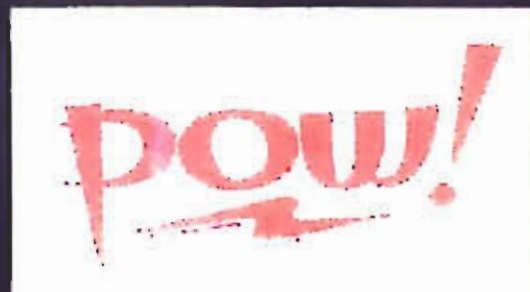


Promoting Sexual Health in Women at Risk of HIV: the Role of Social Capital

Pamela Gillies*, Nicola James*, Richard Slack*, Richard Madeley*,
Susan Johnson** and Maureen Macdonald**.

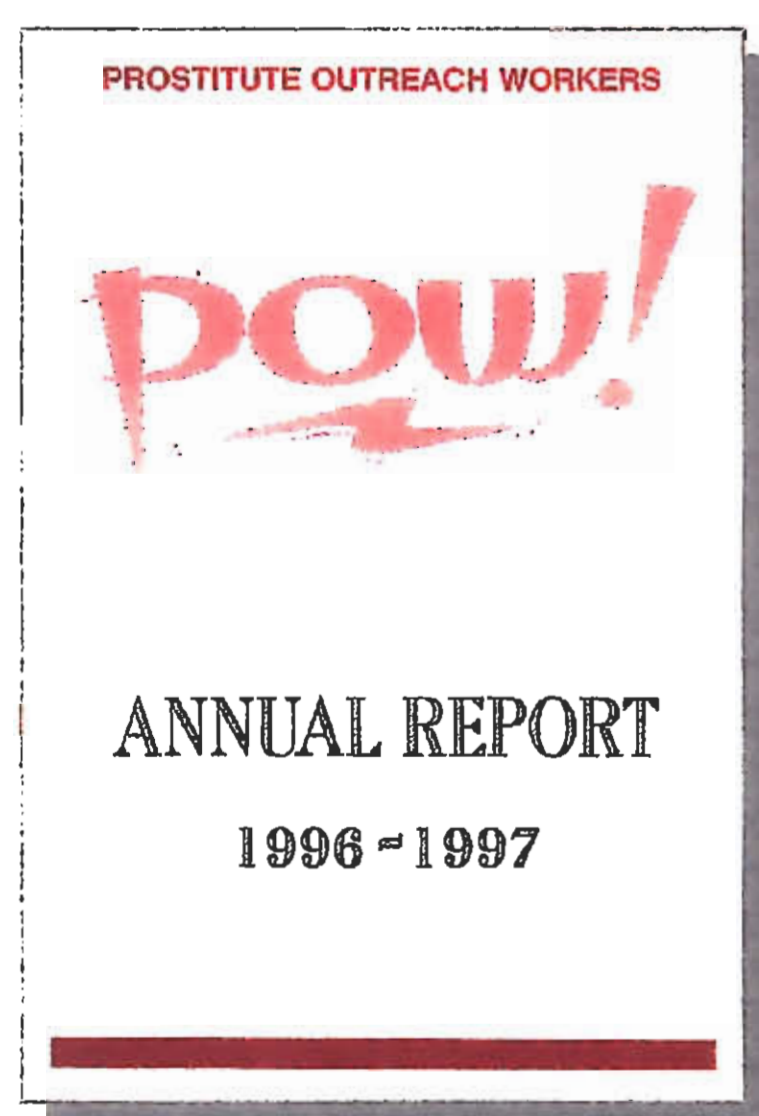
University of Nottingham* and POW!**.



A. Action Research Project

POW! was launched in 1990 when local prostitute women volunteered to train as researchers to assess health and intervention needs of prostitute women in a disadvantaged area of the city of Nottingham, UK. Identified initially through a voluntary agency, two leaders in the prostitute community formed a working partnership with University colleagues to implement an action research and community development intervention based on Freire's model of education and political liberation.

The prostitute researchers helped set a research and development agenda and used the survey data they generated to design an outreach and referral service. This project truly reflects lay representation, mediates across organisations in the statutory and voluntary sectors and crosses professional and lay boundaries. It has evolved into a robust independent organisation with charitable status shaping and changing the nature of health and welfare provision for vulnerable disadvantaged women and creating educational and employment opportunities where possible.

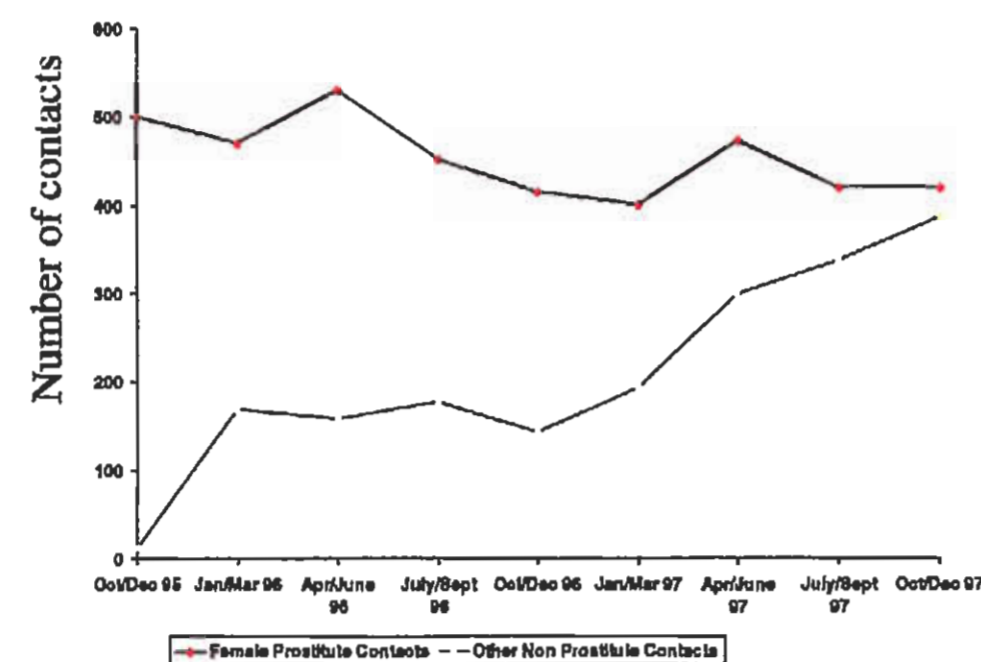


B. Making Contact with Local Prostitute Women

Between Oct 1995 and March 1998, 4,572 contacts with prostitute women were made by POW!'s two outreach workers and volunteers. Most contacts were made on the street.

In the one year period 1993-94, 1,300 contacts were made by POW!, therefore with the same size of team and volunteers POW!'s contact rate has approximately doubled. (see Figure 1 on next column)

Figure 1: POW! Contacts October 1995 - December 1997



POW! offers a range of advice to prostitute clients on anything from housing to employment, and sexual health to probation needs. Local prostitutes preferred the term "prostitute" to describe their work than other terms such as "sex worker".



C. Developing Networks: Supporting Friends, Families and Neighbourhoods

Between 1993 and 1994, POW! supported and helped 44 women who were not prostitutes but who were friends or family members or who simply needed help. POW! has dramatically increased the social networking component of their work seeking to build social trust and to generate the network infrastructure fundamental to social capital within

neighbourhoods. As Figure 1 demonstrates, in the two year period from 1995-1997, POW! not only increased contacts with prostitute women but worked with a total of 1,877 friends, family members and non prostitute women.

D. Institutions and Networks: Working with Other Agencies

POW! continues to develop networks and links with other agencies and institutions serving as a mediator and facilitator for local people in need. Over the past two years POW! has received 262 referrals from children's homes. Of these, two in every three referrals were directly from the children themselves rather than from professionals.

Through partnership funding from Nottingham probation service, POW! have enhanced court skills of magistrates and prostitutes through training on issues related to discrimination and stigma.

POW! also provides training for residential social workers from Social Services and act as advocates for children during planning meetings, reviews and child protection conferences with young people.

E. Findings: Changes in Behaviour and Service Use

Evaluation data were collected routinely using standardised evaluation forms. POW! researchers devised a means of linking first and repeat contact data which was acceptable to local prostitutes who approved measures for retaining confidentiality

Condom Use

As Tables 1 and 2 show, there were no differences in reported condom use with clients. However those women who had continued contact with POW! were significantly more likely than first time contacts to report consistent condom use with non-paying partners. This finding is particularly important given evidence that the risk of morbidity associated with sexually transmitted infections among

prostitutes is largely due to the behaviour of non-paying partners.

Table 1: Condom Use with Paying Clients: linked data 1995-1997

Condom Use with Clients (n=84)	1st Contact with POW		Repeat Contact with POW	
	n	%	n	%
Always	81	96*	82	98*
Sometimes	1	1*	2	2*
Never n/a	2	2*	0	-

Stuart Maxwell Test $\chi^2 = 1.0$ ns

Table 2: Condom Use with non Paying Partners

Condom Use with Clients (n=84)	1st Contact with POW		Repeat Contact with POW	
	n	%	n	%
Always	13	16*	32	28
Sometimes	9	11*	13	16
Never n/a	57	72*	44	56

Stuart Maxwell Test $\chi^2 = 6.88$, 2 df, 0.025, p, 0.05

*% \neq 100 due to rounding up/down
4 women had stopped working since first contact with POW

Service Use

In 1996-1997, the local Genitourinary Medicine Clinic saw 48 female prostitutes referred to them by POW! and 37 who were not. Among POW! referrals 8/48 (17%) had gonorrhoea/chlamydial infections compared with 9/37 (24%) non-POW! referrals. This may reflect the adoption of preventive behaviours (eg condom use) by prostitute clients of POW!

F. Conclusion

Local community development involving marginalised groups has gained institutional support, is sustainable and has created an infrastructure for accessing sexual health and welfare services. The POW! project has built the formal and informal networks and local trust necessary for the production or maintenance of social capital for health. The project has also had a significant impact upon preventive sexual health behaviours of prostitute women.

Prostitute Outreach Workers (POW!) are supported by Nottingham Health Authority and UK National Lotteries Board.