assess the prevalence and predictors of major depressive disorder (MDD) among women living with HIV in rural settings in India.
Methods A cross-sectional sample of 905 HIV-infected rural women aged between 18 and 49 years was recruited from District Anti Retroviral Therapy centre. Trained psychiatric social workers interviewed participants for perceived stigma, stress, social support, quality of life and also screened for depression. Those who had a score of 6 or above on Self Rating Questionnaire (SRQ) were further evaluated by for Major Depressive Disorder (MDD) using Mini International Neuropsychiatric Interview (MINI.5.0.0) by mental health professionals experienced in administering psychiatric rating scales.
Results The sample consisted of participants with mean age of 36.69 ± 7. 06 years, with largely uneducated (17.9%) or studied less than 7th grade (65.7%) and unskilled labourers (81.9%). About half of the respondents had lost their spouses due to HIV infection (45.5%). Majority of the respondents disclosed their HIV status only to their closest relatives (82.2%). In addition, they perceived it is risk to disclose their status to others (86.5%).

The prevalence of MDD was 19.6%. The MDD group had significantly higher scores for perceived stigma ($p = 0.008$), stress ($p = 0.08$) and a lower score for social support ($p < 0.0001$) compared to the non-depressed group. Further, on regression analysis, higher scores for stigma ($p = 0.004$), stress ($p < 0.0001$) and lower scores for social support ($p = 0.004$) predicted MDD.
Conclusions MDD is associated with various modifiable psychosocial risk factors among women with HIV. The study highlights that there is a need for developing a context appropriate psycho-social intervention to target depression among women living with HIV.

O08.3 OVERLAPPING HIV AND SEX WORK STIGMA: EXPERIENCES FROM 14 SITES ACROSS ZIMBABWE

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Background Stigma remains a barrier to female sex workers' (FSW) access to health services, reflecting fears of being identified as engaging in a criminalised and marginalised occupation, and discrimination and mistreatment by health workers. For FSW living with HIV, the additional stigma can exacerbate discrimination and reluctance to seek care.
Methods We describe intersecting patterns of anticipated and experienced stigma related to sex work and HIV status among FSW in Zimbabwe. As part of the baseline survey for the SAPPH-IRe cluster-randomised trial, we recruited 2722 FSW in 14 sites using Respondent Driven Sampling. We asked 9 questions on perceived sex-work-related stigma. Women self-identifying as HIV+ (n = 1011) answered an additional stigma scale.
Results Sex work-related stigma was higher than HIV-related stigma. This held true for internalised, perceived and experienced forms. For instance, 37% of FSW reported "feeling ashamed" due to their occupation, compared to 20% of those with HIV feeling shame due to their status; 59% of FSW felt they had "lost respect or standing" as a result of being sex workers, while 23% among the HIV+ felt HIV had reduced their social status. In relation to being "talked about badly" for being FSW or HIV+, the figures were 47% and 12%. Similarly, 19% of respondents reported being insulted as FSW but just 5% of those living with HIV felt insulted due to their status. Denial of services by health care workers was low, but nonetheless considered higher for being a sex worker compared to being HIV+.
Conclusions Sex workers in Zimbabwe have high HIV prevalence and experience layered stigma for their role as "immoral" women as well as "vectors of disease." That sex-work related stigma is more pervasive than HIV-related stigma may be due to "normalisation" of HIV following introduction of widespread treatment, with comparatively greater disapproval for sex work.
Disclosure of interest statement The SAPPH-IRe trial is using Truvada donated by Gilead. We have no other relationships with commercial entities to disclose.

O08.4 THE ISEAN HIVOS STIGMA AND DISCRIMINATION STUDY (SADS) IN HEALTH CARE SETTINGS (SADS-HCS-2015) IN SOUTH EAST ASIA ISLAND COUNTRIES - INITIAL FINDINGS FROM INDONESIA

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A four-country study was conducted to provide information on the status of stigma and discrimination (SAD) among Men who have Sex with Men (MSM) and Transgender (TG) persons in Indonesia, Malaysia, the Philippines and Timor Leste. Based on the Indicators described in the Stigma and Discrimination Index Questionnaire, this study focused on their experiences with local health care workers and in various health care settings such as clinics, health centres and hospitals. A total of 2,412 respondents participated with 1,000 representatives from Indonesia. This abstract focuses on the initial findings of the SADS-HCS-2015 in Indonesia.

Field surveys were conducted by trained members of 18 community based organisations from across Indonesia. A 12-question paper-based or electronic questionnaires were employed to reach out to MSM and TG clients of health clinics and hospitals (both private and public) using convenience sampling. Stigma and discrimination were described in terms of the respondents' self-reported perception of: 1. Refusal of health care services, 2. Physical maltreatment, 3. Verbal maltreatment and 4. Provision of health care service below standards. Results indicate that Verbal Maltreatment was the most common experience (n = 50) followed by Provision of health service below standards (n = 34), Refused access to health care services (n = 6) and Physical Maltreatment (n = 5). Combined, this is roughly less than 0.1% of the respondents. 5.2% of the respondents said that their personal experience of stigma and discrimination is still continuing.

The Preliminary SADS results for Indonesia reflect a very low level of SAD as experienced by MSM and TG community members. Although packets of SADs, are still being reported, the data suggest an increasing awareness of health care service providers on the concern of SAD and perhaps the effectiveness of government and local NGO-led interventions to significantly decrease if not totally eradicate stigma and discrimination in its many forms.
Disclosure of interest The study was supported by the Global Fund through a regional Grant to the ISEAN Hivos Program.