

their consequences. This study assessed unintended pregnancy and its associated factors among female sex workers in Northern Ethiopia.

Methods A community based cross-sectional study was conducted among 346 female sex workers at five localities of Mekelle city from March to April, 2014. Sex workers were selected with simple random sampling technique using sampling frame obtained from urban health extension program. Epi-data version 3.1 was used to enter data and analysis was done using SPSS version 20. Bivariate and multivariate logistic regressions were performed to identify factors associated with unintended pregnancy using odds ratio and 95% confidence interval with P-value of 0.05.

Results The magnitude of unintended pregnancy among female sex workers was 28.6%. During this period, 59 women had abortion which represents three-fifths, (59.6%) of those with unintended pregnancy. Female sex workers who had history of abortion formerly had 15.6 (AOR = 15.64 95% CI: [8.03, 30.47]) times higher odds of unintended pregnancy compared to their counterparts. Sex workers who had steady partners had 2.9 (AOR = 2.87, 95% CI: [1.47, 5.61]) times higher odds of have unintended pregnancy than those who hadn't. Drug users had 2.7 (AOR = 2.68, 95% CI: [1.30, 5.52]) times higher odds of unintended pregnancy than those who hadn't use. Sex workers who had longer duration in sex work were 67% less likely to have unintended pregnancy than those with <12 months (AOR = 0.33, 95% CI: [0.11, 0.95]).

Conclusion High level of unintended pregnancy and a range of associated factors were identified among sex workers. Improving utilization of effective pregnancy prevention methods in a consistent manner can avert the existing high level of unintended pregnancy among female sex workers.

Disclosure No significant relationships.

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TIME TRENDS IN PREVALENCE AND INCIDENCE OF HIV, GONORRHEA AND CHLAMYDIA AMONG FEMALE SEX WORKERS IN BENIN, 2008–2018

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Background The conduction of 3 cohort studies among professional female sex workers (FSWs), e.g. women whose main source of revenue is sex work, since 2008 in Benin allowed the estimation of time trends in HIV, gonorrhoea and chlamydia prevalence and incidence in this key population over the last decade.

Methods The 3 cohort studies were conducted from 09/2008-03/2012, 10/2014-12/2016 and 04/2017-09/2018, respectively. Women were recruited at the Dispensaire IST, a FSW-dedicated clinic, after providing informed consent. Follow-up was quarterly in the first 2 studies and bi-annual in the latest one. FSWs were tested for HIV (rapid test with confirmatory assay according to Benin guidelines), gonorrhoea and chlamydia (BD ProbeTec™ CT/NG, Becton Dickinson Inc.) at baseline and at each follow-up for HIV and semi-annually for gonorrhoea and chlamydia. Questionnaires were administered.

Results In all studies, median age was 32–33 years and the proportion of women not born in Benin 50–60%. HIV [gonorrhoea (chlamydia)] prevalence was 37.1% [4.3% (3.5%)] in 2008 (n=396), 29.1% [9.7% (4.8%)] in 2014 (n=361) and 26.0% [13.8% (7.4%)] in 2017 (n=312). There was a significant downward (upward) trend in HIV (gonorrhoea and chlamydia) prevalence: p<0.001 (p<0.001 and p=0.03). Among respectively 319, 299 and 213 women with follow-up, gonorrhoea (chlamydia) incidence was 8.9 (2.1), 9.0 (4.6) and 14.8 (5.8) per 100 person-years; p=0.07 (p=0.003). HIV incidence was 1.4, 0.8 and 0.7 per 100 person-years in 2008–12, 2014–16 and 2017–18, respectively (p=0.41).

Conclusion HIV prevalence is decreasing, but still high, whereas HIV incidence is low in this highly mobile key population. This combination of high prevalence and low incidence is likely due to HIV treatment scale-up over the last decade, including the adoption of an HIV “test and treat” strategy since 2016 in Benin. However, the increase in both gonorrhoea and chlamydia is worrying and calls for renewed control strategies for these curable infections.

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CHARACTERIZING HIV-ASSOCIATED VULNERABILITIES AMONG WOMEN ENGAGED IN TRANSACTIONAL SEX TO DESIGN PROGRAMS IN UKRAINE

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Background Evidence suggests a range of HIV-associated vulnerabilities associated with the exchange of sex for money or other material goods, but most research and programs in Ukraine focus on formal sex work. We sought to describe the prevalence of HIV and HIV-associated vulnerabilities among adolescent girls and young women engaged in transactional sex outside of formal sex work.

Methods We conducted a cross-sectional bio-behavioral study in Dnipro, Ukraine in 2016 of young women (14–24 years). 469 participants were recruited who reported transactional sex but not sex work, from places where female sex workers solicit clients. Transaction sex was defined as a sexual engagement with the expectation of receiving, gifts or other resources in return, when the price of sex is often not negotiated upfront and is implicitly understood.

Results Mean age of participants was 21.2 years. The mean age among participants at first sex was 16.0 years (range 12–21). At first sex 34% (160) received gifts or money, and 7% (34) reported forced first sex. During the past week, 81% (378) had sex with a regular transactional partner, with whom 35% (132) had condomless sex. In the past month, 29% (137) had sex while inebriated with regular transactional partners, and 64% (299) did not use/remember whether a