

Methods Community consultative processes were used to engage First Nations, Inuit and Métis (FN/I/M) youth in the development of sexual health promotion and STBBI prevention approaches. Engagement began in 2008 through the establishment of a steering committee, which included FN/I/M youth stakeholders, with representatives from governmental and non-governmental agencies. The steering committee aimed to make effective use of relevant technologies and social media to reach and engage FN/I/M youth in Canada. In 2009, a workshop was held to enhance the involvement of youth to identify priorities for STBBI messaging and explore the best mediums to reach youth. The outcomes of this consultation process informed the development of capacity building social media pilot projects to reach FN/I/M youth.

Results FN/I/M youth identified the importance of taking a holistic approach by viewing sexual health through the lens of social determinants. Youth highlighted poverty, social support networks and education as major influences on sexual health outcomes for their peers. Key challenges youth noted included the lack of sexual health education and the need to strengthen social support networks. By tying in these determinants into promotion, youth identified themes such as addressing homophobia, and raising the importance of cultural relevancy to de-stigmatise sexual health within FN/I/M communities and to help youth to relate closer to messages. Youth also indicated that peer-to-peer social media methods were an ideal mechanism to convey messages. Many youth from across Canada were engaged in developing their own STBBI messages.

Conclusions Engaging FN/I/M youth as partners from concept onwards has led to an informed approach to the development of sexual health promotion and STBBI prevention messaging. Public health practitioners learnt youth need to be involved to gain credibility within this population, youth capacity building is important and taking a holistic social determinants approach in conceptualising messages is critical when reaching FN/I/M youth.

02-S2.06 REDUCING SEXUAL RISK BEHAVIOUR AMONG YOUTH: THE DEVELOPMENT AND EFFECT EVALUATION OF AN INTERACTIVE ONLINE INTERVENTION FOR INDIVIDUALS AND THEIR SEXUAL NETWORK

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Background This study presents an intervention and its evaluation of an innovative approach to counteract barriers to safe sex and STI testing of youth aged 16–24.

Methods The intervention—<http://www.vrijlekker.nl/>—has been developed based on over 200 qualitative interviews with youth investigating barriers to safe sex and STI testing. Based on these interviews, training modules were developed which participants could follow online. These modules aimed at counteracting the individual barriers for safe sex and STI testing as well as removing impeding elements in the social and sexual network. The Information-, Motivation and Behavioural Skills (IMB) model (Fisher & Fisher) was used as the theoretical basis of the intervention. The training included filmed coaches that guided users throughout the intervention, thematic films, interactive text with personal feedback and sexual network tools. The modules were offered on a tailored basis to match each user's own cognitive & behavioural risk profile. This profile was established via an automated online intake. An evaluation was conducted comparing a demographically matched control group recruited prior to the launch of the intervention and an intervention group. Behavioural outcomes were compared at 6 month follow-up.

Results The evaluation included 2944 participants of whom 1553 completed the follow-up (mean age 19, SD 2.4). The intervention group used condoms significantly more often with their most recent casual partner [OR=1.82 95% CI 1.08% to 3.04%] and/or with their steady partner [OR=2.17 95% CI 1.48% to 3.18%] than the control group at 6 months follow-up. Over 170 000 unique persons used the intervention already during its first year, and more than 100 new users continue to do so every day. Some schools in the Netherlands have adopted the site as part of their routine sexual education program.

Conclusions This study has shown that offering youth an empirically and theoretically sound intervention that is interactive and which adapts itself to the individual needs of each user and its sexual network, results in a desired behavioural change and high uptake, even among the challenging target group of youth.

Social and behavioural aspects of prevention oral session 3—Sexual and diagnostic behaviours: issues in measurement

02-S3.01 FEASIBILITY AND ACCEPTABILITY OF SELF-SAMPLING FOR RECTAL SEXUALLY TRANSMITTED INFECTIONS (STI) AMONG BISEXUAL MEN IN THE USA

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Introduction Rectal sexually transmitted infections (STI) are a common health concern for men who have sex with men (MSM). Studies have not yet determined the relevance of these pathogens among men who have sex with both men and women (MSMW). Screening for rectal STI is not currently a widespread option for bisexual men in the USA.

Methods Qualitative data and self-obtained rectal specimens were collected from a diverse sample of bisexual men. Upon completion of the rectal self-sampling, each participant provided information regarding their overall experience with the process.

Results From a total sample of 75 bisexual men, 58 participants provided self-obtained rectal samples. While most men did not test positive, a prevalence (10.3%) of *C. trachomatis* infection was found in this sample. Men who collected samples reported overall acceptability and comfort with self-sampling for rectal STI. Privacy was a primary concern for men regarding self-sampling. Of the men who did not provide a rectal self-sample, the most common reason was having been tested in the recent past. Discussion: Self-sampling is a feasible and acceptable option when offered to bisexual men. Research and interventions are needed to ascertain which combinations of STI testing (including self-sampling) and treatment methods are most appropriate for diverse groups of bisexual men.

02-S3.02 ASSESSING THE VALIDITY OF SEXUAL BEHAVIOUR REPORTS IN A WHOLE POPULATION SURVEY IN RURAL MALAWI

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Background Sexual behaviour surveys are widely used, but under-reporting of particular risk behaviours is common, especially by