Results At baseline, 150 (46.4%) in group B reported condom use at their last sex act compared to 174 (59.0%) in group A (p = 0.002). Reported consistent condom use at last sex act was significantly higher in group A compared to group B (53.3% vs. 46.7%, p = 0.01). HIV+ status awareness did not predict condom use over time [odds ratio (OR): 1.2; 95% confidence interval (CI): 1.9–1.5; p = 0.15].

Male patients were more likely to use condoms at last sex act (OR: 2.7; 95% CI: 2.2–3.4; p < 0.01). Older patients (OR: 0.8; 95% CI: 0.7–0.8; p < 0.01), being never married (OR: 0.7, 95% CI: 0.5–0.9; p = 0.01); divorced (OR: 0.5; 95% CI: 0.3–0.9; p = 0.01); and under the influence of alcohol during their last sex act (OR: 0.3; 95% CI: 0.2–0.4; p < 0.001) were less likely to use condoms at their last sex act.

Conclusion Knowledge of HIV+ status is significantly associated with consistent condom use. Age, gender, marital status and alcohol consumption are significant predictors of condom use during last sex act.

Study methodology This retrospective and cross-sectional study was conducted in July 2012 and reviewed project information from 2001 to 2009. The combined study design was intended to facilitate a more in-depth analysis of issues, taking into consideration the perspective of project key stakeholders. Both quantitative and qualitative data was generated with descriptive analysis methods and thematic analysis being used, respectively.

Outcomes The study observed a steady increase in service uptake for VCT from a monthly average of 51 in 2001 to 96 in 2009, representing an 88.2% increase, with proportion of HIV positive Sex workers declining from 16% in 2001 to 7% in 2009. Use of family planning methods and treatment of STI and opportunistic infections accessed through the project facility increased from 26% to 40%. Qualitative data confirmed improved negotiation for safer sex and use of male condoms during the project period 2001 to 2009. Free vocational skills training to sex workers were in great demand and it created opportunities for alternative income. However, lack of start-up capital limited the number of trained Sex workers who could quit the sex trade.

Recommendation Need to strengthen institutional and financial sustainability to match the increasing demand for SRH services and vocational skills training for sex workers. This may be through formation of partnerships and mainstreaming project activities into ongoing health programmes.

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