

**P4.132 REDUCING HARASSMENT OF FEMALE SEX WORKERS (FSWs) IN LOW INCOME SETTING: TRIPARTITE APPROACH IN BANGLADESH**

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**M B Khan.** *Save the Children, Dhaka, Bangladesh*

**Background** Female Sex Workers (FSWs) intervention is one of the most focused programmes in Bangladesh. FSWs are socially very much stigmatised and their rights are seriously violated. Police and other law enforcing agencies often raid their settings and put into gaol. But the concerned beneficiaries are reluctant to support them. With supports from HIV activists, some FSWs organised themselves and formed a self help group (SHG). Group members feel more empowered than other general FSWs with increased self esteem. They have started working for protecting their own rights. Being service provider, Save the Children assisted them in installing a tripartite approach through ensuring effective linkage among SHG, lawyers agency and local police which helps FSWs getting access to legal support by their own effort.

**Methods** In this approach, SHG of FSWs, lawyers agency and local police centre are working together when a sex worker is imprisoned. These three parties have a memorandum of understanding for some activities which will ensure mutual benefit. Selected SHG members will contact with local police centre as well as lawyers focal person when a sex worker is captured. The lawyer agency engages lawyers for getting bail of the sex worker with nominal fee. And the motivated local police person avoid in raiding sex workers setting unnecessarily.

**Results** This tripartite approach has started giving excellent result. It started working in favour of sex workers' community. The self esteems and confidences of sex workers' have significantly increased among FSW community especially in the SHG working area. This also helps changing the attitudes of influential people of the society.

**Conclusions** Any good approach really works if all concerned stakeholders play their role at the right moment and in an appropriate way. This approach is one of the most successful examples in reducing harassments to the FSWs.

**P4.133 PERCEIVED INFECTION SOURCE AMONG MEN WHO HAVE SEX WITH MEN (MSM) AND TRANSGENDER WOMEN (TW) RECENTLY DIAGNOSED WITH HIV, SYPHILIS, OR GONORRHOEA/CHLAMYDIA IN LIMA, PERU**

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**C S Blair,** <sup>1</sup>E R Segura, <sup>1</sup>A Perez-Brumer, <sup>2</sup>J Salvatierra, <sup>2</sup>J Peinado, <sup>2</sup>J Sanchez, <sup>2</sup>J R Lama, <sup>1</sup>J L Clark. <sup>1</sup>David Geffen School of Medicine at UCLA, Department of Medicine and Program in Global Health, Los Angeles, CA, United States; <sup>2</sup>Asociacion Civil Impacta Salud y Educacion, Lima, Peru

**Background** Epidemiologic data demonstrates unequal distribution of HIV and STIs among MSM in Peru, with higher risk sub-populations disproportionately affected. Perceptions about partners as source of recent acquired STIs and its correlates could contribute to this epidemic by several mechanisms and serve as basis for future interventions.

**Methods** 323 MSM and TW from Lima, Peru diagnosed with HIV (45.5%), Syphilis (53.9%), and/or Gonorrhea/Chlamydia (15.2%) within the last month were surveyed to assess partner sexual identity, and perception of most recent sexual partner as source of infection. Prevalence ratios (PR) were calculated using heterosexually-identified partners as the reference category in bivariate and multivariate analysis using partner perceived source of infection as the main outcome.

**Results** Respondents aged from 18–60 years old (Mean: 30.8, SD: 9.3) and self-identified as Heterosexual (6.0%), Bisexual (17.1%), Homosexual (64.8%), and Transgender (12.1%). Most recent sexual partners identified as Heterosexual (10.3%), Bisexual (41.5%),

Homosexual (45.7%), and Transgender (2.5%). Perception of most recent sexual partner as likely/highly likely to be the source of STI transmission was reported by 37.2% (N = 120/323) of respondents. Heterosexually-identified partners were least frequently perceived as the source of STI (24.1% perceived as likely/highly likely source). Transgender partners were most frequently perceived as the source of STI (57.1% likely/highly likely source; PR = 2.4; 95% CI: 1.0–5.9; p = 0.5) followed by Homosexual (45.7% likely/highly likely source; PR = 1.9; 95% CI: 1.0–3.7; p = 0.06) and Bisexual (31.6% likely/highly likely source; PR = 1.3; 95% CI: 0.7–2.6; p = 0.06) partners, demonstrating a borderline statistical significance.

**Conclusions** Partner sexual identity is associated with perception of infection transmission among MSM in Peru. Overall, trends in perception mirror the actual gradient of HIV burden across sexual identities. Future research should focus on the exact potential causes for this at the individual-level (actual knowledge of the epidemic, discrimination, actual past experiences, etc.) and contexts (norms, beliefs, etc.).

**P4.134 STRATEGIES FOR COMMUNITY SYSTEMS STRENGTHENING IN THE ISEAN-HIVOS PROGRAM TARGETING MSMs AND TRANSGENDERS IN MALAYSIA, INDONESIA, PHILIPPINES AND TIMOR LESTE- AN EVALUATION**

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**L P Norella.** *ISEAN Hivos Program, Jakarta, Indonesia*

**Background** The ISEAN-Hivos Program is a regional HIV-prevention programme targeting MSM and Transgenders. The approach used by the programme is Community Systems Strengthening through the provision of assistance and capacity building for MSM and TG Community Based Organizations (CBOs) in four countries in the South East Asian Region, namely Malaysia, Indonesia, Philippines and Timor Leste. Some of the training activities of the programme include: 1. Workshops for the localization of BCC materials; 2. Training of outreach workers/peer educators on BCC and condom distribution; 3. Trainings on networking and advocacy; 4. Provision of trainings for network partners to support rollout of monitoring and documentation strategy; and 5. Capacity building for MSM and TG CBOs to participate in UNGASS (or MDG for Health Review) monitoring

**Methods** An evaluation was conducted after its first year of implementation through a review of strategies that are to be adopted during the first two years of the programme. The evaluation was included in the discussions among the partners of the Program during their inception meetings.

**Results** Results of the strategic evaluations include:

1. There is a need to synchronise the various activities being implemented at the country level with other regional initiatives of the Program.
2. There is a need to re-cast the approaches of the Program, including the strategies identified in developing CBOs for MSMs and Transgenders especially in under-represented areas in the four countries.
3. There is a need to further examine the complementarity of the regional programme's activities with those of the national programmes, particularly those with funding support from the Global Fund.

**Conclusions** These results from the early evaluation of the Program provide inputs on the refinement of approaches being used by other HIV prevention programmes targeting MSM and Transgender populations in the region.

**P4.135 COMPETITIVE SMALL SCALE HIV FUNDING AS A CATALYST FOR INCREASED MSM AND TG INVOLVEMENT IN LOCAL AND NATIONAL RESPONSES TO HIV-AIDS**

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**L P Norella.** *ISEAN Hivos Program, Jakarta, Indonesia*

**Background** MSMs and Transgender persons are often described as difficult to reach. Using a Community Systems Strengthening Framework, the ISEAN-Hivos Program provides regional HIV interventions for MSM and Transgender communities in Malaysia, Indonesia, Philippines and Timor Leste. Aside from capacity building for MSM and TG Community Based Organizations (CBOs), a key initiative of the Program is the allocation of competitive small grants that support local projects of community organisations related to HIV-AIDS prevention.

**Methods** Through the Stop AIDS Now Fund (SAN Fund), the Program announced an open call for applications. An evaluation was conducted based on the initial response of the communities to the grants process and how it served as another venue for them to learn about improved organisational functions.

**Results** As a requirement for grant application, they developed their strategic plans and organisational documents. The CBOs also had to develop a feasible proposal that can be implemented within the timeline and budget. The early strategic evaluations of this competitive small grants scheme have shown that:

1. The communities can work together to improve their own organisational structures and functions;
2. Quality proposal may be produced, with some technical assistance;
3. Creativity was encouraged based on the open nature of kind of project to be proposed;
4. Community members learned about fund management at a smaller scale and the requirements for effective management of grants.

**Conclusions** These results from the early evaluation of the Program's competitive small grants scheme have provided evidence that initial seed funding, once provided in the bigger context of providing technical assistance for organisational/fund management, is a good catalyst for further increasing the participation of MSM and TG communities in their local and national responses to HIV-AIDS. This approach may well lead to improved community participation in working with service providers towards better health outcomes on HIV-AIDS and STI.

#### P4.136 WOMEN'S SOCIO-DEMOGRAPHIC DRIVERS TO SEXUAL MULTI-PARTNERSHIPS IN RURAL TANZANIA

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<sup>1</sup>A Exavery, <sup>1,2</sup>A M Kanté. <sup>1</sup>Ifakara Health Institute (IHI), Dar es Salaam, Tanzania; <sup>2</sup>Columbia University, New York, NY, United States

**Background** Indulgence in sexual multi-partnerships (SMP) intensifies risks to sexually transmitted infections including HIV. In Tanzania where HIV/AIDS is more prevalent among women than men and consistent condom use is low, identifying drivers to SMP is pertinent for scheming feasible HIV/AIDS interventions.

#### Objectives

1. To establish prevalence of SMP and
2. Identify women's socio-demographic characteristics associated with SMP in Rufiji, Kilombero and Ulanga districts in Tanzania.

**Methods** Data were collected cross-sectionally in Rufiji, Kilombero and Ulanga districts in Tanzania in 2011 on 2,643 sexually active women ages 15+ years. We used Chi-square for testing association between SMP and each of the explanatory variables and finally used logistic regression for multivariate analysis.

**Results** Number of sexual partners reported ranged from 1 to 7, with 7.8% of the women reporting multiple partners (> 1) in the past year. Sexual multi-partnerships among women was more likely among those ever married than currently married (OR = 2.88, 95% CI 1.75–4.74), single than currently married (OR = 2.28, 95% CI 1.52–3.42) and Muslims than Christians (OR = 1.51, 95% CI 1.04–

2.18). On the other hand, SMP was less likely among women who were older than younger (OR = 0.96, 95% CI 0.94–0.98), educated at primary level than uneducated (OR = 0.64, 95% CI 0.42–0.98) and educated at secondary/higher levels than uneducated (OR = 0.23, 95% CI 0.11–0.47), Ndengereko than Pogoro (OR = 0.43, 95% CI 0.20–0.93) and Ngoni than Pogoro (OR = 0.47, 95% CI 0.23–0.94) ethnic groups. District of residence and socioeconomic status were not significant.

**Conclusion** Sexual multi-partnerships is an extant risky behaviour among women in rural Tanzania and varies significantly by age, marital status, education, religion and ethnicity. HIV/AIDS control programmes in the country should take these variables into consideration in designing fruit-bearing interventions for a HIV-free world.

#### P4.137 SOCIAL NETWORK FACTORS AND HIV SEROSTATUS AMONG AFRICAN AMERICAN MEN WHO HAVE SEX WITH MEN

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C Latkin, K Tobin. Johns Hopkins School of Public Health, Baltimore, MD, United States

**Background** Social network analysis is a useful method to assess infectious disease transmission and the amount, type, and sources of social support. The current study compared social network characteristics of African American men who were HIV positive to those who were negative

**Methods** Study participants were 229 African American men who have sex with men (MSM) who completed a baseline social network assessment for a pilot intervention in Baltimore, Maryland.

**Results** Almost half (48%) were HIV positive. Using multiple logistic regression modelling, statistically significant network differences ( $p < 0.05$ ) were found between HIV positive and negative in the number of kin and non-kin who were aware of that they were MSM, injection drug users, network members who use the internet to find sex partners, mean trust in network members, and network members who were full-time students.

**Discussion** These findings suggest that although there are many similarities between the networks of HIV positive and negative African American MSM, differences do exist in the social and sexual network characteristics. A larger number of HIV positives as compared to negatives know about their same sex behaviour, which may be utilised for providing support; however, positive have more injectors in their network, which could lead to greater HIV transmission.

#### P4.138 THE INTERNAL CONSISTENCY OF SEXUAL PARTNERSHIP HISTORIES REPORTED BY YOUNG PEOPLE IN RURAL TANZANIA

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<sup>1</sup>A M Doyle, <sup>2</sup>J Chagalucha, <sup>1</sup>H A Weiss, <sup>1</sup>D Watson-Jones, <sup>1</sup>R J Hayes, <sup>1</sup>B Zaba, <sup>1</sup>D A Ross. <sup>1</sup>London School of Hygiene & Tropical Medicine, London, UK; <sup>2</sup>National Institute for Medical Research, Mwanza, Tanzania

**Background** Detailed sexual partnership histories are frequently collected, yet data quality is rarely reported. We present data on internal consistency of partnership reports among youth in Tanzania, and assess the usefulness of specific questions.

**Methods** In 2007/8, sexual behaviour and biological samples for STIs were collected from 13,814 15–30 year olds in 20 communities, in Mwanza, Tanzania. Using a face-to-face questionnaire, participants were asked: number of sexual partners (ever, last year, last 4 weeks); new partners in the past year; detailed questions about last 3 partners in the past year, including dates of first and last intercourse. We examined response consistency and, using STI and pregnancy results, assessed the validity of the question 'Have you ever had sex?'