	94.9
- Khmer	0.1	-	0.0	-	0.1	-
- Thai	10.5	0.7	17.2	0.6	11.4	0.6
- Other language	1.3	4.4	0.5	4.5	1.2	4.4
(N)	(1360)	(1828)	(198)	(331)	(1558)	(2159)
<b>Cambodia</b>						
- Burmese	-	-	-	-	-	-
- Khmer	91.1	97.9	94.6	100.0	91.4	98.1
- Thai	9.9	0.9	8.1	0.0	9.7	0.9
- Other language	1.0	1.2	0.0	0.0	0.9	1.1
(N)	(416)	(428)	(37)	(38)	(453)	(466)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Burmese	93.8	77.7	87.5	74.4	90.7	76.2
- Khmer	-	-	-	-	-	-
- Thai	10.1	7.1	10.8	4.7	10.5	6.0
- Other language	1.1	15.1	1.7	20.9	1.4	17.8
(N)	(178)	(238)	(176)	(211)	(354)	(449)
<b>Total (weighted)</b>						
- Burmese	73.8	77.1	80.5	79.5	75.2	77.6
- Khmer	17.8	15.3	6.0	4.8	15.3	13.0
- Thai	10.3	1.8	12.8	2.7	10.8	2.0
- Other language	1.2	5.8	1.2	13.0	1.2	7.4
(N)	(1864)	(2388)	(514)	(691)	(2378)	(3079)

**Table 8.6:** Experience on education and training on the use of condoms

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Anyone approach you / your family to edu. on use of condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	22.9	50.5	15.9	72.8	21.9	53.8
- No	65.4	49.4	45.0	26.9	62.4	46.0
- Never heard before	11.7	0.1	39.1	0.3	15.7	0.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1751)</b>	<b>(1948)</b>	<b>(302)</b>	<b>(346)</b>	<b>(2053)</b>	<b>(2294)</b>
<b>Cambodia</b>						
- Yes	55.5	93.2	21.1	100.0	52.6	93.7
- No	42.7	6.8	68.4	0.0	44.8	6.3
- Never heard before	1.9		10.5		2.6	
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(422)</b>	<b>(427)</b>	<b>(38)</b>	<b>(33)</b>	<b>(460)</b>	<b>(460)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	28.9	77.4	35.9	67.3	32.1	72.6
- No	69.4	22.2	45.6	31.8	58.5	26.7
- Never heard before	1.7	0.4	18.5	0.9	9.4	0.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(232)</b>	<b>(252)</b>	<b>(195)</b>	<b>(223)</b>	<b>(427)</b>	<b>(475)</b>
<b>Total (weighted)</b>						
- Yes	29.2	61.5	26.8	71.0	28.6	63.6
- No	62.5	38.4	46.6	28.5	59.0	36.2
- Never heard before	8.4	0.1	26.6	0.6	12.3	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2305)</b>	<b>(2516)</b>	<b>(638)</b>	<b>(720)</b>	<b>(2943)</b>	<b>(3236)</b>
<b>Who are these individual</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Government doctor	4.2	0.6	4.2	1.6	4.2	0.8
- Private Doctor	1.2	0.0	0.0	0.8	1.1	0.2
- Health Center Staff	23.2	6.1	12.5	17.5	22.0	8.4
- Village health volunteer	10.2	6.8	4.2	14.3	9.6	8.4
- FP clinic / STIs	1.5	0.6	2.1	8.4	1.6	2.2
- Friends / Peer educators	20.7	8.0	16.7	11.2	20.3	8.7
- Spouse	0.2	0.7	0.0	0.4	0.2	0.6
- Family member	1.0	0.4	0.0	1.2	0.9	0.6
- Visiting health workers	4.5	1.4	0.0	4.8	4.0	2.1
- Health care provider for foreigners	7.7	16.4	2.1	15.9	7.1	16.3
- Mobile clinic	0.7	0.9	0.0	0.8	0.7	0.9
- Gov. mobile clinic	1.2	0.5	0.0	0.8	1.1	0.6
- NGO mobile	7.2	3.8	0.0	12.0	6.5	5.4
- NGO small group training	32.2	51.4	60.4	41.8	35.2	49.5
- Health volunteer for foreigner	31.9	24.8	4.2	34.7	29.0	26.8
- Other	1.5	0.2	0.0	0.0	1.3	0.2
<b>(N)</b>	<b>(401)</b>	<b>(982)</b>	<b>(48)</b>	<b>(251)</b>	<b>(449)</b>	<b>(1233)</b>

Table 8.6: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Who are these individual</b>						
<b>Cambodia</b>						
- Government doctor	3.4	0.5	12.5	0.0	3.7	0.5
- Private Doctor	0.9	0.3	0.0	0.0	0.8	0.2
- Health Center Staff	1.3	0.3	0.0	0.0	1.2	0.2
- Village health volunteer	0.9	0.8	0.0	0.0	0.8	0.7
- FP clinic / STIs	97.9	0.3	100.0	0.0	97.9	0.2
- Friends / Peer educators	3.8	1.3	0.0	0.0	3.7	1.2
- Spouse	0.4	-	0.0	-	0.4	-
- Family member	-	-	-	-	-	-
- Visiting health workers	0.4	0.3	0.0	0.0	0.4	0.2
- Health care provider for foreigners	1.3	3.3	12.5	0.0	1.7	3.0
- Mobile clinic	0.4	-	0.0	-	0.4	-
- Gov. mobile clinic	-	-	-	-	-	-
- NGO mobile	0.4	-	0.0	-	0.4	-
- NGO small group training	6.0	0.3	37.5	0.0	7.0	0.2
- Health volunteer for foreigner	83.3	96.2	50.0	100.0	82.2	96.5
- Other	1.7	-	0.0	-	1.7	-
(N)	(234)	(398)	(8)	(33)	(242)	(431)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Government doctor	4.5	7.7	15.7	6.7	10.2	7.2
- Private Doctor	6.0	1.0	5.7	0.7	5.8	0.9
- Health Center Staff	19.4	19.0	31.4	29.3	25.5	23.5
- Village health volunteer	9.0	13.8	17.1	22.7	13.1	17.7
- FP clinic / STIs	3.0	7.2	2.9	14.0	2.9	10.1
- Friends / Peer educators	1.5	22.1	11.4	21.3	6.6	21.7
- Spouse	1.5	1.5	5.7	4.7	3.6	2.9
- Family member	0.0	1.0	7.1	1.3	3.6	1.2
- Visiting health workers	1.5	3.1	7.1	0.7	4.4	2.0
- Health care provider for foreigners	22.4	7.2	37.1	6.7	29.2	7.0
- Mobile clinic	1.5	0.5	5.7	0.7	3.6	0.6
- Gov. mobile clinic	7.5	0.5	8.6	0.0	8.0	0.3
- NGO mobile	16.4	1.0	44.3	0.7	30.7	0.9
- NGO small group training	38.8	22.1	57.1	29.3	48.2	25.2
- Health volunteer for foreigner	47.8	69.2	45.7	55.3	46.7	63.2
- Other	1.5	1.0	0.0	0.0	0.7	0.6
(N)	(67)	(195)	(70)	(150)	(137)	(345)

Table 8.6: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Who are these individual</b>						
<b>Total (weighted)</b>						
- Government doctor	4.0	2.1	12.8	4.1	5.8	2.6
- Private Doctor	1.9	0.3	4.1	0.6	2.4	0.3
- Health Center Staff	15.9	7.6	25.6	22.5	17.9	11.3
- Village health volunteer	7.1	7.0	13.4	17.8	8.4	9.7
- FP clinic / STIs	1.3	2.0	2.3	10.8	1.5	4.2
- Friends / Peer educators	12.2	9.6	12.2	15.7	12.2	11.1
- Spouse	0.4	0.7	4.1	2.5	1.2	1.2
- Family member	0.4	0.5	5.2	1.2	1.4	0.6
- Visiting health workers	2.7	1.6	5.2	2.4	3.2	1.7
- Health care provider for foreigners	8.3	11.4	27.3	10.2	12.2	11.1
- Mobile clinic	0.7	0.6	4.1	0.6	1.4	0.6
- Gov. mobile clinic	1.9	0.4	5.8	0.4	2.7	0.4
- NGO mobile	6.7	2.3	31.4	5.5	11.7	3.1
- NGO small group training	25.3	33.5	57.0	33.1	31.8	33.4
- Health volunteer for foreigner	50.3	50.7	35.5	48.9	47.3	50.2
- Other	1.5	0.3	0.0	0.0	1.2	0.2
<b>(N)</b>	<b>(672)</b>	<b>(1547)</b>	<b>(172)</b>	<b>(511)</b>	<b>(844)</b>	<b>(2058)</b>

Table 8.7: Sources of knowledge about condom

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What are the sources from where you have come to know about condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Radio	13.8	12.6	4.3	2.9	12.8	11.2
- TV	20.1	31.0	27.2	21.4	20.8	29.6
- Cinema	3.6	3.5	0.5	2.6	3.2	3.4
- Newspaper	8.9	9.7	5.4	4.9	8.6	9.0
- Hording / Placard / Billboard / Wall writing	17.2	19.6	9.2	32.7	16.4	21.5
- Poster	21.3	30.7	10.3	54.0	20.2	34.1
- Bruchure / Pamphlets / Booklets	47.3	79.4	27.7	83.2	45.2	80.0
- Public Announcement	17.9	5.3	0.0	7.1	16.0	5.6
- Drama / Street Play / Puppet show	3.0	1.3	1.6	1.0	2.9	1.2
- Other	1.1	2.4	5.4	1.0	1.6	2.2
<b>(N)</b>	<b>(1546)</b>	<b>(1812)</b>	<b>(184)</b>	<b>(309)</b>	<b>(1730)</b>	<b>(2121)</b>
<b>Cambodia</b>						
- Radio	14.0	8.7	14.7	0.0	14.1	8.0
- TV	46.9	31.4	61.8	30.3	48.0	31.3
- Cinema	0.5	0.5	2.9	0.0	0.7	0.4
- Newspaper	9.4	1.4	29.4	0.0	10.9	1.3
- Hording / Placard / Billboard / Wall writing	10.6	7.5	11.8	3.0	10.7	7.2
- Poster	47.8	28.6	32.4	30.3	46.7	28.7
- Bruchure / Pamphlets / Booklets	19.8	83.6	20.6	87.9	19.9	83.9
- Public Announcement	4.3	6.8	0.0	12.1	4.0	7.2
- Drama / Street Play / Puppet show	1.5	1.2	0.0	0.0	1.3	1.1
- Other	5.8	7.3	5.9	3.0	5.8	7.0
<b>(N)</b>	<b>(414)</b>	<b>(427)</b>	<b>(34)</b>	<b>(33)</b>	<b>(448)</b>	<b>(460)</b>

Table 8.7: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What are the sources from where you have come to know about condom</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- Radio	43.9	24.2	44.0	19.0	43.9	21.8
- TV	45.2	50.4	56.6	37.9	49.9	44.7
- Cinema	25.9	7.7	37.7	2.8	30.7	5.4
- Newspaper	31.1	12.1	37.3	3.8	33.9	8.3
- Hording / Placard / Billboard / Wall writing	25.9	31.5	45.9	33.2	34.1	32.2
- Poster	30.7	8.1	49.1	29.9	38.2	18.1
- Bruchure / Pamphlets / Booklets	45.2	79.8	66.0	83.4	53.7	81.5
- Public Announcement	10.1	5.2	50.3	3.8	26.6	4.6
- Drama / Street Play / Puppet show	1.8	2.4	23.9	1.4	10.9	2.0
- Other	0.4	2.4	0.6	1.4	0.5	2.0
(N)	(228)	(248)	(159)	(211)	(387)	(459)
<b>Total (weighted)</b>						
- Radio	19.6	14.1	28.6	11.7	21.2	13.6
- TV	29.4	34.6	46.8	30.8	32.6	33.8
- Cinema	7.2	3.8	22.8	2.5	10.1	3.5
- Newspaper	13.2	8.8	26.1	4.0	15.5	7.8
- Hording / Placard / Billboard / Wall writing	17.7	19.9	31.1	31.7	20.1	22.5
- Poster	27.7	26.3	34.8	39.7	28.9	29.2
- Bruchure / Pamphlets / Booklets	42.2	80.1	50.0	83.5	43.6	80.9
- Public Announcement	14.1	5.5	29.9	5.5	17.0	5.5
- Drama / Street Play / Puppet show	2.5	1.5	14.7	1.2	4.7	1.4
- Other	1.8	3.2	2.6	1.3	1.9	2.8
(N)	(2112)	(2392)	(469)	(668)	(2581)	(3060)



**Table 8.8:** Language used in the educating and training process about the use of condom

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>What language did you receive in educating or training about using of condom</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Burmese	92.7	95.8	85.4	95.1	92.0	95.7
- Khmer	0.1	0.1	0.0	0.0	0.1	0.0
- Thai	10.1	0.6	13.1	1.0	10.4	0.6
- Other language	0.8	3.6	0.0	3.9	0.7	3.6
(N)	(1170)	(1799)	(130)	(307)	(1300)	(2106)
<b>Cambodia</b>						
- Burmese	0.2	0.7	0.0	0.0	0.2	0.7
- Khmer	92.8	98.6	100.0	100.0	93.3	98.7
- Thai	7.5	0.2	0.0	0.0	7.0	0.2
- Other language	-	0.5	-	0.0	-	0.4
(N)	(402)	(427)	(29)	(32)	(431)	(459)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Burmese	93.0	77.6	83.0	75.0	88.4	76.4
- Khmer	-	0.4	-	0.0	-	0.2
- Thai	11.1	5.9	12.2	3.9	11.6	5.0
- Other language	0.6	16.0	3.4	21.1	1.9	18.4
(N)	(171)	(237)	(147)	(204)	(318)	(441)
<b>Total (weighted)</b>						
- Burmese	73.4	77.6	78.3	80.0	74.3	78.1
- Khmer	19.5	15.7	6.3	4.3	17.0	13.2
- Thai	9.7	1.4	11.6	2.6	10.1	1.7
- Other language	0.6	5.3	2.3	13.1	0.9	7.0
(N)	(1674)	(2361)	(396)	(654)	(2070)	(3015)

**Table 8.9:** Experience of participating in campaign / meeting on STIs / HIV/AIDS

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever attend/participate in any campaign/meeting on STIs/HIV/AIDS</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	15.4	37.4	13.1	54.7	15.0	40.1
- No	84.3	62.4	86.9	45.0	84.7	59.6
- No responses	0.3	0.2	0.0	0.3	0.3	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(2026)	(2045)	(397)	(391)	(2423)	(2436)
<b>Cambodia</b>						
- Yes	50.9	81.3	21.1	92.1	48.5	82.2
- No	49.1	18.7	78.9	7.9	51.5	17.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(428)	(428)	(38)	(38)	(466)	(466)
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	24.0	69.4	30.4	65.6	27.0	67.6
- No	76.0	30.2	69.6	34.4	73.0	32.2
- No responses	-	0.4	-	0.0	-	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(258)	(258)	(227)	(227)	(485)	(485)
<b>Total (weighted)</b>						
- Yes	22.0	49.2	22.3	61.9	22.1	52.1
- No	77.7	50.6	77.7	38.0	77.7	47.7
- No responses	0.2	0.2	0.0	0.1	0.2	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(2597)	(2613)	(777)	(772)	(3374)	(3385)

Table 8.9: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Who ever attend/participate</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- myself	91.3	87.5	82.7	78.1	90.1	85.5
- my spouse	1.6	5.5	1.9	9.3	1.7	6.4
- self & spouse	1.6	2.2	3.8	5.6	1.9	3.0
- my family member	5.5	4.5	9.6	7.0	6.1	5.0
- other	0.0	0.3	1.9	0.0	0.3	0.2
(N)	(310)	(761)	(52)	(215)	(362)	(976)
<b>Cambodia</b>						
- myself	93.1	88.8	62.5	100.0	92.0	89.8
- my spouse	4.1	11.0	37.5	0.0	5.3	9.9
- self & spouse	1.4	0.3	0.0	0.0	1.3	0.3
- my family member	0.9	-	0.0	-	0.9	-
- other	0.5	-	0.0	-	0.4	-
(N)	(218)	(347)	(8)	(35)	(226)	(382)
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
- myself	87.1	81.6	85.5	65.1	86.3	74.1
- my spouse	3.2	6.7	2.9	6.7	3.1	6.7
- self & spouse	4.8	8.9	2.9	23.5	3.8	15.5
- my family member	4.8	2.8	8.7	4.7	6.9	3.7
(N)	(62)	(179)	(69)	(149)	(131)	(328)
<b>Total (weighted)</b>						
- myself	91.1	86.3	83.8	72.4	89.4	82.6
- my spouse	2.8	7.1	4.0	7.3	3.1	7.2
- self & spouse	2.1	3.4	2.9	15.0	2.3	6.6
- my family member	3.9	3.0	8.7	5.2	5.0	3.6
- other	0.2	0.2	0.6	0.0	0.3	0.1
(N)	(570)	(1282)	(173)	(479)	(743)	(1761)

Table 8.10: Migrants' reception of free medical check – up for STIs/HIV/AIDS

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Receive free medical check-up for STI-HIV/AIDS</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	17.7	33.5	50.3	57.0	23.1	37.3
- No	82.3	66.5	49.7	43.0	76.9	62.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(2018)	(2045)	(396)	(391)	(2414)	(2436)
<b>Cambodia</b>						
- Yes	7.7	1.2	15.8	7.9	8.4	1.7
- No	92.3	98.8	84.2	92.1	91.6	98.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	(427)	(428)	(38)	(38)	(465)	(466)

Table 8.10: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Receive free medical check-up for STI-HIV/AIDS</b>						
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	17.8	42.0	17.6	51.5	17.7	46.5
- No	82.2	58.0	82.4	48.5	82.3	53.5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(257)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(484)</b>
<b>Total (weighted)</b>						
- Yes	16.3	30.4	32.1	52.1	19.9	35.3
- No	83.7	69.6	67.9	47.9	80.1	64.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2589)</b>	<b>(2612)</b>	<b>(776)</b>	<b>(772)</b>	<b>(3365)</b>	<b>(3384)</b>

Table 8.11: Migrants' involvement in campaign on voluntary blood donation

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Ever come across campaigns on voluntary blood donation</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	11.7	13.8	10.6	15.1	11.5	14.0
- No	88.3	86.2	89.4	84.9	88.5	86.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2015)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2412)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Yes	21.8	11.7	31.6	5.3	22.6	11.2
- No	78.2	88.3	68.4	94.7	77.4	88.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(418)</b>	<b>(428)</b>	<b>(38)</b>	<b>(38)</b>	<b>(456)</b>	<b>(466)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	22.1	43.2	13.3	37.8	18.0	40.7
- No	77.9	56.8	86.7	62.2	82.0	59.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(257)</b>	<b>(226)</b>	<b>(225)</b>	<b>(484)</b>	<b>(482)</b>
<b>Total (weighted)</b>						
- Yes	15.0	18.5	12.9	26.3	14.5	20.3
- No	85.0	81.5	87.1	73.7	85.5	79.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2579)</b>	<b>(2611)</b>	<b>(776)</b>	<b>(769)</b>	<b>(3355)</b>	<b>(3380)</b>

Table 8.11: (Cont.)

	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>In the past year donated blood voluntarily</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
- Yes	4.9	5.6	2.0	1.5	4.4	4.9
- No	95.1	94.4	98.0	98.5	95.6	95.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2013)</b>	<b>(2045)</b>	<b>(397)</b>	<b>(391)</b>	<b>(2410)</b>	<b>(2436)</b>
<b>Cambodia</b>						
- Yes	3.1	0.2	2.7	0.0	3.0	0.2
- No	96.9	99.8	97.3	100.0	97.0	99.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(423)</b>	<b>(427)</b>	<b>(37)</b>	<b>(38)</b>	<b>(460)</b>	<b>(465)</b>
<b>Non Coastal Provinces</b>						
<b>Chiengmai and Tak</b>						
- Yes	8.9	25.2	3.1	12.8	6.2	19.4
- No	91.1	74.8	96.9	87.2	93.8	80.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
<b>Total (weighted)</b>						
- Yes	5.3	8.2	2.6	7.3	4.7	8.0
- No	94.7	91.8	97.4	92.7	95.3	92.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(2581)</b>	<b>(2612)</b>	<b>(776)</b>	<b>(772)</b>	<b>(3357)</b>	<b>(3384)</b>

Table 8.12: Knowledge any places providing counseling and testing for HIV

	Impact Survey 2008		
	Male	Female	Total
<b>Do you know any places providing counseling and testing for HIV</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Yes	52.7	57.3	53.4
- No	47.1	42.5	46.3
- No response	0.2	0.3	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>2045</b>	<b>391</b>	<b>2436</b>
<b>Cambodia</b>			
- Yes	39.7	71.1	42.3
- No	60.0	28.9	57.7
- No response	0.2	0.0	0.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>428</b>	<b>38</b>	<b>466</b>

Table 8.12: (Cont.)

	Impact Survey 2008		
	Male	Female	Total
<b>Do you know any places providing counseling and testing for HIV</b>			
<b>Non Coastal Provinces</b>			
<b>Chiangmai and Tak</b>			
- Yes	79.5	78.0	78.8
- No	19.0	19.4	19.2
- No response	1.6	2.6	2.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>258</b>	<b>227</b>	<b>485</b>
<b>Total (weighted)</b>			
- Yes	55.5	68.5	58.4
- No	44.1	30.1	40.9
- No response	0.5	1.4	0.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>2613</b>	<b>772</b>	<b>3385</b>
<b>Where can you get the test</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Government/private hospital	73.4	81.3	74.7
- Health center	10.5	9.8	10.4
- Private Clinic	0.8	0.0	0.6
- Hospital and Health center	4.2	2.2	3.8
- World Vision	9.1	5.4	8.4
- Health center and IOM	0.1	0.0	0.1
- Other	2.0	1.3	1.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>1055</b>	<b>224</b>	<b>1279</b>
<b>Cambodia</b>			
- Government/private hospital	75.3	100.0	78.7
- Health center	8.2	0.0	7.1
- Private Clinic	0.6	0.0	0.5
- Hospital and Health center	15.9	0.0	13.7
- World Vision	4.7	3.1	4.4
- Health center and IOM	0.0	0.0	0.0
- Other	0.0	0.0	0.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>170</b>	<b>27</b>	<b>197</b>
<b>Non Coastal Provinces</b>			
<b>Chiangmai and Tak</b>			
- Government/private hospital	57.7	49.2	53.7
- Health center	17.9	21.5	19.6
- Private Clinic	15.9	22.6	19.0
- Hospital and Health center	4.5	2.8	3.7
- World Vision	0.5	0.0	0.3
- Health center and IOM	0.0	0.0	0.0
- Other	3.5	4.0	3.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>201</b>	<b>177</b>	<b>378</b>
<b>Total (weighted)</b>			
- Government/private hospital	69.6	63.3	67.9
- Health center	12.1	16.3	13.2
- Private Clinic	4.5	13.2	6.9
- Hospital and Health center	5.5	2.5	4.7
- World Vision	6.0	1.9	4.9
- Health center and IOM	0.1	0.0	0.1
- Other	2.2	2.9	2.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>1423</b>	<b>529</b>	<b>1952</b>

Table 8.13: Experience with HIV testing

	Impact Survey 2008		
	Male	Female	Total
<b>Have you ever been tested for HIV</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Yes	20.1	20.5	20.2
- No	79.9	79.5	79.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>1077</b>	<b>224</b>	<b>1301</b>
<b>Cambodia</b>			
- Yes	4.7	18.5	6.6
- No	95.3	81.5	93.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>169</b>	<b>27</b>	<b>196</b>
<b>Non Coastal Provinces</b>			
<b>Chiengmai and Tak</b>			
- Yes	33.2	49.2	40.6
- No	66.8	50.8	59.4
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>205</b>	<b>177</b>	<b>382</b>
<b>Total (weighted)</b>			
- Yes	21.8	37.2	25.9
- No	78.2	62.8	74.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>1448</b>	<b>529</b>	<b>1977</b>
<b>For what reason have you get the HIV testing</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Being pregnant	0.9	50.0	9.5
- Applying for a job	33.8	8.7	29.4
- Getting married	2.3	0.0	1.9
- Having high-risk sexual partner	2.3	0.0	1.9
- Own sexual risk	5.6	2.2	5.0
- Partner is HIV positive	0.0	2.2	0.4
- Regular medical check-up	7.4	0.0	6.1
- Getting operations/treatment	2.3	10.9	2.8
- Blood donations	7.9	2.2	6.9
- Curiosity	24.1	15.2	22.5
- Compulsory testing	14.8	15.2	14.9
- Other	0.9	0.0	0.8
<b>(N)</b>	<b>216</b>	<b>46</b>	<b>262</b>
<b>Cambodia</b>			
- Being pregnant	12.5	20.0	15.4
- Applying for a job	0.0	40.0	15.4
- Getting married	0.0	20.0	7.7
- Own sexual risk	25.0	0.0	15.4
- Curiosity	50.0	0.0	30.8
- Compulsory testing	25.0	0.0	15.4
<b>(N)</b>	<b>8</b>	<b>8</b>	<b>13</b>

Table 8.13: (Cont.)

	Impact Survey 2008		
	Male	Female	Total
<b>For what reason have you get the HIV testing</b>			
<b>Non Coastal Provinces</b>			
<b>Chiengmai and Tak</b>			
- Being pregnant	5.9	46.0	28.4
- Applying for a job	51.5	18.4	32.9
- Getting married	22.1	5.7	12.9
- Having high-risk sexual partner	2.9	0.0	1.3
- Own sexual risk	4.4	1.1	2.6
- Partner is HIV positive	35.3	11.5	21.9
- Regular medical check-up	33.8	12.6	21.9
- Getting operations/treatment	2.9	0.0	1.3
- Blood donations	10.3	5.7	7.7
- Curiosity	5.9	10.3	8.4
(N)	<b>68</b>	<b>87</b>	<b>155</b>
<b>Total (weighted)</b>			
- Being pregnant	3.2	46.2	19.7
- Applying for a job	39.7	16.8	30.9
- Getting married	9.8	5.1	8.0
- Having high-risk sexual partner	2.5	0.0	1.6
- Own sexual risk	5.4	1.5	3.9
- Partner is HIV positive	0.0	0.5	0.2
- Regular medical check-up	17.8	8.7	14.3
- Getting operations/treatment	17.5	10.2	14.6
- Blood donations	2.5	2.0	2.3
- Curiosity	19.4	7.6	14.8
- Compulsory testing	11.7	11.2	11.5
- Other	0.6	0.0	0.4
(N)	<b>315</b>	<b>197</b>	<b>512</b>

Table 8.14: Who were tested received pre-test counseling

	Impact Survey 2008		
	Male	Female	Total
<b>Did you get pre-test counseling before the blood test</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Yes	44.7	80.0	50.8
- No	55.3	20.0	49.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	<b>217</b>	<b>45</b>	<b>262</b>
<b>Cambodia</b>			
- Yes	100.0	100.0	100.0
- No	-	-	-
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
(N)	<b>8</b>	<b>5</b>	<b>13</b>

Table 8.14: (Cont.)

	Impact Survey 2008		
	Male	Female	Total
<b>Did you get pre-test counseling before the blood test</b>			
<b>Non Coastal Provinces</b>			
<b>Chiangmai and Tak</b>			
- Yes	77.9	69.4	73.2
- No	22.1	30.6	29.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>68</b>	<b>85</b>	<b>153</b>
<b>Total (weighted)</b>			
- Yes	58.4	72.4	63.7
- No	41.6	27.6	36.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>315</b>	<b>192</b>	<b>507</b>

Table 8.15: Latest HIV test take place

	Impact Survey 2008		
	Male	Female	Total
<b>Where did your latest HIV test take place</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Government hospital	82.0	93.5	84.0
- Health center	7.0	2.2	6.1
- Family Planning Clinic	0.0	2.2	0.4
- Anonymous Clinic (Thai Red Cross)	0.5	0.0	0.4
- Private hospital	2.3	2.2	2.3
- Private Clinic	0.5	0.0	0.4
- Other government service centers	1.8	0.0	1.5
- Other private service centers	2.3	0.0	1.9
- Others	3.6	0.0	3.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>216</b>	<b>46</b>	<b>262</b>
<b>Cambodia</b>			
- Government hospital	37.5	80.0	53.8
- Health center	25.0	20.0	23.1
- Private Clinic	25.0	0.0	15.4
- Other private service centers	12.5	0.0	7.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>8</b>	<b>5</b>	<b>13</b>



Table 8.15: (Cont.)

	Impact Survey 2008		
	Male	Female	Total
<b>Where did your latest HIV test take place</b>			
<b>Non Coastal Provinces</b>			
<b>Chiangmai and Tak</b>			
- Government hospital	85.3	71.3	77.4
- Health center	5.9	13.7	10.3
- Family Planning Clinic	0.0	1.1	0.6
- Private hospital	1.5	2.3	1.9
- Private Clinic	1.5	6.9	4.5
- Other private service centers	5.9	0.0	2.6
- Other	0.0	4.6	2.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>68</b>	<b>87</b>	<b>155</b>
<b>Total (weighted)</b>			
- Government hospital	82.5	76.1	80.1
- Health center	7.0	11.7	8.8
- Family Planning Clinic	0.0	1.5	0.6
- Anonymous Clinic (Thai Red Cross)	0.3	0.0	0.2
- Private hospital	1.9	2.0	2.0
- Private Clinic	1.3	5.1	2.7
- Other government service centers	1.0	0.0	0.6
- Other private service centers	3.8	0.0	2.3
- Other	2.2	3.6	3.3
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>315</b>	<b>197</b>	<b>512</b>

Table 8.16: Migrant received of result latest HIV test

	Impact Survey 2008		
	Male	Female	Total
<b>You received the result of your latest HIV test</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Yes	85.7	88.6	86.2
- No	14.3	11.4	13.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>217</b>	<b>44</b>	<b>261</b>
<b>Cambodia</b>			
- Yes	87.5	(4)	91.7
- No	12.5	-	8.3
<b>Total</b>	<b>100</b>	<b>-</b>	<b>100</b>
<b>(N)</b>	<b>8</b>	<b>(4)</b>	<b>12</b>
<b>Non Coastal Provinces</b>			
<b>Chiangmai and Tak</b>			
- Yes	95.4	98.7	97.2
- No	4.6	1.3	2.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>65</b>	<b>76</b>	<b>141</b>
<b>Total (weighted)</b>			
- Yes	89.4	96.6	92.0
- No	10.6	3.4	8.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>310</b>	<b>175</b>	<b>485</b>

**Table 8.17:** Migrant would be referred to in case it turned out that they were HIV positive

Impact Survey 2008			
	Male	Female	Total
<b>Where you would be referred to in case it turned out that you were HIV positive</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Yes	23.7	28.2	24.4
- No	76.3	71.8	75.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>207</b>	<b>39</b>	<b>246</b>
<b>Cambodia</b>			
- Yes	0.0	0.0	0.0
- No	100.0	100.0	100.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>8</b>	<b>5</b>	<b>13</b>
<b>Non Coastal Provinces</b>			
<b>Chiengmai and Tak</b>			
- Yes	35.7	17.5	25.0
- No	64.3	82.5	75.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>56</b>	<b>80</b>	<b>136</b>
<b>Total (weighted)</b>			
- Yes	27.3	19.1	24.1
- No	72.7	80.9	75.9
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>286</b>	<b>178</b>	<b>464</b>

**Table 8.18:** Experience of heard about the antiretroviral treatment for PWHA

Impact Survey 2008			
	Male	Female	Total
<b>Have you ever heard about the antiretroviral treatment for PWHA</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Yes	49.4	59.3	51.0
- No	50.6	40.7	49.0
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>1971</b>	<b>369</b>	<b>2340</b>
<b>Cambodia</b>			
- Yes	82.4	88.6	82.8
- No	17.6	11.4	17.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>425</b>	<b>35</b>	<b>460</b>
<b>Non Coastal Provinces</b>			
<b>Chiengmai and Tak</b>			
- Yes	85.5	84.0	84.8
- No	14.5	16.0	15.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>255</b>	<b>212</b>	<b>467</b>
<b>Total (weighted)</b>			
- Yes	60.6	73.2	63.4
- No	39.4	26.8	36.6
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>2541</b>	<b>742</b>	<b>3265</b>

**Table 8.19:** Source or from whom have migrant learn about the treatment

	Impact Survey 2008		
	Male	Female	Total
<b>From what source or from whom have you learn about the treatment</b>			
<b>Coastal Provinces</b>			
<b>Myanmar</b>			
- Radio	4.9	1.4	4.3
- TV	7.3	6.4	7.1
- Magazine	7.1	2.7	6.3
- Poster	4.4	4.1	4.4
- School	1.6	0.5	1.4
- Family member/relatives	3.7	4.6	3.9
- Friends	30.2	10.5	26.6
- Neighbors	6.7	15.5	8.3
- Pamphlets	31.1	19.6	29.0
- Husband/Wife or Cohabited partner or Regular partner/ Non-regular partner	1.3	0.5	1.2
- Boy/girlfriend	0.2	0.0	0.2
- Male/female sex worker	1.6	1.4	1.6
- Health service provider for foreigners	27.3	27.9	27.4
- Health volunteers for foreigners	17.6	41.1	21.9
- Medical doctor	4.8	8.7	5.5
- Nurse or health authorities	2.8	5.9	3.4
- Health service provider	3.4	4.6	3.6
- Employer	0.2	0.0	0.2
- Workplace	1.1	0.5	1.0
- Internet	0.1	0.0	0.1
- Meeting/seminar	5.1	6.8	5.4
- Other	1.3	1.8	1.4
(N)	<b>974</b>	<b>219</b>	<b>1193</b>
<b>Cambodia</b>			
- Radio	7.1	0.0	6.6
- TV	26.6	16.1	25.7
- Magazine	14.9	0.0	13.6
- Poster	3.7	6.5	3.9
- School	2.0	0.0	1.8
- Family member/relatives	3.1	6.5	3.4
- Friends	32.3	41.9	33.1
- Neighbors	7.1	6.5	7.1
- Pamphlets	4.9	6.5	5.0
- Male/female sex worker	0.9	0.0	0.8
- Health service provider for foreigners	2.9	3.2	2.9
- Health volunteers for foreigners	83.1	67.7	81.9
- Medical doctor	1.4	3.2	1.6
- Nurse or health authorities	0.6	0.0	0.5
- Meeting/seminar	0.3	0.0	0.3
(N)	<b>350</b>	<b>31</b>	<b>381</b>

Table 8.19: (Cont.)

	Impact Survey 2008		
	Male	Female	Total
<b>From what source or from whom have you learn about the treatment</b>			
<b>Non Coastal Provinces</b>			
<b>Chiangmai and Tak</b>			
- Radio	19.3	12.9	16.4
- TV	18.3	9.0	14.1
- Magazine	11.0	2.8	7.3
- Poster	3.7	5.1	4.3
- School	1.4	0.6	1.0
- Family member/relatives	0.5	2.2	1.3
- Friends	13.8	14.6	14.1
- Neighbors	1.8	6.7	4.0
- Pamphlets	35.3	41.6	38.1
- Husband/Wife or Cohabited partner or Regular partner/ Non-regular partner	1.4	1.7	1.5
- Boy/girlfriend	0.0	0.6	0.3
- Male/female sex worker	1.4	1.1	1.3
- Health service provider for foreigners	19.7	12.9	16.7
- Health volunteers for foreigners	54.6	45.5	50.5
- Medical doctor	4.1	9.0	6.3
- Nurse or health authorities	5.0	3.9	4.5
- Health service provider	7.3	7.3	7.3
- Employer	0.0	0.6	0.3
- Workplace	4.1	0.0	2.3
- Meeting/seminar	12.4	9.0	10.9
- Other	0.0	0.6	0.3
(N)	<b>218</b>	<b>178</b>	<b>396</b>
<b>Total (weighted)</b>			
- Radio	8.9	8.1	8.7
- TV	13.8	8.5	12.5
- Magazine	9.6	2.6	7.8
- Poster	4.1	4.7	4.3
- School	1.6	0.6	1.4
- Family member/ relatives	2.8	3.2	2.9
- Friends	26.5	14.5	23.5
- Neighbors	5.6	9.8	6.7
- Pamphlets	26.9	31.9	28.2
- Husband/Wife or Cohabited partner or Regular partner/ Non-regular partner	1.1	1.1	1.1
- Boy/girlfriend	0.1	0.4	0.2
- Male/female sex worker	1.4	1.1	1.4
- Health service provider for foreigners	20.6	17.8	19.9
- Health volunteers for foreigners	39.8	45.1	41.1
- Medical doctor	4.0	8.5	5.1
- Nurse or health authorities	2.9	4.5	3.3
- Health service provider	3.7	5.9	4.3
- Employer	0.1	0.4	0.2
- Workplace	1.6	0.2	1.3
- Internet	0.1	0.0	0.0
- Meeting/seminar	6.0	7.7	6.4
- Other	0.7	0.9	0.8
(N)	<b>1538</b>	<b>530</b>	<b>2068</b>

**Table 9.1:** Knowledge of service outlets, organizations, or personnel, and knowledge of the service providers name

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak			Male	Female	Total
	Male	Female	Total	Male	Female	Total	Male	Female	Total			
Do you know any unit or organization in your community providing information and services related to HIV/AIDS and condom use												
- Yes	68.2	79.8	70.1	92.8	94.7	92.9	91.5	81.9	87.0	75.8	81.6	77.1
- Do not know organization but know health care provider for foreigners/ health volunteer for foreigners	1.8	1.3	1.7	-	-	-	1.6	10.6	5.8	1.5	6.0	2.5
- Do not know both organization and health care provider for foreigners/ health volunteer for foreigners	30.0	18.9	28.2	7.2	5.3	7.1	7.0	7.5	7.2	22.8	12.4	20.4
<b>Total (N)</b>	<b>100 (2045)</b>	<b>100 (391)</b>	<b>100 (2436)</b>	<b>100 (428)</b>	<b>100 (38)</b>	<b>100 (466)</b>	<b>100 (258)</b>	<b>100 (227)</b>	<b>100 (485)</b>	<b>100 (2612)</b>	<b>100 (772)</b>	<b>100 (3384)</b>
If know , do you know the name or address works of such unit or organization												
- Yes	93.1	98.4	94.0	99.5	100.0	99.5	99.2	97.1	98.2	95.4	97.8	96.0
- No	6.9	1.6	6.0	0.5	0.0	0.5	0.8	2.9	1.8	4.6	2.2	4.0
<b>Total (N)</b>	<b>100 (1431)</b>	<b>100 (316)</b>	<b>100 (1747)</b>	<b>100 (397)</b>	<b>100 (36)</b>	<b>100 (433)</b>	<b>100 (240)</b>	<b>100 (209)</b>	<b>100 (449)</b>	<b>100 (2018)</b>	<b>100 (673)</b>	<b>100 (2691)</b>
If yes, please provide the name or address works of the unit or organization												
- CARE / Raksthai Foundation	49.5	70.2	53.4	56.9	69.4	57.9	0.9	1.0	0.9	40.4	33.5	38.7
- International Organization for Migration : IOM	1.1	3.8	1.6	-	-	-	-	-	-	0.6	1.5	0.9
- Labour Rights Promotion Network : LPN	0.2	0.0	0.2	-	-	-	-	-	-	0.2	0.0	0.1
- Health Center	0.2	2.2	0.5	1.3	0.0	1.2	-	-	-	0.3	0.9	0.5
- Center for AIDS Rights : CAR	0.8	1.0	0.9	41.9	30.6	40.9	-	-	-	8.0	1.9	6.5
- World Vision	46.0	21.5	41.3	-	-	-	43.4	39.6	41.7	37.1	30.1	35.4
- MAP Foundation	-	-	-	-	-	-	54.0	55.8	54.9	11.6	29.7	16.1
- UNICEF	0.1	0.0	0.1	-	-	-	-	-	-	0.1	0.0	0.0
- Others	2.6	1.3	2.3	-	-	-	1.7	3.5	2.6	1.9	2.3	1.8
<b>Total (N)</b>	<b>100 (1331)</b>	<b>100 (312)</b>	<b>100 (1643)</b>	<b>100 (394)</b>	<b>100 (36)</b>	<b>100 (430)</b>	<b>100 (235)</b>	<b>100 (197)</b>	<b>100 (432)</b>	<b>100 (1920)</b>	<b>100 (647)</b>	<b>100 (2567)</b>

**Table 9.2:** Duration of knowledge of the organization or service provider in the neighborhood

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>How long have you known the organizations in this area</b>												
- Less than 6 months	22.1	12.3	20.3	16.1	22.9	16.7	8.8	5.3	7.1	18.3	8.9	16.0
- 1 year	22.1	15.5	20.9	38.5	45.7	39.1	20.4	23.1	21.7	24.6	21.0	23.7
- 2 year	20.0	24.7	20.9	24.2	14.3	23.4	25.0	34.1	29.2	21.8	29.4	23.7
- 3 year	18.1	25.6	19.5	8.1	8.6	8.1	26.3	22.1	24.3	18.1	23.0	19.3
- 4 year	11.2	13.9	11.7	4.8	0.0	4.4	14.2	9.1	11.8	10.7	10.7	10.7
- More than 5 years	5.3	7.0	5.6	4.5	5.7	4.6	4.2	5.3	4.7	4.9	6.0	5.2
- More than 6 months but Less than 1 year	0.6	0.3	0.5	3.8	2.9	3.7	-	-	-	1.0	0.3	0.8
- Cannot remember	0.6	0.6	0.6	-	-	-	1.3	0.5	0.9	0.6	0.4	0.6
- Don't know	0.1	0.0	0.1	-	-	-	0.0	0.5	0.2	0.0	0.3	0.1
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>(N)</b>	<b>(1424)</b>	<b>(316)</b>	<b>(1740)</b>	<b>(397)</b>	<b>(35)</b>	<b>(432)</b>	<b>(240)</b>	<b>(208)</b>	<b>(448)</b>	<b>(2012)</b>	<b>(671)</b>	<b>(2683)</b>
<b>Mean</b>	<b>1.72</b>	<b>2.07</b>	<b>1.79</b>	<b>1.43</b>	<b>1.13</b>	<b>1.40</b>	<b>2.13</b>	<b>2.01</b>	<b>2.08</b>	<b>1.76</b>	<b>2.00</b>	<b>1.82</b>

**Table 9.3:** Source or channel of access to knowledge about the local service provider

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>How did you know the organizations</b>												
- Know by self	19.3	18.6	19.1	13.9	52.8	17.1	20.5	7.6	14.5	18.6	14.3	17.5
- From staff of the unit / organization in the area	57.4	53.6	56.7	83.6	88.9	84.1	61.9	65.7	63.7	63.0	62.2	62.8
- Friends recommend	25.4	33.4	26.8	32.0	41.7	32.8	29.3	38.6	33.6	27.4	36.8	29.7
- Family member/relatives recommend	3.1	8.2	4.0	0.3	0.0	0.2	4.2	3.8	4.0	2.8	5.5	3.5
- Governmental health service provider recommend	1.1	6.0	1.9	0.3	0.0	0.2	3.8	6.2	4.9	1.5	5.8	2.6
- Printed media of organization in the area	22.3	18.6	21.7	0.3	2.8	0.5	31.8	40.5	35.9	20.5	30.0	22.9
- Other	0.4	0.6	0.4	-	-	-	0.0	0.5	0.2	0.2	0.4	0.3
<b>(N)</b>	<b>(1428)</b>	<b>(317)</b>	<b>(1745)</b>	<b>(397)</b>	<b>(36)</b>	<b>(433)</b>	<b>(239)</b>	<b>(210)</b>	<b>(449)</b>	<b>(2010)</b>	<b>(6710)</b>	<b>(2681)</b>

**Table 9.4:** Experience of using the services of the local organization or service provider

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak			Male	Female	Total
	Male	Female	Total	Male	Female	Total	Male	Female	Total			
Have you ever visited drop-in center/clinic/ organization in the area												
- Yes	38.1	71.0	44.1	99.5	88.9	98.6	67.8	57.1	62.8	54.8	64.3	57.2
- No	61.9	29.0	55.9	0.5	11.1	1.4	32.2	42.9	37.2	45.2	35.7	42.8
Total	100	100	100	100	100	100	100	100	100	100	100	100
(N)	(1430)	(317)	(1747)	(395)	(36)	(431)	(239)	(210)	(449)	(2013)	(676)	(2689)

**Table 9.5:** Services used by the migrants

	Coastal Provinces						Non Coastal Provinces			Total (weighted)			
	Myanmar			Cambodia			Chiengmai and Tak			Male	Female	Total	
	Male	Female	Total	Male	Female	Total	Male	Female	Total				
If yes, could you please specify every service you ever used in the organization													
- general health care	56.1	71.1	60.5	46.6	50.0	46.8	55.2	56.3	55.7	52.9	62.6	55.6	
- STI screening and treatment	11.2	7.6	10.2	3.8	0.0	3.5	17.2	21.0	18.8	10.4	13.6	11.3	
- Counseling on STI	34.8	20.0	30.5	72.9	34.4	70.0	47.2	42.0	45.0	50.0	31.5	44.8	
- Counseling on HIV and AIDS	45.5	28.4	40.5	68.9	46.9	67.2	62.6	63.0	62.8	57.2	46.2	54.1	
- Antenatal care	6.4	12.4	8.2	5.1	6.3	5.2	2.5	12.6	6.7	5.0	12.0	7.0	
- Post-partum care	7.2	18.2	10.4	0.5	6.3	0.9	1.2	10.1	5.0	3.5	13.6	6.4	
- Referring to government hospital	8.1	5.8	7.4	2.5	0.0	2.3	3.7	5.0	4.3	5.2	5.1	5.2	
- Condom distribution	22.8	16.4	21.0	47.8	6.3	44.7	42.3	32.8	38.3	35.7	23.6	32.3	
- Injection	6.3	12.4	8.1	0.8	3.1	0.9	6.1	11.8	8.5	4.5	11.5	6.5	
- Sterilization	0.6	0.9	0.7	-	-	-	0.6	1.7	1.1	0.4	1.2	0.6	
- Temporarily shelter	3.1	1.8	2.7	0.3	0.0	0.2	1.8	0.8	1.4	1.9	1.2	1.7	
- Help related to language	3.7	4.9	4.0	1.3	28.1	3.3	3.7	2.5	3.2	2.9	5.3	3.6	
- Thai language practices	1.3	1.3	1.3	3.0	0.0	2.8	-	-	-	1.5	0.7	1.3	
- Legal help	0.7	1.8	1.0	3.0	6.3	3.3	1.2	4.2	2.5	1.5	3.2	2.0	
- Counseling and referring	2.8	2.2	2.6	1.8	3.1	1.9	3.7	5.0	4.3	2.7	3.7	3.0	
- Others	5.2	2.2	4.3	1.3	6.3	1.6	0.6	5.0	2.5	2.8	3.9	3.1	
(N)	(543)	(225)	(768)	(395)	(32)	(427)	(163)	(119)	(282)	(1105)	(433)	(1538)	

**Table 9.6:** Services which the migrants would like to see added

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Do you expect any other services												
- Yes	36.5	46.9	39.5	7.1	0.0	6.6	35.4	42.6	38.4	27.0	41.6	31.1
- No	55.2	46.9	52.7	71.4	84.4	72.4	56.5	47.0	52.5	60.7	49.4	57.5
- Don't know	8.3	6.3	7.7	21.5	15.6	21.1	8.1	10.4	9.1	12.4	8.9	11.4
Total	100	100	100	100	100	100	100	100	100	100	100	100
(N)	(540)	(224)	(764)	(395)	(32)	(427)	(161)	(115)	(276)	(1098)	(425)	(1523)
If yes, what kind of service you would recommend												
- Rights of migrant workers / law training on the right of children / finding methods for training right of migrant workers / training on nursing and rights	23.0	45.7	30.5	10.9	0.0	10.5	4.4	7.1	5.6	8.9	3.9	7.3
- Teaching Cambodian language of migrant's children	-	-	-	5.5	0.0	5.2	4.4	0.0	2.4	2.4	0.0	1.6
- Health status / training on nursing	15.5	11.2	14.1	4.5	0.0	4.3	16.2	17.9	16.9	13.2	14.1	13.5
- good services / need good services as long as possible	0.8	0.9	0.8	-	-	-	-	-	-	0.5	0.5	0.5
- Provide blood test	12.6	44.8	23.1	-	-	-	-	-	-	6.1	21.8	11.3
- Need more trainings	9.2	5.2	7.9	-	-	-	2.9	3.6	3.2	5.4	4.4	5.1
- Referral service to hospital	1.3	2.6	1.7	-	-	-	-	-	-	0.7	1.5	1.0
- Need woman officer to work in community	0.8	3.4	1.7	-	-	-	-	-	-	0.5	1.5	0.8
- Provide counseling before moving to work in the other places	0.8	0.0	0.6	-	-	-	1.5	0.0	0.8	0.7	0.0	0.5
- Training on STIs	0.8	0.9	0.8	0.9	0.0	0.9	1.5	0.0	0.8	0.9	0.5	0.8
- Provide knowledge on HIV/AIDS	3.3	0.9	2.5	-	-	-	2.9	0.0	1.6	2.4	0.5	1.7
- Need more health centers	2.1	0.0	1.4	-	-	-	0.0	3.6	1.6	0.9	1.5	1.1
- Need treatment for emergency	0.4	0.0	0.3	-	-	-	-	-	-	0.2	0.0	0.2



Table 9.6: (Cont.)

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Male	Myanmar Female	Total	Male	Cambodia Female	Total	Male	Female	Total	Male	Female	Total
<b>If yes, what kind of service you would recommend</b>												
- Need patient room	0.4	0.0	0.3	-	-	-	-	-	-	0.2	0.0	0.2
- Provide more mass media / Provide gift / Continuously provide printing media / Provide CD / Provide knowledge book	3.7	5.2	4.3	-	-	-	11.8	8.9	10.5	5.2	6.8	5.7
- Financial assistance / Provide assistance to disabled persons / Provide education / Provide occupation / Provide medical doctor / Provide safety / Suggestion for doing ID card / Provide medicine / Free treatment	14.2	7.9	12.1	-	-	-	11.9	3.6	8	10.4	5.9	9.1
- Provide knowledge on diseases (hemorrhagic fever /tuberculosis (TB) / cancer)	0.8	2.6	1.5	0.9	0.0	0.9	1.5	1.8	1.6	1.8	8.3	4.0
- Provide free medicine of anti-virus AIDS	-	-	-	-	-	-	2.9	7.1	4.8	1.6	0.0	1.1
- Provide free transportation for patient	0.8	0.0	0.6	-	-	-	0.0	1.8	0.8	0.5	1.0	0.6
- Provide free teaching computer	-	-	-	-	-	-	1.5	1.8	1.6	0.5	1.0	0.6
- Provide knowledge on using condom	-	-	-	-	-	-	1.5	0.0	0.8	0.5	0.0	0.3
- Provide knowledge on life skill	-	-	-	-	-	-	2.9	7.1	4.8	0.7	3.4	1.6
- Provide knowledge in community	0.4	1.7	0.8	-	-	-	5.9	5.4	5.6	1.9	3.4	2.4
- Taking care of person infected HIV/ AIDS	0.8	0.0	0.6	-	-	-	0.0	1.8	0.8	0.5	1.0	0.6
- Provide enough condom	0.4	0.0	0.3	-	-	-	1.5	1.8	1.6	0.7	1.0	0.8
- Promotion family planning	0.8	0.0	0.6	-	-	-	-	-	-	0.5	0.0	0.3
- Follow up training	0.4	0.0	0.3	-	-	-	-	-	-	0.2	0.0	0.2
- Don't know	18.8	12.1	16.6	77.3	100.0	78.3	19.1	21.4	20.2	32.0	18.4	27.6
<b>Total (N)</b>	<b>100 (239)</b>	<b>100 (116)</b>	<b>100 (355)</b>	<b>100 (110)</b>	<b>100 (5)</b>	<b>100 (115)</b>	<b>100 (68)</b>	<b>100 (56)</b>	<b>100 (124)</b>	<b>100 (425)</b>	<b>100 (206)</b>	<b>100 (631)</b>

**Table 9.7:** Experience of receiving knowledge from the service provider, NGO, or personnel, and the nature of the knowledge received

	Coastal Provinces						Non Coastal Provinces			Total (weighted)			
	Myanmar			Cambodia			Chiengmai and Tak			Male	Female	Total	
	Male	Female	Total	Male	Female	Total	Male	Female	Total				
Have you ever received information from the unit/organization in the area or from the staff/volunteer named													
- Yes	84.2	91.1	85.4	100.0	100.0	100.0	95.8	88.8	92.6	89.3	90.3	89.5	
- No	15.8	8.9	14.6	0.0	0.0	0.0	4.2	11.2	7.4	10.7	9.7	10.5	
Total	100	100	100	100	100	100	100	100	100	100	100	100	
(N)	1427	314	1741	396	36	432	237	197	434	2008	651	2659	
How many time													
- 1- 5 times	73.2	55.8	69.8	57	3	52.8	66.2	77.9	71.2	68.6	64.4	67.4	
- 6 -10 times	13.6	32.3	17.2	7.3	6.1	7.2	14.3	9.8	12.3	12.5	19.4	14.2	
- 11 -15 times	1.8	2.8	2.1	1.6	0	1.4	3.4	1.2	2.4	2.1	2	2	
- 15- 20 times	0.4	1.8	0.6	0.3	0	0.2	1.4	0	0.8	0.7	0.7	0.5	
- more than 20 times	0.3	0.8	0.5	0.8	0	0.7	-	-	-	0.5	0.4	0.1	
- Can not remember	11.0	6.7	10.2	33.1	90.9	37.6	14.8	11.0	13.1	16.1	13.2	15.4	
Total	100	100	100	100	100	100	100	100	100	100	100	100	
(N)	(1190)	(285)	(1475)	(393)	(33)	(426)	(210)	(163)	(373)	(1752)	(562)	(2314)	
Mean	3.78	6.07	4.24	3.94	4.33	3.95	4.53	3.62	4.12	3.97	4.79	4.17	
If yes, what kind of information have you received													
- Sexually transmitted infection	58.7	53.8	57.8	69.8	80.6	70.7	70.8	70.2	70.5	63.1	63.8	63.3	
- Protection/ infection of HIV	71.8	72.6	72.0	93.7	100.0	94.2	85.6	81.8	83.9	78.5	78.8	78.6	
- Living with person infected HIV/ AIDS	6.0	8.0	6.4	1.8	0.0	1.6	5.5	5.1	5.3	5.2	6.0	5.4	
- Condom use	47.5	41.4	46.4	91.4	66.7	89.4	64.4	62.6	63.6	58.6	53.8	57.4	
- Maternal and child health	15.2	32.8	18.4	4.8	8.3	5.1	13.6	30.8	21.4	13.1	30.5	17.3	
- Language	1.8	3.8	2.2	1.8	5.6	2.1	1.7	0.0	0.9	1.8	1.8	1.8	
- Law	1.6	3.2	1.9	0.3	0.0	0.2	2.1	0.0	1.2	1.5	1.4	1.5	
- Other	4.2	8.3	4.9	0.3	0.0	0.2	2.1	0.0	1.2	3.1	3.5	3.2	
(N)	(1426)	(313)	(1739)	(397)	(36)	(433)	(236)	(198)	(434)	(2006)	(652)	(2658)	
How did you get the information													
- Training/ seminar	19.4	31.5	21.6	39.0	47.2	39.7	62.3	62.9	62.6	31.7	48.8	35.8	
- Group discussion	52.1	54.8	52.6	41.6	36.1	41.1	40.7	48.5	44.2	48.0	50.5	48.6	
- Private counseling	6.9	5.7	6.7	3.3	0.0	3.0	13.6	6.7	10.5	7.6	5.9	7.2	
- VDO/CD	1.3	1.6	1.4	35.3	11.1	33.3	16.1	5.2	11.2	10.2	3.9	8.7	
- Campaign / exhibitions	7.1	5.1	6.7	41.8	61.1	43.4	4.2	0.5	2.6	12.5	5.4	10.8	
- Other	7.4	1.3	6.3	-	-	-	5.9	4.1	5.1	5.8	2.6	5.1	
(N)	(1426)	(314)	(1740)	(397)	(36)	(433)	(236)	(194)	(430)	(2006)	(645)	(2651)	

**Table 9.8:** Print media received from the local service provider or NGO

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak			Male	Female	Total
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Have you ever get any printed media from the unit/organization in the area</b>												
- Yes	68.3	78.2	70.1	99.5	100.0	99.5	77.0	62.5	70.2	75.5	70.7	74.3
- No	13.4	4.7	11.8	-	-	-	0.8	4.3	2.5	8.4	4.3	7.4
- Can not remember	13.8	11.1	13.3	0.5	0.0	0.5	21.8	28.4	24.8	13.2	19.9	14.9
- Don't known	4.6	6.0	4.8	-	-	-	0.4	4.8	2.5	2.9	5.1	3.5
<b>Total (N)</b>	<b>100 (1427)</b>	<b>100 (316)</b>	<b>100 (1743)</b>	<b>100 (397)</b>	<b>100 (36)</b>	<b>100 (433)</b>	<b>100 (239)</b>	<b>100 (208)</b>	<b>100 (447)</b>	<b>100 (2013)</b>	<b>100 (672)</b>	<b>100 (2685)</b>
<b>If yes, what are the printed media have you ever received</b>												
- Leaflet / cartoon / brochure	47.7	51.5	48.5	80.1	63.9	78.8	15.2	13.7	14.5	46.5	31.6	42.6
- CD/DVD/VCD	4.3	1.0	3.6	5.8	0.0	5.3	2.1	1.5	1.8	4.0	1.3	3.3
- Booklet / magazine / handbook / notebook	12.4	14.0	12.8	1.8	0.0	1.6	43.9	38.1	41.2	17.6	26.3	19.8
- Poster	0.8	0.0	0.7	8.6	30.6	10.4	0.4	0.5	0.5	2.2	1.7	2.1
- Documents on using condom	0.4	0.0	0.3	-	-	-	-	-	-	0.2	0.0	0.2
- Documents on AIDS / Documents on living with person infected HIV or STIs	5.0	4.3	4.9	0.3	0.0	0.2	4.7	2	3.5	4.1	3	3.8
- Calendar	0.3	0.0	0.3	-	-	-	-	-	-	0.2	0.0	0.1
- Documents on tuberculosis / cholera / bird flu / hemorrhagic fever	1.7	6.3	1.6	-	-	-	-	-	-	0.9	2.7	1.3
- Cartoon on AIDS	0.5	0.3	0.5	-	-	-	1.3	2.5	1.8	0.5	1.6	0.8
- Documents on health knowledge	0.0	0.0	0.0	-	-	-	2.5	1.0	1.8	0.8	0.5	0.7
- Documents on other knowledge	0.4	2	0.7				0.8	1.0	0.9	0.5	1.4	0.7
- Don't remember	20.2	13.0	18.8	3.5	5.6	3.7	28.7	34.5	31.3	19.0	24.3	20.3
- Don't know	5.9	7.4	6.2	-	-	-	0.4	5.1	2.5	3.6	5.8	4.1
<b>Total (N)</b>	<b>100 (1223)</b>	<b>100 (299)</b>	<b>100 (1522)</b>	<b>100 (397)</b>	<b>100 (36)</b>	<b>100 (433)</b>	<b>100 (237)</b>	<b>100 (197)</b>	<b>100 (434)</b>	<b>100 (1830)</b>	<b>100 (639)</b>	<b>100 (2469)</b>
<b>Do you think those media useful for you</b>												
- Yes	78.4	80.7	78.8	99.0	100.0	99.1	79.1	69.1	74.6	82.4	75.5	80.7
- No	0.8	1.0	0.9	0.3	0.0	0.2	-	-	-	0.5	0.5	0.5
- Can not remember	15.3	11.6	14.5	0.5	0.0	0.5	20.5	25.5	22.7	13.6	18.4	14.9
- Don't known	5.5	6.6	5.8	0.3	0.0	0.2	0.4	5.3	2.6	3.4	5.6	4.0
<b>Total (N)</b>	<b>100 (1226)</b>	<b>100 (301)</b>	<b>100 (1527)</b>	<b>100 (395)</b>	<b>100 (36)</b>	<b>100 (431)</b>	<b>100 (234)</b>	<b>100 (188)</b>	<b>100 (422)</b>	<b>100 (1827)</b>	<b>100 (624)</b>	<b>100 (2451)</b>
<b>Do you think the services provided in the area by those unit/organization useful for you</b>												
- Yes	89.5	91.5	89.8	99.5	100.0	99.5	97.5	96.1	96.8	92.9	94.4	93.3
- No	2.5	1.6	2.3	-	-	-	0.4	0.0	0.2	1.6	0.6	1.4
- Don't known	8.0	6.9	7.8	0.5	0.0	0.5	2.1	3.9	3.0	5.4	5.0	5.3
<b>Total (N)</b>	<b>100 (1397)</b>	<b>100 (317)</b>	<b>100 (1714)</b>	<b>100 (397)</b>	<b>100 (36)</b>	<b>100 (433)</b>	<b>100 (237)</b>	<b>100 (203)</b>	<b>100 (440)</b>	<b>100 (1982)</b>	<b>100 (663)</b>	<b>100 (2645)</b>

**Table 9.9:** Services received from the local organization or NGO

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak			Male	Female	Total
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>If yes, what type of service you think useful for you</b>												
- Provide law knowledge / rights of migrant worker	2.0	2.1	2.0	0.5	0.0	0.5	0.4	0.5	0.5	1.4	1.2	1.3
- Provide health knowledge / Provide knowledge on AIDS prevention	72.0	69.0	71.4	50.8	55.6	51.2	32.2	35.7	33.7	59.2	50.7	57.1
- Provide disease knowledge	4.5	6.3	4.8	0.7	1.4	0.8	1.7	0.5	1.2	3.5	3.3	3.4
- Provide treatment and medicine	0.7	0.3	0.7	0.0	5.6	0.5	0.0	0.5	0.2	0.4	0.7	0.5
- Provide knowledge for protecting STIs	8.2	8.4	8.2	14.5	27.8	15.7	2.2	1.1	1.7	8.1	5.5	7.4
- Provide language communication	0.2	0.3	0.2	-	-	-	0.4	0.0	0.2	0.2	0.2	0.2
- Provide knowledge on family planning, reproductive health and mother and child health	0.6	5.9	1.6	0.8	0.0	0.7	3.0	6.5	4.6	1.2	6.0	2.3
- Provide free condom	2.0	0.0	1.6	26.5	2.8	24.5	16.1	13.5	14.9	9.8	7.3	9.1
- Provide documents / booklet / CD / newspaper	1.0	0.3	0.9	-	-	-	35.7	20.5	28.9	8.5	10.9	9.1
- Referral assistance to hospital	0.0	0.6	0.1	-	-	-	0.4	0.0	0.2	0.1	0.3	0.2
- Provide treatment for person with addicted drug	-	-	-	-	-	-	0.9	0.0	0.5	0.2	0.0	0.1
- Methods of taking care person infected AIDS	-	-	-	-	-	-	0.4	0.5	0.5	0.1	0.3	0.2
- Helping for doing work permit card	0.1	0.0	0.1	-	-	-	-	-	-	0.1	0.0	0.0
- Teaching children	0.1	0.0	0.1	-	-	-	-	-	-	0.1	0.0	0.0
- Others	8.6	6.6	8.2	4.6	0.0	1.2	6.5	19.5	12.8	7.3	13.6	8.9
<b>Total (N)</b>	<b>100 (1233)</b>	<b>100 (287)</b>	<b>100 (1520)</b>	<b>100 (392)</b>	<b>100 (36)</b>	<b>100 (428)</b>	<b>100 (230)</b>	<b>100 (185)</b>	<b>100 (415)</b>	<b>100 (1824)</b>	<b>100 (603)</b>	<b>100 (2427)</b>

**Table 9.10:** Were services the result of the local organization or NGO

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Do you think the health service and other service you have received are the work of the unit /organization in the area</b>												
- Yes	78.7	72.4	77.6	99.2	100.0	99.3	81.9	85.0	83.4	82.9	80.4	82.3
- No	12.6	21.9	14.3	-	-	-	13.4	5.3	9.7	10.6	12.0	10.9
- Don't known	8.6	5.7	8.1	0.8	0.0	0.7	4.6	9.7	7.0	6.5	7.6	6.7
<b>Total (N)</b>	<b>100 (1416)</b>	<b>100 (315)</b>	<b>100 (1731)</b>	<b>100 (394)</b>	<b>100 (35)</b>	<b>100 (429)</b>	<b>100 (238)</b>	<b>100 (207)</b>	<b>100 (445)</b>	<b>100 (1827)</b>	<b>100 (624)</b>	<b>100 (2451)</b>

**Table 9.11:** Recommendations for improvement

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Rather than availability of these service, do you have any recommendations for their betterment of PHAMIT project : Personnel</b>												
- Need more officer access to working areas	34.5	28.6	33.3	-	-	-	33.3	14.3	25.0	31.4	18.9	27.9
- Need more migrant worker health volunteers and health migrant officers	18.5	2.4	15.2	52.6	-	52.6	16.7	7.1	12.5	20.1	4.4	15.7
- Need more woman officer	1.2	23.8	5.7	-	-	-	2.8	10.7	6.3	1.3	15.6	5.3
- Need migrant worker health volunteers adjust their personality	3.6	2.4	3.3	-	-	-	2.8	3.6	3.1	3.1	3.3	3.1
- Provide assistance migrant workers for living and nursing right	2.4	4.8	2.9	15.9	-	15.9	-	-	-	2.6	2.2	2.5
- Provide update mass media	0.6	2.4	1.0	-	-	-	-	-	-	0.4	1.1	0.6
- Provide more training	7.1	7.1	7.1	21.1	-	21.1	2.8	10.7	6.3	7.0	8.9	7.5
- Provide knowledge on using condom	-	-	-	-	-	-	0.0	3.6	1.6	0.0	2.2	0.6
- Provide slide / leaflet / book / documents/ brochure	0.6	7.2	2	-	-	-	2.8	7.2	4.7	1.3	7.7	3.1
- Need more training on health	6.0	0.0	4.8	5.3	-	5.3	0.0	3.6	1.6	4.4	2.2	3.8
- Need more drop-in center	1.2	0.0	1.0	-	-	-	-	-	-	0.9	0.0	0.6
- Provide free medicine	0.6	0.0	0.5	5.3	-	5.3	-	-	-	0.9	0.0	0.6
- Need movie in Cambodian language	0.0	2.4	0.5	-	-	-	-	-	-	0.0	1.1	0.3

Table 9.11: (Cont.)

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak			Male	Female	Total
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Rather than availability of these service, do you have any recommendations for their betterment of PHAMIT project :</b>												
<b>Personnel</b>												
- Need disease knowledge	0.0	2.4	0.5	-	-	-	2.8	0.0	1.6	0.9	1.1	0.9
- Provide training on holiday	2.4	2.4	2.4	-	-	-	-	-	-	1.3	1.1	1.3
- Need service in everywhere have Burmese living	1.2	0.0	1.0	-	-	-	0.0	3.6	1.6	0.9	2.2	1.3
- Need knowledge provide in school	-	-	-	-	-	-	0.0	3.6	1.6	0.0	2.2	0.6
- Come with group / Have a good place for training	0.6	0.0	0.5	-	-	-	-	-	-	0.4	0.0	0.3
- Speak loudly	1.2	0.0	1.0	-	-	-	-	-	-	0.9	0.0	0.6
- Need sustainable organization	2.4	0.0	1.9	-	-	-	0.0	3.6	1.6	1.3	2.2	1.6
- Need advanced training	0.6	2.4	1.0	-	-	-	5.6	0.0	3.1	1.7	1.1	1.6
- increasing personal knowledge	1.2	0.0	1.0	-	-	-				0.9	0.0	0.6
- Need continuously trainings	1.8	0.0	1.4	-	-	-	2.8	14.3	7.8	1.7	7.8	3.4
- Need more knowledge	1.8	0.0	1.4	-	-	-	2.8	3.6	3.1	1.7	2.2	1.9
- Provide knowledge on using medicine	-	-	-	-	-	-	0.0	3.6	1.6	0.0	2.2	0.6
- Have officers stay permanently	0.6	0.0	0.5	-	-	-	-	-	-	0.4	0.0	0.3
- Exchange knowledge and suggestions	0.6	2.4	1.0	-	-	-	-	-	-	0.4	1.1	0.6
- Assistance person infected AIDS	-	-	-	-	-	-	2.8	0.0	1.6	0.9	0.0	0.6
- Taking care elderly and child	-	-	-	-	-	-	2.8	0.0	1.6	0.9	0.0	0.6
- Training and provide knowledge on AIDS	0.6	0.0	0.5	-	-	-	2.8	0.0	1.6	1.3	0.0	0.9
- Provide knowledge on narcotics	1.2	0.0	1.0	-	-	-	-	-	-	0.9	0.0	0.6
- Provide knowledge for sex worker	-	-	-	-	-	-	2.8	0.0	1.6	0.9	0.0	0.6
- Assist everything	-	-	-	-	-	-	2.8	0.0	1.6	0.9	0.0	0.6
- Follow - up	-	-	-	-	-	-	2.8	0.0	1.6	0.9	0.0	0.6
- Provide individual knowledge	1.2	0.0	1.0	-	-	-	2.8	0.0	1.6	1.3	0.0	0.9
- If personnel need assistances , migrant workers will help	-	-	-	-	-	-	0.0	3.6	1.6	0.0	2.2	0.6

Table 9.11: (Cont.)

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Rather than availability of these service, do you have any recommendations for their betterment of PHAMIT project :</b>												
<b>Personnel</b>												
- Condom free	1.2	2.4	1.4	-	-	-	-	-	-	0.9	1.1	0.9
- Introduce personnel	0.6	0.0	0.5	-	-	-	-	-	-	0.4	0.0	0.3
- Explain explicitly	1.2	0.0	1.0	-	-	-	-	-	-	0.9	0.0	0.6
- Have everyday teaching for children	0.0	2.4	0.5	-	-	-	-	-	-	0.0	1.1	0.3
- Have more medical personnel	0.6	2.4	1.0	-	-	-	-	-	-	0.4	1.1	0.6
- Need personnel come to provide knowledge on daytime / holiday	0.6	0.0	0.5	-	-	-	-	-	-	0.4	0.0	0.3
- Fill condom permanently	0.6	0.0	0.5	-	-	-	-	-	-	0.4	0.0	0.3
- Other	1.8	2.4	1.9	-	-	-	5.6	3.6	4.7	2.6	3.3	2.8
<b>Total (N)</b>	<b>100</b> <b>(168)</b>	<b>100</b> <b>(42)</b>	<b>100</b> <b>(210)</b>	<b>100</b> <b>(19)</b>	-	<b>100</b> <b>(19)</b>	<b>100</b> <b>(36)</b>	<b>100</b> <b>(28)</b>	<b>100</b> <b>(64)</b>	<b>100</b> <b>(229)</b>	<b>100</b> <b>(90)</b>	<b>100</b> <b>(319)</b>

Table 9.12: Sexual behavior modification

	Coastal Provinces						Non Coastal Provinces			Total (weighted)		
	Myanmar			Cambodia			Chiengmai and Tak					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Since you have received services from the unit/organization, do you think you have changed your sexual behavior</b>												
- Yes	58.5	26.0	52.3	86.9	10.5	82.2	70.8	49.7	60.4	65.7	37.8	58.6
- No	35.0	63.8	40.5	5.5	57.9	8.7	27.3	33.6	30.4	28.5	47.8	33.4
- Don't known	6.5	10.2	7.2	7.6	31.6	9.1	1.9	16.8	9.2	5.9	14.4	8.1
<b>Total (N)</b>	<b>100</b> <b>(1074)</b>	<b>100</b> <b>(254)</b>	<b>100</b> <b>(1328)</b>	<b>100</b> <b>(290)</b>	<b>100</b> <b>(19)</b>	<b>100</b> <b>(309)</b>	<b>100</b> <b>(154)</b>	<b>100</b> <b>(149)</b>	<b>100</b> <b>(303)</b>	<b>100</b> <b>(1462)</b>	<b>100</b> <b>(500)</b>	<b>100</b> <b>(1962)</b>
<b>If yes, how do you think your sexual behavior have been changed</b>												
- If yes, sexual behaviour change by using more condom	61.8	74.2	63.0	84.1	(1)	83.9	68.8	78.4	72.7	68.4	76.7	69.7
- If yes, sexual behaviour change by reducing number of sex partners	47.5	18.2	44.7	23.4	(1)	23.6	56.9	17.6	41.0	43.9	18.0	39.6
- If yes, change sexual behaviour by other way	10.5	9.1	10.4	8.3	-	8.3	4.6	10.8	7.1	8.8	10.1	9.0
<b>Total (N)</b>	<b>(629)</b>	<b>(66)</b>	<b>(695)</b>	<b>(252)</b>	<b>(2)</b>	<b>(254)</b>	<b>(109)</b>	<b>(74)</b>	<b>(183)</b>	<b>(961)</b>	<b>(189)</b>	<b>(1150)</b>
<b>Do you think the changes in your sexual behavior are resulted from your contact with the unit/organization or with the person named (PHAMIT project )</b>												
- Yes	86.6	70.5	84.7	92.1	33.3	90.2	97.3	73.5	86.2	89.8	71.4	86.1
- No	2.4	0.0	2.1	-	-	-	-	-	-	1.4	0.0	1.1
- Don't known	11.0	29.5	13.2	7.9	66.7	9.8	2.7	26.5	13.8	8.8	28.6	12.7
<b>Total (N)</b>	<b>100</b> <b>(701)</b>	<b>100</b> <b>(95)</b>	<b>100</b> <b>(796)</b>	<b>100</b> <b>(277)</b>	<b>100</b> <b>(9)</b>	<b>100</b> <b>(286)</b>	<b>100</b> <b>(112)</b>	<b>100</b> <b>(98)</b>	<b>100</b> <b>(210)</b>	<b>100</b> <b>(1051)</b>	<b>100</b> <b>(262)</b>	<b>100</b> <b>(1313)</b>

Table 10.1: Summary indicators

Indicators	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Knowledge</b>						
<b>Coastal Provinces</b>	<b>(2484)</b>	<b>(2473)</b>	<b>(457)</b>	<b>(429)</b>	<b>(2941)</b>	<b>(2902)</b>
<b>Myanmar</b>						
Ever heard of HIV/AIDS	86.0	97.1	75.8	94.6	84.3	96.7
<i>Knowledge of HIV prevention methods</i>						
Use of condoms	79.3	88.9	75.9	94.6	78.9	89.8
Only one partner	80.3	84.3	71.4	88.9	79.0	85.0
Abstain from sex	70.7	72.1	69.8	79.0	70.6	73.2
<i>No incorrect beliefs about AIDS</i>						
Healthy-looking person can have the AIDS	47.6	64.4	36.9	77.0	46.0	66.5
AIDS cannot be transmitted by mosquito bites	45.3	65.7	53.8	66.0	46.7	65.7
Cannot become infected by sharing food with someone who has AIDS	75.4	88.4	83.7	89.8	76.6	88.6
<i>Knowledge on mother to child transmission of HIV</i>						
During pregnancy	82.5	92.9	72.8	92.3	81.1	92.8
Through breast feeding	81.4	93.0	71.1	96.8	79.9	93.7
<b>Cambodia</b>						
Ever heard of HIV/AIDS	97.4	100.0	94.7	100.0	97.2	100.0
<i>Knowledge of HIV prevention methods</i>						
Use of condoms	92.1	92.1	76.5	93.5	90.9	92.2
Only one partner	67.6	84.2	66.7	81.1	67.5	84.0
Abstain from sex	32.1	65.4	41.7	84.2	32.9	67.4
<i>No incorrect beliefs about AIDS</i>						
Healthy-looking person can have the AIDS	41.5	53.7	63.9	28.9	43.3	51.7
AIDS cannot be transmitted by mosquito bites	76.5	95.8	58.3	94.7	75.1	95.7
Cannot become infected by sharing food with someone who has AIDS	91.4	97.7	80.6	91.9	90.5	97.2
<i>Knowledge on mother to child transmission of HIV</i>						
During pregnancy	90.6	96.4	83.3	100.0	90.1	96.6
Through breast feeding	84.4	96.9	88.9	100.0	84.8	97.1
<b>Non-coastal Province</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
<b>Chiengmai and Tak</b>						
Ever heard of HIV/AIDS	87.6	99.6	85.5	97.4	86.6	98.6
Healthy-looking person can have the AIDS	42.9	83.2	42.3	82.4	42.6	82.8
AIDS cannot be transmitted by mosquito bites	47.8	77.5	51.1	80.7	49.5	79.0
Cannot become infected by sharing food with someone who has AIDS	76.5	94.5	87.1	93.5	81.4	94.1



Table 10.1: (Cont.)

Indicators	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Knowledge</b>						
<b>Non-coastal Province</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
Knowledge on mother to child transmission of HIV						
During pregnancy	85.4	95.2	85.6	92.6	85.5	94.0
Through breast feeding	78.3	96.8	76.8	94.0	77.6	95.5
<b>Total (weighted)</b>	<b>(2742)</b>	<b>(2731)</b>	<b>(684)</b>	<b>(684)</b>	<b>(3426)</b>	<b>(3415)</b>
Ever heard of HIV/AIDS	87.9	97.9	81.6	96.2	86.5	97.5
<b>Knowledge of HIV prevention methods</b>						
Use of condoms	82.6	86.0	83.1	90.0	82.7	86.9
Only one partner	77.1	81.2	69.9	83.6	75.6	81.8
Abstain from sex	63.5	64.8	66.9	68.6	64.2	65.6
<b>No incorrect beliefs about AIDS</b>						
Healthy-looking person can have the AIDS	45.8	56.3	41.2	68.2	44.8	59.0
AIDS cannot be transmitted by mosquito bites	50.7	67.4	52.8	70.7	51.1	68.1
Cannot become infected by sharing food with someone who has AIDS	88.1	85.5	85.4	89.4	79.7	86.4
<b>Knowledge on mother to child transmission of HIV</b>						
During pregnancy	84.3	85.7	80.1	87.6	83.4	86.2
Through breast feeding	81.3	84.7	75.0	89.8	80.0	85.8
<b>Sexual behavior (15-49)</b>						
<b>Coastal Provinces</b>	<b>(2484)</b>	<b>(2473)</b>	<b>(457)</b>	<b>(429)</b>	<b>(2941)</b>	<b>(2902)</b>
<b>Myanmar</b>						
Mean age of first sex among young men and women	20.5	28.2	20.5	29.4	20.5	28.4
Median age of first sex among young men and women	20.0	27.0	20.0	28.0	20.0	27.0
Sex before the age of 15	2.5	0.9	1.3	0.0	2.3	0.8
Sex before the age of 18	15.8	11.9	16.1	16.7	15.9	12.7
Higher risk sex in the last year						
Multiple partners (non-regular partners) in the last year among sexually active respondent, age 15-49	4.1	4.2	1.0	7.4	4.1	4.7
<b>Condom use at last higher risk sex</b>						
Use a condom at last sex with non-regular partner	28.9	90.2	-	-	28.6	90.2
Use a condom at last sex with sex worker	89.9	97.2	-	-	89.9	97.2
Use a condom last sex with a spouse or cohabiting partner	57.1	6.9	66.7	7.8	59.3	7.1
<b>Cambodia</b>						
Mean age of first sex among young men and women	20.2	24.9	20.0	24.7	20.0	24.9
Median age of first sex among young men and women	20.0	24.0	19.0	23.0	20.0	24.0
Sex before the age of 15	1.0	0.0	0.0	0.0	0.9	0.0
Sex before the age of 18	21.7	12.8	19.2	23.5	21.5	13.4
<b>Higher risk sex in the last year</b>						
Multiple partners (non-regular partners) in the last year among sexually active respondent, age 15-49	5.4	2.3	2.0	15.8	5.3	3.4

Table 10.1: (Cont.)

Indicators	Male		Female		Total	
	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008	Baseline Survey 2004	Impact Survey 2008
<b>Condom use at last higher risk sex</b>						
Use a condom at last sex with non-regular partner	64.7	84.6	-	-	61.1	84.6
Use a condom at last sex with sex worker	96.6	97.1	-	-	96.6	97.1
Use a condom last sex with a spouse or cohabiting partner	33.3	6.0	-	-	33.3	4.9
<b>Sexual behavior (15-49)</b>						
<b>Non-coastal Province</b>	<b>(258)</b>	<b>(258)</b>	<b>(227)</b>	<b>(227)</b>	<b>(485)</b>	<b>(485)</b>
<b>Chiangmai and Tak</b>						
Mean age of first sex among young men and women	21.0	20.5	20.0	19.7	21.2	20.09
Median age of first sex among young men and women	20.0	20.0	21.0	19.0	20.0	19.0
Sex before the age of 15	1.2	0.7	0.0	0.7	0.7	0.7
Sex before the age of 18	14.5	17.3	11.0	31.0	13.2	24.1
<b>Higher risk sex in the last year</b>						
Multiple partners (non-regular partners) in the last year among sexually active respondent, age 15-49	3.6	11.4	1.0	8.6	3.5	10.2
<b>Condom use at last higher risk sex</b>						
Use a condom at last sex with non-regular partner	72.7	81.8	-	100.0	66.7	84.6
Use a condom at last sex with sex worker	77.8	80.0	-	-	77.8	80.0
Use a condom last sex with a spouse or cohabiting partner	40.0	26.3	60.0	12.5	46.79	19.1
<b>Total (weighted)</b>	<b>(2742)</b>	<b>(2731)</b>	<b>(684)</b>	<b>(684)</b>	<b>(3426)</b>	<b>(3415)</b>
Mean age of first sex among young men and women	20.56	20.97	20.95	20.20	20.64	20.79
Median age of first sex among young men and women	20.0	20.0	20.0	19.0	20.0	20.0
Sex before the age of 15	2.1	0.7	0.6	0.4	1.8	0.7
Sex before the age of 18	11.4	12.8	9.3	23.8	11.0	15.4
<b>Higher risk sex in the last year</b>						
Multiple partners (non-regular partners) in the last year among sexually active respondent, age 15-49	4.4	4.6	1.3	8.3	4.4	5.3
<b>Condom use at last higher risk sex</b>						
Use a condom at last sex with non-regular partner	42.6	90.1	0.0	100.0	41.3	90.5
Use a condom at last sex with sex worker	91.4	97.0	-	-	91.4	97.0

Table 10.1: (Cont.)

Indicators	Male		Female		Total	
	Baseline Survey 2004	Post Survey 2008	Baseline Survey 2004	Post Survey 2008	Baseline Survey 2004	Post Survey 2008
<b>Sexual behavior (15-49)</b>						
<b>Coastal Provinces</b>						
<b>Myanmar</b>						
Median age of first sex young men and women	18.9	19.0	18.9	19.0	18.9	19.0
Sex before the age of 15	1.4	1.3	1.3	0.0	1.4	1.1
Sex before the age of 18	9.8	20.4	11.5	21.5	10.1	20.6
youth have sexual intercourse before marry in last year	59.4	58.1	-	0.0	59.4	57.4
youth have sexual intercourse with a person who is not spouse in last year	6.1	8.2	-	0.0	3.6	5.2
youth uses condom with partner before marry	10.0	86.4	-	-	10.0	86.4
youth has many partner , in last year	3.8	3.7	2.0	4.3	3.8	3.7
youth uses the condom the last sex at have high risk						
- non-regular partner	13.2	85.7	-	-	13.2	85.7
- sex worker	88.8	95.8	-	-	88.8	95.8
<b>youth uses the condom the last sex at have high risk per total adult</b>						
- non-regular partner	0.54	1.38	-	-	0.54	1.38
- sex worker	13.80	7.01	-	-	13.80	7.01
<b>Cambodia</b>						
Median age of first sex young men and women	19.1	19.0	17.8	18.5	19.0	19.0
Sex before the age of 15	0.4	0.0	0.0	0.0	0.4	0.0
Sex before the age of 18	11.2	17.4	16.7	16.7	11.5	17.3
youth have sexual intercourse before marry in last year	71.6	88.3	100.0	-	72.0	88.3
youth have sexual intercourse with a person who is not spouse in last year	44.4	0.0	0.0	0.0	28.6	0.0
youth uses condom with partner before marry	75.0	60.0	-	-	66.7	60.0
youth has many partner , in last year	5.1	1.2	2.0	0.0	5.1	1.1
<b>youth uses the condom the last sex at have high risk</b>						
- non-regular partner	75.0	60.0	0.0	(1)	66.7	60.0
- sex worker	97.0	98.0	-	-	97.0	98.0
<b>youth uses the condom the last sex at have high risk per total adult</b>						
- non-regular partner	2.63	3.93	-	-	2.63	3.93
- sex worker	28.07	24.59	-	-	28.07	24.59

Table 10.1: (Cont.)

Indicators	Male		Female		Total	
	Baseline Survey 2004	Post Survey 2008	Baseline Survey 2004	Post Survey 2008	Baseline Survey 2004	Post Survey 2008
<b>Sexual behavior (15-49)</b>						
<b>Non Coastal Provinces</b>						
<b>Chiangmai and Tak</b>						
Median age of first sex young men and women	18.8	19.0	19.5	18.0	19.0	19.0
Sex before the age of 15	0.9	0.0	0.0	0.0	0.5	0.0
Sex before the age of 18	14.0	22.2	4.1	36.8	9.8	30.8
youth have sexual intercourse before marry in last year	26.3	27.3	0.0	(1)	26.3	33.3
youth have sexual intercourse with a person who is not spouse in last year	10.3	14.3	0.0	0.0	6.1	5.3
youth uses condom with partner before marry	-	100.0	-	-	-	100.0
youth has many partner , in last year	5.5	8.8	-	2.7	5.5	6.7
<b>youth uses the condom the last sex at have high risk</b>						
- non-regular partner	66.7	100.0	-	-	66.7	100.0
- sex worker	80.0	100.0	-	-	80.0	100.0
<b>youth uses the condom the last sex at have high risk per total adults</b>						
- non-regular partner	1.87	0.53	-	-	1.87	0.53
- sex worker	3.74	6.7	-	-	3.74	6.7
<b>Total (weighted)</b>						
Median age of first sex young men and women	18.9	20.0	19.0	19.0	18.9	20.0
Sex before the age of 15	1.2	0.7	0.6	0.4	1.1	0.7
Sex before the age of 18	10.8	12.8	8.2	23.8	10.3	15.4
youth have sexual intercourse before marry in last year	58.1	67.8	50.0	66.7	58.1	67.8
youth have sexual intercourse with a person who is not spouse in last year	9.3	7.6	0.0	0.0	5.4	4.0
youth uses condom with partner before marry	22.2	90.9	-	100.0	21.6	91.7
youth has many partner , in last year	4.2	3.4	2.0	1.6	4.2	3.2
<b>youth uses the condom the last sex at have high risk</b>						
- non-regular partner	26.5	92.5	0.0	(2)	26.5	92.7
- sex worker	91.1	96.9	-	-	91.1	96.9
<b>youth uses the condom the last sex at have high risk per total adult</b>						
- non-regular partner	1.09	3.93	-	-	1.09	3.93
- sex worker	16.39	21.74	-	-	16.39	21.74

# APPENDIX *B*

## Questionnaire

### Individual Questionnaire for Migrant Worker Aged 15-49

#### The Evaluation and Monitoring of the HIV/AIDS Prevention Program Among Migrant Workers in the Boarder Provinces in Thailand

QUESTIONNAIRE IDENTIFICATION NUMBER

Informal Name of Respondent \_\_\_\_\_

Place of Residence

1) Municipal District Area

2) Municipal Sub-district Area

3) Village

Province

District

Sub-district

House No. \_\_\_\_\_ Street/Soi \_\_\_\_\_

#### Interviewer visit

	Visit 1	Visit 2	Visit 3
Date			
Start at			
End at			
Total time			
Interviewer			
Result*			

#### Result codes\*

Completed

1

Not at home

2

Refused

3

Partially completed

4

Other (specify) 8

INTERVIEWER NAME

\_\_\_\_\_

Code

DATE OF INTERVIEW

D

D

M

M

Y

Y

TIME OF INTERVIEW

1<sup>ST</sup> attempt \_\_\_\_\_ 2<sup>nd</sup> attempt \_\_\_\_\_ 3<sup>rd</sup> attempt \_\_\_\_\_

SUPERVISOR NAME

\_\_\_\_\_

Code

SPOT CHECKED

1. Yes

2. No

## CONSENT FORM

### Introduction:

My name is .....

I am working for IPSR, Mahidol University. We are interviewing people here (name of city/region/site) in order to find out about.....

*(describe the purpose of the study).*

### Confidentiality and consent:

We are undertaking this study to take an account of the health scenario in this province. The output of the study will benefit the functionaries involved in the implementation of the Health Promotion Programme. I am going to ask you some very personal questions that some people find difficult to answer. Your answers are completely confidential. Your name will never be used in connection with any of the information you tell me. You do not have to answer any questions that you do not want to answer and you may end this interview at any time you want to. However, your honest answer to these questions will help us better understand what people think, say and do about certain kinds of behaviors. We would greatly appreciate your help in responding to this survey. However, if you feel uncomfortable at any point of time, you could discontinue the proceedings. The survey will take about half an hour to ask the questions. Would you be willing to participate?

---

(Signature of interviewer )

Certifying that informed consent has been given verbally by the respondent)

### SECTION I General Characteristics

Q No.	Question & Filers	Coding Categories	Coding	Skip to
Q 101	Sex of respondent	Male Female	1 2	
Q 102	How old are you?	Age in completed years	--	
Q 103	Where were you born?	City/Town..... Country.....		
Q 104	What nationality are you?	Myanmar Cambodian Lao   Other ..... No response	1 2 3  4  9	
Q 105	What ethnic group do you belong to?	Karen Mon Burmese Loa Khmer Other..... Don't know No response	1 2 3 4 5 6 8 9	
Q 106	What is your religion?	Buddhism Protestant Catholic Muslim Tradition No Religion Other ..... Don't know No response	1 2 3 4 5 6 7 8 9	
Q 107	What is your marital status?	Married/Living together Unmarried/Single Separated Divorced Widowed	1 2 3 4 5	

Q No.	Question & Filers	Coding Categories	Coding	Skip to																																																																															
Q 108	Have you ever attended school ? <i>(If yes, what was the highest level that you completed)</i>	Yes No Specify .....	1 2																																																																																
Q 109	How long do you live in Thailand ? <i>(Since first time you have come to Thailand)</i>	.....Month .....Year No response	-- 9999																																																																																
Q 110	How long have you stayed in this province ?	.....Month .....Year No response	-- 9999																																																																																
Q 111	<p>Did you move to the other places during in the past 5 years ? <i>(Between 2003 – 2008)</i></p> <p>Identify places where you had stayed for at least one month or over)</p> <p><b>Note: PHAMIT Project</b> includes the following organizations in stated covered areas:</p> <p>1. <b>Raks Thai Foundation:</b> / <b>Care Raksthai</b> Samutsakorn, Samutprakarn, Trad, Chantaburi, Prachuabkirikhan, Nakornsrithammarat, Suratthanee</p> <p>2. <b>Center for AIDS Rights (CAR):</b> Chonburi, Rayong</p> <p>3. <b>World Vision Foundation</b> (Supanimit): Tak, Chumporn, Ranong, Phukey, Pang-nga</p> <p>4. <b>MAP:</b> Chaing Mai, Tak</p> <p>5. <b>EMPOWER:</b> Chiang Mai</p> <p>6. <b>Stella Maris Center:</b> Songkhla</p>	<table border="1"> <thead> <tr> <th>Year</th><th>Country</th><th>Province</th><th>District</th><th>Any other PHAMIT Partners/ other program in the area?</th></tr> </thead> <tbody> <tr> <td><b>2007 – Until interview date</b></td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>1. Move</td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>2. Not move</td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>8. Not remember</td><td></td><td></td><td></td><td></td></tr> <tr> <td>9. No response</td><td></td><td></td><td></td><td></td></tr> <tr> <td><b>2006</b></td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>1. Move</td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>2. Not move</td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>8. Not remember</td><td></td><td></td><td></td><td></td></tr> <tr> <td>9. No response</td><td></td><td></td><td></td><td></td></tr> <tr> <td><b>2005</b></td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>1. Move</td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>2. Not move</td><td></td><td></td><td></td><td>1. Yes 2. No Specify: _____</td></tr> <tr> <td>8. Not remember</td><td></td><td></td><td></td><td></td></tr> <tr> <td>9. No response</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	Year	Country	Province	District	Any other PHAMIT Partners/ other program in the area?	<b>2007 – Until interview date</b>				1. Yes 2. No Specify: _____	1. Move				1. Yes 2. No Specify: _____	2. Not move				1. Yes 2. No Specify: _____	8. Not remember					9. No response					<b>2006</b>				1. Yes 2. No Specify: _____	1. Move				1. Yes 2. No Specify: _____	2. Not move				1. Yes 2. No Specify: _____	8. Not remember					9. No response					<b>2005</b>				1. Yes 2. No Specify: _____	1. Move				1. Yes 2. No Specify: _____	2. Not move				1. Yes 2. No Specify: _____	8. Not remember					9. No response					
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	<b>7. Other (Specify)</b> ..... .....	<b>2004</b> 1. Move 2. Not move 8. Not remember 9. No response				1. Yes 2. No Specify: _____ 1. Yes 2. No Specify: _____ 1. Yes 2. No Specify: _____
		<b>2003</b> 1. Move 2. Not move 8. Not remember 9. No response				1. Yes 2. No Specify: _____ 1. Yes 2. No Specify: _____ 1. Yes 2. No Specify: _____
Q 112	Do you have relatives in Thailand ?	Yes No No response	1 2 9			
Q 113	Do you have registration or any other documents to work in Thailand?  <i>(If yes, what type of card do you have?)</i>	Yes No Don't know No response  Work permit card Pink card Blue card Orange card Green card Other..... Don't know No response	1 2 8 9  1 2 3 4 5 6 8 9			
Q 114	What is your usual occupation? or What kind of work do you do most of your time in Thailand?	Seafarer Seafood Procession Workers Factory Workers Plantation Workers Sex Workers/ Entertainment Other ..... No response	01 05 06 99			Q119

Q No.	Question & Filers	Coding Categories			Coding	Skip to
Q 115	For seafarer, with whom will you consult or from whom will you ask for help in case that you have problems during work?	Tai-Kong or master of the ship Head of the seafarer Friends or other seafarers ↓ Reason for get consult from friends: ..... ..... Other (specify) ..... ..... Not answer			01 02 03  04  99	
Q116	When you work on ship, how long is your leisure time (in hours)?	Specify ..... hrs			--	
Q117	On the ship, for what activity would you spend your <b>most of</b> leisure time?  (Single response promptly – Do not read the categories]	Read newspaper/magazine Listen to radio/cassette/CD Watch TV/VDO/VCD/DVD Exercise Rest Playing game/gambling Other (specify): ..... ..... ..... Not answer			01 02 03 04 05 06 07  09	
Q118	On the shore of Thailand, how would you prefer to spend your leisure time?  (Multiple response promptly – Do not read the categories)		<b>Yes</b>	<b>No</b>	<b>Not answer</b>	
		Shopping	1	2	9	
		Drinking	1	2	9	
		Visit karaoke bar	1	2	9	
		Going for sex worker	1	2	9	
		Hang around with sexual partner/girlfriend	1	2	9	
		Stay on broad	1	2	9	
		Visit tea bar	1	2	9	
		Other (specify): ..... .....	1	2	9	

Q No.	Question & Filers	Coding Categories	Coding	Skip to
Q119	How long for working this job?	.....Month .....Year		
Q120	What is your daily income ?  Try to get answer for Q120 on daily basis, otherwise ask how the income is paid.	Approximately .....baht  1. Weekly paid.....baht 2. Half month paid...baht 3. Monthly paid.....baht 4. A dividend for every ..... Months and for an amount of .....baht each time  5. Percentage counted per year .....baht 6. A lump sum for every ..... Months and for an amount of .....baht each time		
Q 121	Which whom do you presently live with?	Alone With Spouse With Family With Relatives With Employer With Peer/Friends/ Co-workers With Partner Other..... No response	01 02 03 04 05 06  07 08 99	
Q 122	What is type of your residence ?	Lodging in the work place Lodging outside the work place House Rent Flat Apartment On boat Other ..... No response	01 02 03 04 05 06 07 99	

Q No.	Question & Filers	Coding Categories			Coding	Skip to
Q 123	Currently living here, how are you satisfied with your life and surroundings?		Very much	Moderately	Little	Not answer
		1. Living arrangements	1	2	3	9
		2. Income generation	1	2	3	9
		3. Health status	1	2	3	9
		4. Employer and workplace	1	2	3	9
		5. Colleagues	1	2	3	9
		6. Neighboring with Thais	1	2	3	9
		7. Awareness on and protections of your rights	1	2	3	9
		8. Security in life and property	1	2	3	9
		9. Other (specify).....	1	2	3	9
Q 124	Can you speak Thai ?  <i>( If yes, how about it? )</i>	Yes				1
		No				2
		No response				9
		Good				1
		Fair				2
		Poor				3

**SECTION 2**  
**Knowledge, Opinions and Attitudes on HIV/AIDS**

Q No.	Question & Filers	Coding Categories	Coding	Skip to
Q 201	Have you ever heard of HIV/AIDS?	Yes No No response	1 2 3	} Q 301
Q 202	Can HIV/AIDS be prevented?	Yes No Don't know No response	1 2 8 9	
Q 203	Do you know anyone who is infected with HIV/AIDS?	Yes No Don't know No response	1 2 8 9	
Q 204	Do you know anyone who has died of HIV/AIDS?	Yes No Not sure No response	1 2 8 9	
Q 205	Can a person get HIV/AIDS by sharing a meal with someone with HIV or AIDS	Yes No Don't know No response	1 2 8 9	
Q 206	Can a person get HIV/AIDS from a mosquito bite if the mosquito has drawn blood from an HIV/AIDS infected person?	Yes No Don't know No response	1 2 8 9	
Q 207	Can a person get HIV/AIDS by getting injections with a needle that has been already used by someone else who is infected?	Yes No Don't know No response	1 2 8 9	
Q 208	Can a person get HIV/AIDS from an infected blood transfusion?	Yes No Don't know No response	1 2 8 9	
Q 209	Do you think that a healthy-looking person can also transmit HIV/AIDS?	Yes No Don't know No response	1 2 8 9	
Q 210	Can people get HIV/AIDS through fondling?	Yes No Don't know No response	1 2 8 9	
Q 211	Can people protect themselves from HIV/AIDS by abstaining from sexual intercourse?	Yes No Don't know No response	1 2 8 9	

Q No.	Question & Filers	Coding Categories	Coding	Skip to
Q 212	Can people protect themselves from HIV/AIDS by having one uninfected faithful sex partner?	Yes No Don't know No response	1 2 8 9	
Q 213	Can a pregnant woman infected with HIV or AIDS transmit the virus to her unborn child?	Yes No Don't know No response	1 2 8 9	
Q 214	Can a woman with HIV or AIDS transmit the virus to her newborn child through breast feeding?	Yes No Don't know No response	1 2 8 9	
Q215	Do you know that a pregnant women with HIV can prevent mother-to-child transmission by taking the antiretroviral treatment during her pregnancy?	Yes No Not sure No response	1 2 8 9	
Q216	Do you know the name of any <u>health care provider for foreigners</u> or their other invented name or their organization ?  (INTERVIEWER: Give example of nickname, organization name, or alias)	Yes (Specify names/nickname /address works) 1. .... 2. .... 3. .... Yes (Specify organization ) 1. .... 2. ....  No	1      2	
Q217	Do you know the name of any <u>health volunteer for foreigners</u> or their other invented name or their organization?  (INTERVIEWER: Give example of nickname, organization name, or alias)	Yes (Specify names/nickname /address works) 1. .... 2. .... 3. .... Yes (Specify organization ) 1. .... 2. ....  No	1      2	

Q No.	Question & Filers	Coding Categories	Coding	Skip to	
Q218	Referring to your answer in Q215 showing you know about the prevention of mother-to-child HIV transmission, from what source did you learn about this?	Yes	No	Not answer	
		Health center	1	2	9
		Governmental hospital	1	2	9
		Private hospital	1	2	9
		Family planning clinics / STI clinics	1	2	9
		Private clinic	1	2	9
		Non-governmental organization	1	2	9
		Health care provider for foreigners	1	2	9
		Health volunteer for foreigners	1	2	9
		Health service provider at health center	1	2	9
		Colleagues who ever been trained on this	1	2	9
		Friends	1	2	9
		Printed media of organization/PHAMIT partners in the area	1	2	9
		Other (specify).....	1	2	9
Q219	How long did you know this information? (Until the interview date)	.....days.....months .....years			
Q 220	Do we have any medicine that can cure a HIV/AIDS patient?	Yes No Don't know No response	1 2 8 9		
Q 221	Do you know any facility in your area where you can get tested for HIV/AIDS?	Yes No Not sure No response	1 2 8 9		
Q 222	Do you think it will be possible for someone to go and get HIV test done confidentially?  <i>(By confidential, I mean that no one will know the result if you don't want them to know it)</i>	Yes No Not sure No response	1 2 8 9		
		Yes high risk (Why do you think so? _____)	1		
		Yes but not high risk (Why do you think so? _____)	2		
		No not risk (Why not? _____)	3		
		Don't know	8		
		No response	9		

### SECTION 3

#### Knowledge on Condom

Q No.	Question & Filers	Coding Categories	Coding	Skip to																																																																																																																																												
Q 301	Have you ever heard of or seen a condom? (Show a condom)  (I mean a rubber object that a man puts on his penis before sex)	Yes No Don't know No response	1 2 8 9	} Q 401																																																																																																																																												
Q 302	For what purposes could a condom be used?  (Multiple responses possible - Do not read the categories)	Sexual pleasure Avoiding pregnancy/ FP method STI prevention HIV/AIDS control Other ..... Don't know No response	01 02  03 04 05 08 09																																																																																																																																													
Q 303	Which places or persons do you know from where you can obtain a condom?  (Multiple response promptly - Do not read the categories)	<table border="1"> <thead> <tr> <th></th><th>Y</th><th>N</th><th>DK</th><th>NR</th></tr> </thead> <tbody> <tr><td>Drug store</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Grocery/ General Shop</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Health Centre</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Government STI / FP Clinic</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Government Hospital</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Private Hospital</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Private Clinic</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Brothel/sex establishments</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Bar</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Guest house</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Motel</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Sexual Partner</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Male/female Sex Worker</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Friends who have been trained</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>NGO</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Health care staff</td><td></td><td></td><td></td><td></td></tr> <tr><td>Health care provider for foreigners</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Health volunteer for foreigners</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Gas Station</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Vending machine</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Condom distributor</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Motorcycle rider</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Ship</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Snooker bar</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Piers</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Friend</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> <tr><td>Other.....</td><td>1</td><td>2</td><td>8</td><td>9</td></tr> </tbody> </table>		Y	N	DK	NR	Drug store	1	2	8	9	Grocery/ General Shop	1	2	8	9	Health Centre	1	2	8	9	Government STI / FP Clinic	1	2	8	9	Government Hospital	1	2	8	9	Private Hospital	1	2	8	9	Private Clinic	1	2	8	9	Brothel/sex establishments	1	2	8	9	Bar	1	2	8	9	Guest house	1	2	8	9	Motel	1	2	8	9	Sexual Partner	1	2	8	9	Male/female Sex Worker	1	2	8	9	Friends who have been trained	1	2	8	9	NGO	1	2	8	9	Health care staff					Health care provider for foreigners	1	2	8	9	Health volunteer for foreigners	1	2	8	9	Gas Station	1	2	8	9	Vending machine	1	2	8	9	Condom distributor	1	2	8	9	Motorcycle rider	1	2	8	9	Ship	1	2	8	9	Snooker bar	1	2	8	9	Piers	1	2	8	9	Friend	1	2	8	9	Other.....	1	2	8	9		
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<b>INSTRUCTION:</b> If all codes in Q 303 are 8 or 9, then skip to Q 305																																																																																																																																																
Q 304	For those who need to procure a condom, do you think they are easily available	Yes No Don't know No response	1 2 8 9																																																																																																																																													
Q 305	Can people protect themselves from HIV/AIDS by using a condom correctly every time they have sex?	Yes No Don't know No response	1 2 8 9																																																																																																																																													
Q 306	Do you agree that only a man can get a condom ?	Yes No Don't know No response	1 2 8 9																																																																																																																																													



## SECTION 4

### Condom Usage and Sexual Behavior

**CONFIDENTIALITY CLAUSE AND CONSENT:** I would like to ask you some very personal question. It is up to you whether you want to answer these questions or not. Your answers will be kept completely confidential. These questions are on condom usage and sexual practices.

No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q 401	Have you ever had sexual intercourse ?	Yes No No response	1 2 9	} Q 501	
Q 402	At what age did you first have sexual intercourse?  (With either a regular or non regular partner)	Years..... Don't remember No response	 8 9		
Q 403	Do you have a <b>regular partner</b> ? (Spouse/ living together)	Yes No No response	1 2 9		
Q 404	Have you or your <b>regular partner</b> ever used a condom?	Yes No No response	1 2 9	→ Q 405 → Q 406 → Q 409	
Q 405	For what purposes have you used a condom while having sexual intercourse with your <b>regular partner</b> ?  (Multiple responses possible)	To avoid pregnancy To protect my self from STI/HIV/AIDS To protect my partner from STI/HIV/AIDS To protect my child/unborn child from STI/HIV/AIDS For pleasure Other ..... Don't know No response	01 02 03 04 05 06 98 99	} Q 407	
Q 406	For what purposes have you not used a condom while having sexual intercourse with your <b>regular partner</b> ?  (Multiple responses possible)	Not available Too expensive Partner objected Don't like Used other contraceptive method Didn't think it was necessary Didn't think of it Other..... Don't know No response	01 02 03 04 05 06 07 08 98 99		

No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q 407	How consistently have you used a condom with your <b>regular partner</b> over the last 12 months?	Always	1	} Q 408	
		Most of the times	2		
		Sometimes	3		
		Never (in last 12 months)	4	} Q 409	
		No response	9		
Q 408	Did you use a condom the last time you have sexual intercourse with your regular partner?	Yes (If yes why _____) _____)	1		
		No (If no why _____) _____)	2		
		Don't remember	8		
		No response	9		
Q 409	Have you pursued any other sexual relationship (with a <b>non-regular partner</b> ) in the last 12 months ?	Yes	1	→ Q 410	
		No	2		
		No response	9		
- If Q 409 is “No” and Q 403 also “No”, then skip to Q 501 for male and skip to Q 428 for female					
- If Q 409 is “No” and Q 404 is “Yes” skip to Q 416					
- If Q 409 is “No” and Q 404 also “No” ask Q 420 and Q 421 (with regular partner) then skip to Q 426 for male and skip to Q 428 for female					
- If Q 409 is “No” and Q 407 is “Never” ask Q 420 and Q 421 (with regular partner) then skip to Q 426 for male and skip to Q 428 for female					
Q 410	With how many <b>non-regular partners</b> have you had sexual intercourse in the last 12 months?		--		
		Number of partners			
		Don't remember	98		
		No response	99		
Q 411	Who were your <b>non-regular partners</b> in the last 12 months and what ethnic group do they belong to?  (Multiple responses possible)	<b>Non Regular Partner</b>		<b>Ethnic Group</b>	
		Boy friend	01		
		Girl friend	02		
		Friend	03		
		Fiance	04		
		Male sex worker	05		
		Female sex worker	06		
		Clients	07		
		Seafarer	08		
		Seafood procession worker	09		
		Factory worker	10		
		Other.....	11		
		Don't know	98	Don't know.....	98
		No response	99	No response.....	99

No.	Question & Filers	Coding Categories	Skip to	Coding Boxes
Q 412	How consistently did you use a condom with your <b>non-regular partner</b> or <b>sex worker</b> in the past one year?	<b>With non-regular partner</b> Always 1 Most of the time 2 Sometimes 3 Never 4 No response 9	<b>With sex worker</b> } Q 413 } } } → Q 420 for male Q 428 for female	1 2 3 4 9
- If Q 412 is “Never” and Q 407 is “Always” or “Most of the time” or “Sometimes”, then skip to Q 416				
- If Q 412 is “Never” and Q 407 is also “Never” ask Q 420 and Q 421 (with regular and non-regular partner) then skip to Q 426 for male and skip to Q 428 for female				
Q 413	Did you use a condom the last time you had sexual intercourse with your <b>non-regular partner</b> or <b>male or female sex worker</b> ?	<b>With non-regular partner</b> Yes 1 → Q 414 No 2 → Q 415 Don't remember 8 } Q 416 No response 9	<b>With sex worker</b> Yes 1 → Q 414 No 2 → Q 415 Don't remember 8 } Q 416 No response 9	1 2 8 9
Q 414	For what purposes have you used a condom the last time while having sexual intercourse with your <b>non regular partner</b> or <b>male/female sex worker</b> ?  (Multiple responses possible)	<b>With non-regular partner</b> To avoid pregnancy 01 To protect my self from STI/HIV/AIDS 02 To protect my partner from STI/HIV/AIDS 03 To protect my child/ unborn child from STI/HIV/AIDS 04 For pleasure 05 Other ..... 06 Don't know 98 No response 99	<b>With male/female sex worker</b> } Q 416 } } } } } } }	01 02 03 04 05 06 98 99
Q 415	For what purposes have you not used a condom the last time while having sexual intercourse with your <b>non regular partner</b> or <b>sex worker</b> ?  (Multiple responses possible)	<b>With non-regular partner</b> Not available 01 Too expensive 02 Partner objected 03 Don't like 04 Used other contraceptive method 05 Didn't think it was necessary 06 Didn't think of it 07 Other..... 08 Don't know 98 No response 99	<b>With male/female sex worker</b> } Q 416 } } } } } } }	01 02 03 04 05 06 07 08 98 99

No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q 416	In general, in which place can you frequently obtain a condoms?  (only one answer)	<b>With Regular Partner</b>		<b>With Non Regular Partner</b>	<b>With Sex Worker</b>
		Drug store	01	01	01
		Grocery/ General Shop	02	02	02
		Health Centre	03	03	03
		Government STI / FP Clinic	04	04	04
		Government Hospital	05	05	05
		Private Hospital	06	06	06
		Private Clinic	07	07	07
		Brothel/sex establishments	08	08	08
		Bar	09	29	09
		Guest house	10	10	10
		Motel	11	11	11
		Sexual Partner	12	12	12
		Male/female Sex Worker	13	13	13
		Friends who have been trained	14	14	14
		NGO	15	15	15
		Health care staff	16	16	16
		Health care provider for foreigners	17	17	17
		Health volunteer for foreigners	18	18	18
		Gas Station	19	19	19
		Vending machine	20	20	20
		Condom distributor	21	21	21
		Motorcycle rider	22	22	22
		Ship	23	23	23
		Snooker bar	24	24	24
		Piers	25	25	25
		Friend	26	26	26
		Other.....	27	27	27
		Do not know	98	98	98
		Not answer	99	99	99
Q 417	How long did you obtained a condom when you needed?	<b>With Regular Partner</b>	<b>With Non Regular Partner</b>	<b>With Male/female Sex Worker</b>	
		Approximately	Approximately	Approximately	
		..... Minutes	..... Minutes	..... Minutes	
		..... Hours	..... Hours	..... Hours	
		..... Days	..... Days	..... Days	
		Don't know 98	Don't know 98	Don't know 98	
		No response 99	No response 99	No response 99	

No.	Question & Filers	Coding Categories	Skip to	Coding Boxes
Q 418	Can you obtain a condom every time you need?	<b>With Regular Partner</b>	<b>With Non Regular Partner</b>	<b>With Male/female Sex Worker</b>
		Yes	1 → Q 420	1 → Q 420 ← 1
		No	2	2
		No response	9	9
Q 419	Why can't you obtain a condom every time you need ?  (Multiple responses possible)	<b>With Regular Partner</b>	<b>With Non Regular Partner</b>	<b>With Male/fe male Sex Worker</b>
		Too expensive	01	01
		Too far	02	02
		Don't know any place to get	03	03
		Shame	04	04
		No place to buy	05	05
		Others .....	06	06
		No response	99	99
Q 420	Before having sexual intercourse, have you ever used any drug?  ( If yes, how frequent have you ever used? )	<b>With Regular Partner</b>	<b>With Non Regular Partner</b>	<b>With Male/fe male Sex Worker</b>
		Yes	1	1
		No	2	2
		No response	9	9
		Always	1	1
		Most of the time	2	2
		Sometimes	3	3
		No response	9	9
Q 421	Before you having sexual intercourse, have you ever drunk any alcohol?  ( If yes, how frequent have you ever drunk ? )	<b>With Regular Partner</b>	<b>With Non Regular Partner</b>	<b>With Male/female Sex Worker</b>
		Yes	1	1
		No	2	2
		No response	9	9
		Always	1	1
		Most of the time	2	2
		Sometimes	3	3
		No response	9	9

No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q 422	Do you agree that using a condom will reduce pleasure for sexual intercourse ?	<b>With Regular Partner</b>		<b>With Non Regular Partner</b>	<b>With Male/fe male Sex Worker</b>
		Yes	1	1	1
		No	2	2	2
		Not sure	8	8	8
		No response	9	9	9
Q 423	Can you convince your partner to use a condom when you need?	<b>With Regular Partner</b>		<b>With Non Regular Partner</b>	<b>With Male/fe male Sex Worker</b>
		Yes	1	1	1
		No	2	2	2
		No response	9	9	9
Q 424	Can you deny to have sexual intercourse when your partner object to use a condom?	<b>With Regular Partner</b>		<b>With Non Regular Partner</b>	<b>With Male/fe male Sex Worker</b>
		Yes	1	1	1
		No	2	2	2
		No response	9	9	9
Q 425	What are you going to do if your partner refuse to use a condom?	<b>With Regular Partner</b>		<b>With Non Regular Partner</b>	<b>With Male/fe male Sex Worker</b>
		Refuse to have sexual intercourse	1	1	1
		Accept to have sexual intercourse without a condom	2	2	2
		Convince until your partner agree to use a condom	3	3	3
		Other .....	4	4	4
		Don't know	8	8	8
		No response	9	9	9
Q426	Have you ever have your penile modifications (including oil injections)?	Yes		1	
		Please specify .....			
		.....			
		.....			
		No		2	
		No answer		9	
					} Q501

No.	Question & Filers	Coding Categories	Coding Boxes	Skip to
Q427	What is your reasons for having the penile modifications?	Specify..... ..... ..... ..... ..... .....		} Q501
<b>THIS PART IS ONLY FOR WOMEN AGED 15-49</b>				
Q 428	Do you have children ?	Yes No Single No response	1 2 3 9	} Q 501
Q 429	How many children do you have? (Number of living children)	-----	--	
Q 430	Who make decision to have children?	Myself My spouse Myself and my spouse  Other----- Don't know No response	1 2 3  4 8 9	
Q 431	How many children do you want to have?	-----	--	
Q 432	How old is your youngest child?	Years -----	--	
<b>- If the youngest child aged 0-4 ask Q 433 to Q 448</b> <b>- If the youngest child is 5 years and over, please specify the current age of the youngest child..... years, then ask Q 448 and then skip to Q 452</b>				
Q 433	Did you want to have pregnant your youngest child?	Yes No Don't know No response	1 2 8 9	
Q 434	Did you get or seek any antenatal care for this child?	Yes No Government hospital Private hospital Private clinic Health center Health volunteer /health volunteer workers Traditional doctor Family planning clinic Other----- Don't know No response	1 2 01 02 03 04 05 06 07 08 98 99	→ Q 438

No.	Question & Filers	Coding Categories	Coding Boxes	Skip to
Q 436	Did you get help from anybody when seeking for the antenatal care?  If yes, who provided that helps?  (Multiple answer allowed)	Yes No Not answer  Health care provider for foreigners Health volunteer for foreigners Colleagues Roommates Employers Partner Other (specify) ..... Don't know Not answer	1 2 9  01 02 03 04 05 06 07  98 99	} Ask Q437
Q 437	Have you ever visited medical doctor for your antenatal care?  If yes, was there anybody providing you help in visiting doctors?  If yes, who was the one providing you such help? (Multiple answer allowed)	Yes No Not answer  Yes No Don't know Not answer  Health care provider for foreigners Health volunteer for foreigners Other (specify) ..... ..... Don't know Not answer	1 2 9  1 2 8 9  1 2 3  8 9	} Ask Q438  } Q439  } Q439
Q 438	If no, why you did not get or seek any antenatal care?	Service to far No registration No transport Inconvenient opening hours Lack of personnel Poor quality of services  Other----- Don't know No response	01 02 03 04 05 06  07 98 99	
Q 439	Where did your this child born?  Where did you delivery your this child ?	Myanmar Cambodian Loa Thailand Other..... No response  Government hospital Private hospital Private clinic Health center Health volunteer /health volunteer workers Traditional doctor Family planning clinic  Other----- Don't know No response	1 2 3 4 5 9  01 02 03 04 05 06 07  08 98 99	



No.	Question & Filers	Coding Categories	Coding Boxes	Skip to
Q 440	Have you had any doctor come to see or provide you for a service?  If no, is there any other people coming or providing you helps?	Yes No No response  Yes Please specify <b>(multiple answer allowed)</b> 1. Health center service provider 2. Health care provider for foreigners 3. Health volunteer for foreigners 4. Other (specify)..... No Not answer	1 2 9  1     2 9	
Q 441	Did you have any complication during delivery/postpartum period for your this child ?	Yes No No response	1 2 9	} Q 443
Q 442	What are the complications?	Headache Severe bleeding Convulsions/fits High fever Swelling of feet and face (edema) Infection Anemia Prolonged/obstructed labor  Other----- Don't know No response	01 02 03 04 05 06 07 08  09 98 99	
Q 443	Did you get or seek any postpartum care for your this child?	Yes No No response	1 2 9	} Q 447
Q 444	If yes, where did you get or seek postpartum care?	Government hospital Private hospital Private clinic Health center Health volunteer/ health volunteer workers Traditional doctor Family planning clinic  Other..... Don't know No response	01 02 03 04 05  06 07  08 98 99	

No.	Question & Filers	Coding Categories	Coding Boxes	Skip to
Q445	Did you get help from anybody when seeking for the postpartum care?	Yes	1	} Ask Q 446
		No	2	
		Not answer	9	
	If yes, who provided that helps?  <b>(Multiple answer allowed)</b>	Health care provider for foreigners	01	
		Health volunteer for foreigners		
		Colleagues	02	
		Roommates	03	
		Employers	04	
		Partner	05	
		Other (specify)	06	
		.....	07	
		Don't know		
		Not answer	98 99	
Q446	Have you ever visited medical doctor for your postpartum care?	Yes	1	} Ask Q 447
		No	2	
		Not answer	9	
	If yes, was there anybody providing you help in visiting doctors?	Yes	1	} Q 448
		No	2	
		Don't know	8	
		Not answer	9	
	If yes, who was the one providing you such help?  <b>(Multiple answer allowed)</b>	Health care provider for foreigners	01	
		Health volunteer for foreigners		
		Colleagues	02	
		Roommates	03	
		Employers	04	
		Partner	05	
		Other (specify)	06	
		.....	07	
		Don't know		
		Not answer	98 99	
Q 447	If no, why did you not get or seek postpartum care?	Service to far	01	
		No registration	02	
		No transport	03	
		Inconvenient opening hours	04	
		Lack of personnel	05	
		Poor quality of services	06	
		Other-----	07	
		Don't know	98	
		No response	99	

No.	Question & Filers	Coding Categories	Coding Boxes	Skip to																												
Q448	If any of your children become sick, can you take your child to any health center or government hospital?	Yes No If no, why (specify reason) 1. .... 2. .... 3. ....	1 2																													
Q449	How many births you have given during the years 2003 – 2006?	Number of births ..... No birth during these periods	1 2	→ Q 452																												
Q450	During 2003 – 2006 where has each of your children lived?	<table border="1"> <thead> <tr> <th></th><th>1<sup>st</sup> child</th><th>2<sup>nd</sup> child</th><th>3<sup>rd</sup> child</th></tr> </thead> <tbody> <tr> <td>Myanmar</td><td>1</td><td>1</td><td>1</td></tr> <tr> <td>Cambodia</td><td>2</td><td>2</td><td>2</td></tr> <tr> <td>Laos</td><td>3</td><td>3</td><td>3</td></tr> <tr> <td><b>Thailand</b></td><td>4</td><td>4</td><td>4</td></tr> <tr> <td>Other (specify) .....</td><td>5</td><td>5</td><td>5</td></tr> <tr> <td>Not answer</td><td>9</td><td>9</td><td>9</td></tr> </tbody> </table>		1 <sup>st</sup> child	2 <sup>nd</sup> child	3 <sup>rd</sup> child	Myanmar	1	1	1	Cambodia	2	2	2	Laos	3	3	3	<b>Thailand</b>	4	4	4	Other (specify) .....	5	5	5	Not answer	9	9	9	} Q 452    } Q 452	
	1 <sup>st</sup> child	2 <sup>nd</sup> child	3 <sup>rd</sup> child																													
Myanmar	1	1	1																													
Cambodia	2	2	2																													
Laos	3	3	3																													
<b>Thailand</b>	4	4	4																													
Other (specify) .....	5	5	5																													
Not answer	9	9	9																													
Q451	If staying in Thailand, have you child been taken care by any nursery centers run by any private or governmental organizations in the area?	Yes No  <b>If no, why?</b> 1. I take care of the child myself 2. No such nursery center in the area 3. Other (specify)  Not answer	1 2     9																													
Q452	Do any of your child who is 5 to 12 years old living in Thailand? If yes, how many children?	Yes Specify number ..... No	1 2	→ Q501																												
Q 453	Do all of them <b>who is 5 years old or over</b> are in school ?	Yes, all of them are in school (If yes, what school.....) .....  No, not all of them are in school why not 1. .... 2. .... 3. ....  Not answer	1 2     9																													

### SECTION 5 Knowledge on STIs

Q No.	Question & Filers	Coding Categories	Coding	Skip to
Q 501	Have you ever heard of any diseases other than HIV/AIDS that can be transmitted through sexual contact?	Yes No No response	1 2 9	} Q 505
Q 502	Do you agree that a person suffering from STI has a high chance of HIV/AIDS exposure?	Yes No Don't know No response	1 2 8 9	
Q 503	Can you tell me what symptoms a <b>WOMAN</b> might have when she is infected with STI? Any others?  <b>DO NOT READ OUT THE SYMPTOMS</b>  (MORE THAN ONE ANSWER IS POSSIBLE)	<b>SPONTANEOUS RESPONSE</b> Lower Abdominal pain Genital discharge Foul smelling discharge Burning/pain during urination Genital Ulcers/sores Swellings in groin area/ Pain during sexual intercourse Itching/reddening Warts Skin rashes  Other ..... Don't know No response	 01 02 03 04 05 06  07 08 09  10 98 99	
Q 504	Can you tell me what symptoms a <b>MAN</b> might have when he is infected with STI? Any others?  <b>DO NOT READ OUT THE SYMPTOMS</b>  (MORE THAN ONE ANSWER IS POSSIBLE)	<b>SPONTANEOUS RESPONSE</b> Lower Abdominal pain Genital discharge Foul smelling discharge Burning/pain during urination Genital Ulcers/ sores Swellings in groin area Itching/reddening Warts Skin rashes Can't retract foreskin  Other ..... Don't know No response	 01 02 03 04 05 06 07 08 09 10  11 98 99	

Q No.	Question & Filers	Coding Categories	Coding	Skip to
Q 505	Have you had a thick yellowish/greenish discharge with foul smell from your penis/vagina in the past 12 months?	Yes No Don't remember No response	1 2 8 9	
Q 506	Have you had an ulcer or sore in your genital area in the past 12 months?	Yes No Don't remember No response	1 2 8 9	} Q 516
Q 507	What did you do the last time you had any of these problems?  (Multiple responses possible)	Took home based preparation Went to a traditional healer/quack Went to a trained village health worker Went to a Private clinic/ hospital Went to a Govt. clinic/ hospital Took medicine I had at home Purchased medicine from a medical store No treatment Borrowed prescription from friend/relative  Went to meet Health care provider for foreigners /Health volunteer for foreigners Colleagues  Other .....  Don't know No response	01 02 03 04 05 06 07 08 09  10  11  98 99	} Q 516          } Q 516
Q 508	Were you physically examined by the doctor/paramedical staff?	Yes No Don't remember	1 2 8	
Q 509	Whether you were given any counseling?	Yes No Don't remember	1 2 8	
Q 510	Were you given counseling on the usage of condoms?	Yes No Don't remember	1 2 8	
Q 511	Did the doctor ask you to bring along your sexual partner(s) to the clinic/hospital for treatment/advice?	Yes No Don't remember No response	1 2 8 9	} Q 514

Q No.	Question & Filers	Coding Categories	Coding	Skip to
Q 512	Did your partner(s) turn up to the clinic/ hospital for treatment/ advice?	Yes No Don't remember No response	1 2 8 9	} Q 514
Q 513	If yes, did he/she receive treatment/ advice/ counseling from the clinic/ hospital	Yes No Don't remember No response	1 2 8 9	
Q 514	Were you satisfied with the quality of treatment you received?	Fully satisfied Somewhat satisfied No satisfied No response	1 2 3 9	
Q 515	Did you get help from anybody when seeing doctor If yes, who provided that help?	Health care provider for foreigners Health volunteer for foreigners Colleagues Roommates Employers Partner Other (specify) ..... Don't know Not answer	01 02 03 04 05 06 07 98 99	
Q516	In case you have any of the symptoms of STI, whom would you prefer to approach?  (circle one only)	Government Hospital/ Gov. Doctors dispensary private doctor Gov. STI Clinic NGO clinics Faith healers/ quacks Went to meet Health care provider for foreigners /Health volunteer for foreigners Colleagues  Others ..... Don't Know No response	01 02 03 04 05 06 07 08 98 99	

### SECTION 6

#### Exposure to Mass Media and IEC Intervention

Q No.	Question & Filers	Coding Categories	Skip to	Coding Boxes
Q 601	Before you move to Thailand did you know of HIV/AIDS?	Yes No No response	1 2 3	
Q 602	Did anyone in the past one year approach you to educate or train you on spread of STI/HIV/AIDS?  <b>CHECK : Answer can be code 03 only if it is 'NO' Q 201 and Q 501</b>	Yes No Never heard of STI/HIV/AIDS No response	1 2 → Q 604 3 → Q 610 9 → Q 604	
Q 603	Who are these individuals?  <i>(Multiple responses possible)</i>	Government Doctor Private Doctor Health Center Staff Village Health Volunteer FP Clinic/STI Clinic Friends/Peer educator Spouse Family Members Visiting Health Workers Workers from NGOs (Health care provider for foreigners /Health volunteer for foreigners Colleagues) Mobile Clinic Gov. Mobile Clinic NGO Mobile Clinic NGO Small Group Training NGO Volunteer Training (Health care provider for foreigners /Health volunteer for foreigners Colleagues)  Other ..... Don't know Don't remember No response	01 02 03 04 05 06 07 08 09 10  11 12 13 14 15  20 97 98 99	
Q 604	(Besides individuals) what are the (other) sources from where you have come to know about HIV/AIDS/STI ?  <i>(Multiple responses possible)</i>	Radio TV Cinema Hall News Paper Hoarding/Placard/ Billboards/Wall writing Poster Brochure / Pamphlets/ Booklets Public Announcements Drama/Street Play/ Puppet show  Other..... No other source Don't remember No response	01 02 03 04 05 06 07 08 09  10 11 98 99	

Q No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q 605	What language did you receive in educating or training about spread of STI/HIV/AIDS?  <i>(If more than one answer please fill in other)</i>	Burmese Khmer Lao Thai Other.....  Don't remember No response	1 2 3 4  5 8 9		
Q 606	Did anyone in the past one year approach you or your family members to educated you on use of condoms to prevent STI/HIV/AIDS?  <b>CHECK : Answer can be code 03 only if it is 'NO' in Q 301</b>	Yes No  Never heard of condom No response	1 2  3 8	→ Q 608 } Q 610	
Q 607	Who are these individuals?  <i>(Multiple responses possible)</i>	Government Doctor Private Doctor Health Center Staff Village Health Volunteer FP Clinic/STI Clinic Friends/Peer educator Spouse Family Members Visiting Health Workers Workers from NGOs Mobile Clinic Gov. Mobile Clinic NGO Mobile Clinic NGO Small Group Training NGO Volunteer Training  Other ..... Don't remember No response	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15  20 98 99		
Q 608	(Besides individuals) what are the (other) sources from where you have come to know about use of condom to prevent HIV/AIDS/STI  <i>(Multiple responses possible)</i>	Radio TV Cinema Hall News Paper Hoarding/Placard/ Billboards/Wall writing Poster Brochure / Pamphlets/Booklets Public Announcements Drama/Street Play/ Puppet show Other..... None of these Don't remember No response	01 02 03 04 05 06 07 08 09 10 11 98 99		



Q No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q 609	What language did you receive in educating or training on using of condoms to prevent STI/HIV/AIDS?	Burmese Khmer Lao Thai  Other..... No response	1 2 3 4  5 9		
Q 610	Did you or your family members ever attend/participate in any campaign/ meeting on STI/HIV/AIDS ?	Yes No No response	1 2 9	} Q 612	
Q 611	If yes, who ever attended or participated?	Myself My spouse Both (myself and my spouse) My family members  Other..... No response	1 2 3 4  5 9		
Q 612	Have you ever come across campaigns on voluntary blood donation?	Yes No No response	1 2 9		
Q 613	Have you in the past 1 year donated blood voluntarily?	Yes No No response	1 2 9		
Q614	Have you or your family member ever been screened or tested for STI?	Yes No No response	1 2 9	} Q616	
Q615	If yes, where did you get the test?	Government/private hospital Health center Other (specify) No response	1 2 3 9		
Q616	Do you know any places providing counseling and testing for HIV?	Yes No No response	1 2 9	} Q625	
Q617	If yes, where can you get the test?	Government/private hospital Health center Other (specify)	1 2 9		
Q618	Have you ever been tested for HIV?	Yes No No response	1 2 9	} Q625	

Q No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q619	<b>For what reason have you get the HIV testing?</b>	<b>Being pregnant</b>	<b>1</b>		
		Applying for a job	2		
		Getting married	3		
		Having high-risk sexual partner	4		
		Own sexual risk	5		
		Partner is HIV positive	6		
		Regular medical check-up	7		
		Getting operations/treatment	8		
		Blood donations	9		
		Curiosity	10		
		Compulsory testing	11		
		No reason to explain	12		
		Other (specify)	13		
		Not answer	99		
Q620	Did you get pre-test counseling before the blood test?	Yes	1		
		No	2		
		No response	9		
Q621	Where did your latest HIV test take place?	Government hospital	1		
		Health center	2		
		Family Planning Clinic	3		
		Anonymous Clinic (Thai Red Cross)	4		
		Community Health Center	5		
		BMA Public Health Center	6		
		BMA AIDS Center	7		
		Other government service centers (Specify)	8		
		.....			
		Private hospital	9		
		Private clinic	10		
		Other non-governmental organization (specify)	11		
		.....			
		Get tested at the community by service provider	12		
		Other (specify)	13		
		Not answer	99		
Q622	When was your latest HIV test?	Specify month/year			
		.....			
Q623	We don't mean to know your result, but we want to ask if you received the result of your latest HIV test?	Yes	1		
		No	2		
		No response	9		

Q No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q624	Do you have any idea about where you would be referred to in case it turned out that you were HIV positive?	Yes Where: .....	1		
		No	2		
		No response	9		
Q625	Have you ever heard about the antiretroviral treatment for PWHA (i.e. treatment that reduce the chance of PWHA to become sick of AIDS or that relieve the symptoms of infection?	Yes	1	} Q701	
		No	2		
		Not sure	7		
		Don't know	8		
		Not answer	9		
Q626	From what source or from whom have you learn about the treatment?  (Multiple responses possible - Do not read the categories and prompt)	Radio	01		
		TV	02		
		Magazine	03		
		Poster	04		
		School	05		
		Family member/ relatives	06		
		Friends	07		
		Neighbors	08		
		Pamphlets	09		
		Husband/Wife or Cohabited partner or Regular partner/ Non-regular partner	10		
		Boy/girlfriend	11		
		Male/female sex worker	12		
		Health service provider for foreigners	13		
		Health volunteers for foreigners	14		
		Medical doctor	15		
		Nurse or health authorities	16		
		Health service provider	17		
		Employer	18		
		Workplace	19		
		Internet	20		
		Meeting/seminar	21		
		Other (specify)	22		
		Not answer	99		
Q 627	During the last 1 month how often have you watched television?	Every day	1		
		At least once a week	2		
		Not at all for some week/on average once every 2-3 weeks	3		
		One a month	4		
		Did not watch TV in last 4 weeks	5		
		Do not have TV	8		
		No response	9		

Q No.	Question & Filers	Coding Categories		Skip to	Coding Boxes
Q 628	During the last 1 month how often have you listened radio?	Every day	1		
		At least once a week	2		
		Not at all for some week/on average once every 2-3 weeks	3		
		Once a month	4		
		Did not listen to radio in last 4 weeks	5		
		Do not have radio	8		
		No response	9		
Q 629	During the last 1 month how often have you read newspaper?	Every day	1		
		At least once a week	2		
		Not at all for some week/on average once every 2-3 weeks	3		
		Once a month	4		
		Did not listen to radio in last 4 weeks	5		
		Cannot read	8		
		No response	9		

**SECTION 7**  
**Access to Health Service for Illness Requiring Treatment**

Q No.	Question & Filers	Coding Categories	Yes	No	Skip to	Coding Boxes
Q 701	Where did you go when you were ill and required treatment ?  <b>(PROMPT)</b>	Government Service / Government Hospital (If no why _____)	1	2	Not ill	NR
		Private Service / Private Hospital (If no why _____)	1	2	8	9
		Private Clinic (If no why _____)	1	2	8	9
		Health Center (If no why _____)	1	2	8	9
		Traditional healers / quack doctor (If no why _____)	1	2	8	9
		Other _____	1	2	8	9
<b>IF Q 701 is “No” or code “8” or code “9” skip to Q 706</b>						
Q 702	How about the quality of health services have you ever received?	Good Not good Not sure No response	1 2 3 9			
Q 703	Were you satisfied with the quality of treatment you received?	Fully satisfied Somewhat satisfied No satisfied No response	1 2 3 9			
Q 704	How convenient have you received for health services?	Convenient Not Convenient No response	1 2 9			
Q 705	Did you get help from anybody when seeking for the postpartum care?  If yes, who provided that helps?  (Multiple answer allowed)	Yes No Not answer  Health care provider for foreigners Health volunteer for foreigners Colleagues Roommates	1 2 9  01 02 03 04	} Ask Q706		

Q No.	Question & Filers	Coding Categories			Skip to	Coding Boxes
		Employers	05			
		Partner	06			
		Other (specify).....	07			
		Don't know	08			
		Not answer	09			
Q 706	Do you know that you have right to access health service utilization?	Yes	1			
		No	2			
		Not sure	3			
		No response	9			
Q 707	Do you <b>know</b> any modern contraceptive methods ?  (Multiple responses possible - Do not read the categories)		<b>Yes</b>	<b>No</b>	<b>NR</b>	
		Pill	1	2	9	
		IUD	1	2	9	
		Injection	1	2	9	
		Sterilization	1	2	9	
		Vasectomy	1	2	9	
		Norplant	1	2	9	
		Condom	1	2	9	
		Other.....	1	2	9	
Q 708	What any other modern contraceptive methods have you and/or your spouse or partner <b>ever used</b> ?  (Multiple responses possible - Do not read the categories)		<b>Yes</b>	<b>No</b>	<b>NR</b>	
		Pill	1	2	9	
		IUD	1	2	9	
		Injection	1	2	9	
		Sterilization	1	2	9	
		Vasectomy	1	2	9	
		Norplant	1	2	9	
		Condom	1	2	9	
		Other.....	1	2	9	
Q 709	What any other modern contraceptive methods have you and/or your spouse or partner <b>currently used</b> ?  (Multiple responses possible - Do not read the categories)		<b>Yes</b>	<b>No</b>	<b>NR</b>	
		Pill	1	2	9	
		IUD	1	2	9	
		Injection	1	2	9	
		Sterilization	1	2	9	
		Vasectomy	1	2	9	
		Norplant	1	2	9	
		Condom	1	2	9	
		Other.....	1	2	9	
Q710	If your spouse/partner are not using any methods, what is the major reason for not using any?  (only one answer)	Being pregnant/in post-partum period/post-abortion period			1	
		Under medial instruction			2	
		Spouse or partner is sterilized			3	
		Birth spacing			4	
		Ovary operated			5	
		Menopause or perceiving of aging			6	
		Afraid of side effects/allergy			7	
		Husband not agree to use			8	
		Friends or relatives not recommend			9	
		Not having sex (husband stay away or ***)			10	
		Need more children			11	
		Not convenient to get any method			12	
		Do not like the service provider			13	
		Not affordable			14	
		Conflict to religious or spirituals			15	
		Other (specify)			16	

**SECTION 8**  
**Perception about unit or organization in community providing**  
**information and services related to health, HIV/AIDS and condom use**

Q No.	Question & Filers	Coding Categories	Coding Boxes	Skip to
Q801	Do you know any unit or organization in your community providing information and services related to HIV/AIDS and condom use?	Yes No (I don't know) Do not know Not answer	1 2 8 9	→ Q803
Q802	If not know (2), do you know any health service provider or health volunteers for foreigners who work for any non-governmental organization in this area?	Yes Specify name: ..... ..... No	1 2	→ Finish interview
Q803	If know (answer 1 in 801), do you the name or address works of such unit or organization?	Yes No (I don't know) Do not answer	1 2 9	} Q 805
Q804	If yes, please provide the name or address works of the unit or organization?	1..... 2..... 3..... Don't know	1 2	→ Finish interview
Q805	How long have you known the organizations in this area?  (Emphasized only on PHAMIT Project)	Less than 6 months 1 year 2 year 3 year 4 year More than 5 years Other (specify)..... ..... Cannot remember Don't know Not answer	00 01 02 03 04 05 06 97 98 99	
Q806	How did you know the organizations?  (Multiple answer allowed)	Know by self From staff of the unit/organization in the area (i.e. Health service provider for foreigners or health volunteers for foreigners) Friends recommend Family member/relatives recommend Governmental health service provider recommend Printed media of organization in the area Other (specify)..... Cannot remember Do not know Not answer	01 02 03 04 05 06 07 97 98 99	
Q807	Have you ever visited drop-in center/clinic/organization in the area of (specify name of organization in the area) ?	Yes No Not answer	1 2 9	} Q811

Q No.	Question & Filers	Coding Categories	Coding Boxes		Skip to
Q808	If yes, could you please specify every service you ever used in the organization?	Which of the following services have you ever used?	Ever used	Never used	Do not know/ Not answer
		1. general health care	1	2	9
		2. STI screening and treatment	1	2	9
		3. Counseling on STI	1	2	9
		4. Counseling on HIV and AIDS	1	2	9
		5. Antenatal care	1	2	9
		6. Post-partum care	1	2	9
		7. Referring to government hospital	1	2	9
		8. Condom distribution	1	2	9
		9. Injectables	1	2	9
		10. Sterilization	1	2	9
		11. Temporarily shelter	1	2	9
		12. Help related to language	1	2	9
		13. Thai language practices	1	2	9
		14. Legal help	1	2	9
		15. Counseling on referring	1	2	9
		16. Other (specify).....	1	2	9
Q809	Do you expect any other services?	Yes No Don't know Not answer	1 2 8 9	} Q811	
Q810	If yes, what kind of service you would recommend?	1..... 2..... 3..... 4.....			
Q811	Have you ever received information from the unit/organization in the area or from the staff/volunteer named (PHAMIT project) .....	Yes (how many time?.....)  No Not answer	1  2 9	} Q814	
Q812	If yes, what kind of information have you received? (Multiple answer allowed)	Sexually transmitted infection Protection/infection of HIV Condom use Maternal and child health Language Law Other (specify) ..... ..... Cannot remember Do not know Not answer	1 2 3 4 5 6 7  97 98 99		
Q813	How did you get the information? (Multiple answer allowed)	Training/seminar Group discussion Private counseling VDO/CD Campaign/exhibitions Other (specify)..... ..... Cannot remember Do not know Not answer	1 2 3 4 5 6  97 98 99		



Q No.	Question & Filers	Coding Categories	Coding Boxes	Skip to
Q814	Have you ever get any printed media from the unit/organization in the area?	Yes Specify the last time receiving the printed media: ..... No, never received any printed media Cannot remember Do not know Not answer	1  2 7 8 9	} Q817
Q815	If yes, what are the printed media have you ever received?  <b>(Please specify all the media)</b>	1..... 2..... 3..... 4..... Cannot remember Do not know Not answer	7 8 9	
Q816	Do you think those media useful for you?	Yes No Do not know Not answer	1 2 8 9	
Q817	Do you think the services provided in the area by those unit/organization useful for you?  If yes, what type of service you think useful for you?	Yes No Do not know Not answer 1..... 2..... 3..... 4..... 5.....	1 2 8 9	
Q818	Do you think the health service and other service you have received are the work of the unit /organization in the area? (Emphasized only on PHAMIT Project)	Yes No Don't know Not answer	1 2 8 9	
Q819	Rather than availability of these service, do you have any recommendations for their betterment of PHAMIT project?	<b>Personnel</b> 1..... 2..... 3..... <b>Information and education</b> 1..... 2..... 3..... <b>Media</b> 1..... 2..... 3..... <b>Drop-in center</b> 1..... 2..... 3.....		

Q No.	Question & Filers	Coding Categories	Coding Boxes	Skip to
Q820	Since you have received services from the unit/organization, do you think you have changed your sexual behavior?	Yes No Have no experienced Don't know Not answer	1 2 3 8 9	} Finish interview
Q821	If yes, how do you think your sexual behavior have been changed? <b>(Multiple answer allowed)</b>	Use more condom Less number of partners Other (specify)..... Do not know Not answer	1 2 3 8 9	
Q822	Do you think the changes in your sexual behavior are resulted from your contact with the unit/organization or with the person named (PHAMIT project ) .....?	Yes No Do not know Not answer	1 2 8 9	

....**Thank you...**