

A model for community representation and participation in HIV prevention trials among women who engage in transactional sex in Africa

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Objectives: To establish effective community mobilisation, liaison and representation among an occupational cohort of women at high-risk of HIV and sexually-transmitted infections in Mwanza City, northern Tanzania in preparation for a phase III vaginal microbicide trial.

Methods: Participatory action-orientated research methods were used to develop effective, locally-appropriate, representative community liaison systems.

Results: A mobile community-based sexual and reproductive health service for women working as informal food vendors ('mama lishe') or in traditional and modern bars, restaurants, hotels, groceries and guesthouses ('facilities') has been established in 10 city wards. Participatory mapping was carried out in each ward by project fieldworkers assisted by key community stakeholders. Wards were divided into 78 geographical clusters of facilities in consultation with facility workers and study participants. Representatives at cluster and ward level were elected in a process facilitated by the site Community Liaison Officer and a site-level Community Advisory Committee established. Interaction between study participants and community representatives was high: 77% of women interviewed knew their cluster representative and had interacted with her at least once in the past to discuss a project-related concern.

Conclusions: This approach represents a model for participatory community liaison in HIV prevention trials among women who engage in transactional and commercial sex in Sub-Saharan Africa where traditional community development constructs of mobilisation, liaison, representation and participation are difficult to apply.

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