

PC1 Validity of coital diaries in the Microbicides Development Programme feasibility study among women at high risk of HIV in Mwanza, Tanzania

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ABSTRACT TEXT

Background:

Assessing validity of sexual behaviour data collection tools among high-risk populations generally entails comparisons between self-reporting methods. Validation through partner reports is largely impractical. Frequency data cannot be validated using biomarkers. For stigmatised behaviours, higher reporting is argued to indicate higher validity. If results vary according to social conditions during data collection a method is said to be of low validity. Validity may also be assessed by strength of agreement between results from different methods.

We aimed:

To compare coital diaries (CDs) and face-to-face interviews (FFIs) in measuring sexual behaviour among women at high risk

To assess the impact on data of differing levels of support from researchers

Methodology:

A survey was conducted among female food and recreational facility workers in Mwanza, Tanzania recruited to a microbicides trial feasibility study. Variables recorded in pictorial CDs included vaginal sex, anal sex, male condom use, female condom use, douching and type of sex partner. Three groups of 50 randomly selected women received differing levels of researcher support. Minimum support involved delivering and collecting CDs weekly. Participants with medium support also completed a weekly structured FFI and could discuss concerns with a researcher. Intensive support also included an unscheduled weekly visit when the fieldworker checked diaries and helped with concerns. All respondents participated in an exit interview at the end of four weeks.

Results:

Significantly higher numbers of vaginal sex acts were reported in CDs than in either the weekly or exit FFIs. Significantly more respondents reported male condom use and sex with irregular partners using CDs than at exit interview. Level of support was not significantly associated with frequency of sexual acts reported in CDs, but was associated with acts reported in FFIs. For douching and sex by partner type, there were low levels of association between CD and FFI reports.

Conclusion:

CDs result in higher reporting of socially sensitive activities than FFIs. CDs are less sensitive to level of researcher support, appearing less subject to social presentation bias. While our results highlight difficulties in measuring douching and partner type, overall they suggest the CD is a valid tool for collecting sexual behaviour data among women at high risk of HIV in Mwanza.

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