

Background Adolescents often lack basic reproductive health RH information, knowledge, and access to health services for RH. Many have less than favourable attitudes and do not feel comfortable to discuss RH with parents or other key adults.

Objectives To assess RH knowledge, attitude and provider preference among adolescents of age 15 to 19 years.

Methods A community-based cross-sectional study was conducted in Tirana Town, capital city of Albania from October 2012 to January 2013. A structured questionnaire was utilised to collect data from the sampled population.

Adolescents aged between 15 to 19 years old were interviewed about their knowledge and attitudes regarding health services for RH. The data were entered into two different computers using SPSS for windows version 17.00. Descriptive analyses using t-test were employed to depict results.

Results The majority of adolescents knew major health services for RH and the main health service providers of RH.

The major sources of information for RH were internet radio 92% and television and radio for 61% school teachers for 35.9% and parents 28% of respondents.

Conclusion The level of knowledge and attitude about health services for RH, source of information for these services and service provider centres is encouraging. However, the role of health professionals and families as the source of information for the adolescents seems to be low. This should be improved using a more integrated all stakeholders particularly adolescents' families and health professionals who have a vital role to ensure adequate knowledge and favourable attitudes for utilisation of the RH in the locality.

P4.096 SEXUAL NETWORK AND PRACTISE OF FEMALE SEX WORKERS IN SIKKIM

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The problem 'Sikkim is an orthodox state in India. It has a traditional society which believes that polygamy does not exist. There was no authentic study to validate the statement. According to the estimate of 2007, prevalence rate of HIV was 0.6. Though Sikkim SACS is running Targeted Intervention programme, the target population is a hidden one and no penetration is happening by TI' (Valla A, 2006).

A study was conducted on socio sexual network and practise of Female Sex Workers (FSWs) in collaboration with Sikkim SACS in the month of Nov, 2012.

Methodology Sample size was 70 selected through Stratified random sampling (10% of the total population registered under NGO programmes of Sikkim SACS)

Result and discussion 70% of respondent is engaged in sex work along with other profession while 30% is dependent solely in sex work profession. 88% of respondent is coming to sex work profession for economic reason. Among this 88%, 65% is working for less than 1 year. 70% of respondent work more than 20 days a month having an average of 30 partners. 80% of respondent are below age 25 yrs who have more than 30 sexual partners -i.e. less age group is more vulnerable. 80% of the respondent consumed alcohol. Among 70% of alcohol users, 90% is not using condom. 10% of the respondent taking drug through injecting route. 90% of respondents have heard of HIV while 30% of them have accessed TI services. 10% of respondent explained about STI sign & symptoms whereas the prevalence rate is 70%.

Conclusion The study shows that polygamy exists in the state and an emerging trend of new FSW noticed. Condom use, knowledge of STI and HIV both are low. The national control programme should develop Sikkim specific design to address these issues.

P4.097 IS THE MINIMUM PACKAGE OF PREVENTION INTERVENTION WORKING? OUTCOME OF COMBINED PREVENTION INTERVENTION AMONGST IN - SCHOOL YOUTHS IN KWARA STATE, NORTH CENTRAL, NIGERIA

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Background Adolescents are among the vulnerable groups at risk of HIV infection. In Nigeria, the high HIV prevalence and teenage pregnancies amongst in-school youths underscores the need to implement effective interventions that address risky sexual behaviours and ultimately reduces the transmission of HIV. This study examines the outcome of Combined Prevention Interventions (CPI) amongst in-school youths in Kwara state, Nigeria.

Methods The MSH Nigeria USAID funded ProACT project supports the Kwara State Government to implement effective and sustainable HIV prevention intervention that promotes adoption of abstinence amongst in-school youths. At Government Secondary School, Bode Sa'adu, 30 (13Males, 17Females) students were trained as Peer Educators using the Family Life HIV Education (FLHE) training package. Information for planning effective HIV Prevention interventions for the target population was generated through questionnaires administration and Focus Group Discussions. The knowledge and skills acquired by the PEs were cascaded to other students using the Minimum Package of Prevention Intervention (MPPI), which addresses behaviour change through the combination of prevention interventions targeted at individuals and communities. Each PE formed a cohort group of 10–15 peers and conducted activities under the Abstinence and/or Be Faithful prevention strategies to promote adoption of positive sexual and reproductive health (SRH) behaviour among their peers. Outcome of the prevention intervention on teenage pregnancies pre and post interventions were analysed.

Results Prior to this intervention, about 10–15 unintended teenage pregnancies were recorded annually (from 2005–2011) at the school resulting in school dropout, unsafe abortion and death. However, after 20 months of implementation, number of teenage pregnancies reduced from 11 cases in April 2011 to zero in December 2012. In addition, students also acquired life building skills that resulted in their overall academic improvement and wellbeing.

Conclusion Effective implementation of the CPI/MPPI that focuses on addressing individual and community behaviour can go a long way in achieving sustainable positive SRH behaviours among in school youths.

P4.098 HIV AND YOUR BODY - A COMMUNITY BASED HEALTH AWARENESS PROGRAMME: ADVANTAGES OF MULTIDIMENSIONAL COMMUNICATION STRATEGIES ON THE EXAMPLE OF AUSTRIA

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Background Progression of chronic HIV-infection, management of comorbidities or coinfection with STIs is significantly influenced by individual dealing with health and lifestyle issues. PLHIV therefore have an increased need for information and support regarding personal health.

Methods „HIV and Your Body“ is an international informational programme promoting health awareness in PLHIV. Activists of community and topic related NGOs are annually trained during an

international workshop about multiple topics (e.g. different organs, STIs, sexual health, conception or pregnancy). Local implementation is driven by various projects of the participants.

Since 2009 an Austrian Group is working within "HIV and Your Body" using simultaneously different communication strategies.

The presented work aims to evaluate the impact of the chosen multidimensional communication strategies on health awareness and behavioural changes in PLHIV in Vienna/Austria, providing recommendations for optimising such informational programmes in regard of true-to-life needs of PLHIV.

Results Until now the Austrian group provided intensive seminars, peer-to-peer support and individual counselling within „HIV and Your Body“. Simultaneously information was spread by information events and publications (e.g. brochures, magazine, newsletter and broadcast). The amount of reached persons was directly associated with individual or public setting, with a broad range up to 34.000 (detailed numbers will be presented).

Contact numbers achieved in Austria underline importance of the topics and present needs of PLHIV for information and support concerning individual health.

Previous feedback has been promising that the chosen combination of information channels enhances the aim of informational programmes.

An ongoing survey aims to evaluate the effect of combined communication approaches as well as further communication requirements. Evaluation data will be presented.

Conclusion Based on evaluation results future projects within "HIV and Your Body" in Austria can be optimised.

General recommendations for communication strategies promoting individual health awareness and supporting healthy lifestyles of PLHIV will be discussed.

P4.099 DEVELOPMENT OF TRAINING MODULES TO ADDRESS HEALTH WORKER STIGMA AND DISCRIMINATION AGAINST MSMs AND TRANSGENDERS IN MALAYSIA, INDONESIA, PHILIPPINES AND TIMOR LESTE- THE ISEAN-HIVOS PROGRAM APPROACH

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Background The ISEAN-Hivos Program is a Regional Global Fund Program that focuses on reducing the vulnerability and risks of MSM and TG to HIV infection in Insular Southeast Asia. The Program also intends to address critical gaps in supporting and scaling up activities that reduce HIV/AIDS among MSMs and TGs. One of the key strategies of the Program is the development and implementation of training modules that address stigma and discrimination among health workers when they provide clinical and related services to MSMs and TGs, particularly in Indonesia, Malaysia, the Philippines and Timor Leste. This study describes the strategy used by the ISEAN-Hivos Program towards achieving this goal.

Methods Based on strategy evaluations, it was deemed that the modules need to include clinical skills training for the health workers, as a springboard towards changing their negative attitudes about their MSM and TG clients.

Results Key initial findings while preparing the modules include the following:

1. There is a need to engage country-recognised "experts" that can provide the trainings.
2. There is a need to engage the Ministries of health in the four countries to enable the module to be used as well by health care workers in public settings.
3. The modules must be flexible enough to be able to be tailored in terms of content, length of training and level of skills or knowledge required, depending on the needs of the targeted health care workers' contexts.

Conclusion The findings from the initial strategic evaluation of the approach used in the development of training modules that address healthcare workers' stigma and discrimination against MSM and TGs who seek STI-HIV-related services support a multi-agency approach working at a regional level. The modules will then be translated into local languages for ease of use among the target training participants.

P4.100 MEASURING ADHERENCE TO ANTIRETROVIRAL THERAPY IN NORTHERN TANZANIA: FEASIBILITY AND ACCEPTABILITY OF THE MEDICATION EVENT MONITORING SYSTEM

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Background An often-used tool to measure adherence to antiretroviral therapy (ART) is the Medication Event Monitoring System (MEMS), an electronic pill-cap that registers date and time of pill-bottle openings. Despite its strengths, MEMS-data can be compromised by inaccurate use and acceptability problems due to its design. These barriers remain, however, to be investigated in resource-limited settings. We evaluated the feasibility and acceptability of using MEMS-caps to monitor adherence among HIV-infected patients attending a rural clinic in Tanzania's Kilimanjaro Region

Methods Eligible patients were approached and asked to use the MEMS-caps for three consecutive months. Thereafter, qualitative, in-depth interviews about the use of MEMS were conducted with the patients. MEMS-data were used to corroborate the interview results.

Results Twenty-three of the 24 patients approached agreed to participate. Apart from MEMS-use on travel occasions, patients reported no barriers regarding MEMS-use. Unexpectedly, the MEMS-bottle design reduced the patients' fear for HIV-status disclosure. Patients indicated that having their behaviour monitored motivated them to adhere better. MEMS-data showed that most patients had high levels of adherence and there were no bottle-openings that could not be accounted for by medication intake. Non-adherence in the days prior to clinic visits was common and due to the clinic dispensing too few pills.

Conclusion MEMS-bottle use was readily accepted by patients. Although the MEMS-bottle was used accurately by most patients, patients need to be more explicitly instructed to continue MEMS-use when travelling. Even HIV-clinics with sufficient staff and free medication may impose structural adherence barriers by supplying an insufficient amount of pills.

P4.101 WITHDRAWN BY AUTHOR

P4.102 PILOTING CONTINGENCY MANAGEMENT INTERVENTION AMONG NEEDLE EXCHANGE PROGRAM USERS IN TIRANA, ALBANIA

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Background Although Needle Exchange Programs (NEP) are a great tool in fighting HIV/AIDS and yielding a significant cost savings for intravenous drug users (IDU) the challenge of the programme remains the irregular uptake of services from the clients and attracting new clients. Contingency Management (CM) is widely known as an intervention that addresses behaviours concerns. It provides tangible rewards for clients to increase or decrease the frequency of concrete target behaviours. The programme hypothesised that using the reward system via CM might help