

potential solution to over-report, allowing interventions to target populations at risk from inconsistent condom use. This study uses a biomarker for unprotected sex to evaluate the accuracy of adolescent women's reports of condom use.

Methods The sample comprised 715 African-American female participants in an HIV prevention trial who were ages 15–21, sexually active, and recruited from three urban Atlanta family planning and STI clinics in 2002–2004. At baseline, 6, and 12 months, participants completed a 40 min ACASI interview and were tested for semen Y-chromosome with PCR from a self-administered vaginal swab. Data analysis used non-parametric tests for trend and clustered logistic regression to predict self-reported pregnancy.

Results At the three waves respectively 30%, 20% and 15% of participants who reported 100% condom use tested positive for semen Y chromosome. Suspected over-reporters of condom use were more likely to report being pregnant at the following wave than any other category of condom and birth control users: at wave 2, 20.4% of wave 1 suspected over-reporters were pregnant vs 14.2% of wave 1 condom never-users and 9.8% of those reporting no birth control at last sex; at wave 3, 16.2% of wave 2 suspected over-reporters were pregnant vs 11.8% of condom never-users and 10.8% reporting no birth control at last sex. Suspected over-reporters of unprotected sex were more likely to report pregnancy at the following wave, controlling for frequency of sex, condom use, and oral contraception (OR 3.95 (1.63 to 9.58), 2.64 (0.92 to 7.58)) see Abstract P2-S1.18 Table 1.

Conclusions Respondents who report 100% condom use but test positive for semen Y-chromosome are at higher risk than other women. These women may be over-reporting their condom use and under-reporting their frequency of sex.

Abstract P2-S1.18 Table 1 Prediction of pregnancy with logistic regression. Analysis was limited to those who participated in all 3 waves of the survey (n=560). Did not report sex past 60 days are those who participated in the wave but did not answer the question how many times they had sex in the past 60 days. Condom use in the past 60 days was imputed from condom use in the past 14 days for these individuals. Predictors of pregnancy are measured in the wave previous to pregnancy

Variable	OR (95% CI)	p
Pregnancy at wave 2		
Suspected over-report	3.95 (1.63 to 9.58)	0.002
Times sex past 60 days	1.02 (1.00 to 1.05)	0.02
Proportion condom use past 60 days	0.50 (0.21 to 1.18)	0.11
Birth control pill	0.42 (0.12 to 1.40)	0.16
Did not report sex past 60 days	0.57 (0.15 to 2.17)	0.41
Pregnancy at wave 3		
Suspected over-report	2.64 (0.92 to 7.58)	0.07
Times sex past 60 days	1.04 (1.02 to 1.06)	0.000
Proportion condom use past 60 days	0.56 (0.24 to 1.31)	0.18
Birth control pill	0.14 (0.02 to 1.08)	0.06
Did not report sex past 60 days	1.52 (0.57 to 4.01)	0.40

Social and behavioural aspects of prevention poster session 2: Female sex workers

P2-S2.01 SUPPORT GROUPS AS A STRATEGY FOR REDUCING HIV VULNERABILITY AMONG FEMALE SEX WORKERS IN BELLARY, NORTHERN KARNATAKA, INDIA

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Background The Karnataka Health Promotion Trust implements HIV preventive interventions for female sex workers (FSWs) in Karnataka, South India, in partnership with non-governmental and community-based organizations (NGOs and CBOs). These interventions are supported by the Bill & Melinda Gates Foundation. Community mobilisation and collectivisation are key vulnerability reduction strategies. In Bellary district, FSWs are encouraged to form site-level groups of 10–12 members which meet regularly. They discuss STIs, HIV, condom negotiation skills, and other important issues. They also support members during crises, and engage in savings and credit activities. We attempted to understand the impact in Bellary of collective membership and the availability of economic support on two measures of safer sex behaviour: clinic attendance and condom use with last client.

Methods Multivariate logistic regression was used to measure the association between the outcome variables and collective membership, using data from a round of integrated behavioural and biological assessments conducted in Bellary in 2008. We also conducted focus group discussions (FGDs) with members and non-members of collectives, to understand the reasons for observed associations.

Results 34% of FSWs were members of collectives. Members were 7 times more likely to have used condoms with their last client (adjusted OR [AOR]: 7.5, 95% CI 1.9 to 30.1, p<0.05). Additionally, collective members were 4 times more likely to visit an STI clinic than non-members (AOR: 4.6, 95% CI 2.0 to 10.6, p<0.05). FGDs revealed that alternate sources of economic activity, such as savings enhancement and low interest loans to collective members, reduced sex workers' dependence on exploitative sources of credit, enabling them to better negotiate condom use with clients who resisted unprotected sex. Further, the sex worker collectives helped FSWs to overcome their fears of stigmatisation, creating a more enabling environment that positively influenced access to clinics for STI care.

Conclusions Membership in site-level groups considerably increased access of FSWs to program services. Activities to address the economic vulnerability of female sex workers were key factors in enabling greater condom use. Savings and access to credit helped FSWs to reduce their dependency on sex work, and enabled them to more readily negotiate condom use with clients.

P2-S2.02 ROLE OF DECISION MAKERS IN THE LIVES OF MIGRANT SEX WORKERS-FOCUS ON FAMILIES: AN QUALITATIVE ASSESSMENT

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Background This study is aimed to understand the role of family members in decision-making process of female sex worker (FSW) migration and its impact on HIV risk, vulnerability and transmission dynamics in Bagalkot, Bijapur and Belgaum districts of Northern Karnataka and southern Maharashtra.

Methods Qualitative in-depth interviews were conducted with family members of the migrant and non-migrant female sex workers (FSWs) as a part of a large cohort study to understand the patterns and determinants of FSW migration from northern Karnataka to southern Maharashtra, South India. The present paper specifically focuses on the findings generated from in-depth, qualitative interviews with 30 family members of migrant and non-migrant (15 each) FSWs who entered into sex work through the traditional devadasi system.