

community studies (25–30%). This may be related to age or reluctance to disclose. USEs should be researched further in this population, to develop intervention strategies.

**Disclosure of interest statement** Nil.

**P03.17 THE VICTORIAN ABORIGINAL HEALTH SERVICE (VAHS) CONDUCTED A YOUNG PEOPLE'S SEXUAL HEALTH AND SEXUALLY TRANSMISSIBLE INFECTIONS AND BLOOD BORNE VIRUS (STI/BBV) KNOWLEDGE, ATTITUDES AND BEHAVIOUR SURVEY IN NOVEMBER 2014**

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The survey was an outcome identified within the Research Excellence in Aboriginal Community Controlled Health (REACCH) collaboration between the Kirby Institute, University of NSW, the National Aboriginal Community Controlled Health Organisation and five Aboriginal Community Controlled Health Services (ACCHS): Younger staffs employed in the service were involved in the development and delivery of the project as a research capacity building component of the project.

**Methodology** A cross sectional survey, using a self-completed questionnaire was developed as part of the overall REACCH Project. The survey has been coordinated in a number of REACCH stakeholder ACCHOs, it was then reorientated toward the Victorian Aboriginal community by VAHS Staff in collaboration with members of the REACCH Study team.

Participants were Aboriginal and Torres Strait Islander aged 16–29 years. Potential participants were approached as they attended VAHS. The young peoples' survey included fifty seven questions that were sectionalised on Demographic characteristics, General Health and Wellbeing, Knowledge of STIs/BBVs, Behaviour and Risks, and Health Service Utilisation.

**Results** 102 Young People participated in the survey. Overall there was good knowledge of STI/BBV with some gaps clearly identified. Eighty Seven young people identified as being of Aboriginal heritage, with two people being Torres Strait Islander, five people identified as both Aboriginal and Torres Strait Islander and four participants identified as non-Indigenous.

**Conclusion** Overall there was excellent knowledge of STI/BBV and contraception and reported strategies for accessing health care and information. Specific gaps were identified that can inform future Health Promotion messages and clinical care. VAHS was considered to be an appropriate health service for a majority of these young people to discuss sexual and reproductive health care.

**P03.18 KNOWLEDGE REGARDING HIV/AIDS AND VIEWS ON HIV TESTING BEFORE MARRYING MIGRANT WORKERS AMONG RURAL HIGHER SECONDARY SCHOOL STUDENTS IN BANGLADESH**

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**Introduction** The social context of Bangladesh does not permit adolescents to discuss reproductive health topics as well as sexually transmitted diseases like HIV/AIDS openly with their parents, teachers, or other senior members of the community.

**Methods** This was a cross-sectional study to investigate knowledge regarding HIV/AIDS and views on HIV testing before marrying migrant workers among rural grade 11 and 12 students in Bangladesh.

**Results** A total of 92 students completed anonymous, self-administered questionnaire. The average age of the students was 16.8 ± 0.9 years. All the students had heard about AIDS before they complete the questionnaire. Media (75%) was the main source of information. Overall, students had average knowledge regarding selected aspects of HIV/AIDS. A high (>73%) proportion of students were conversant with the major modes of spread of HIV. Many misconceptions were still noted relating to HIV/AIDS, 40% believing that healthy looking person cannot be infected with HIV, 27% and 25% believing that coughing and sneezing and mosquito bites spread AIDS respectively. Majority (75%) of the students indicated that they would not ask to do HIV test before marriage and amongst them more than a quarter reasoned as it might lead to break the marriage/marriage might not take place.

**Conclusion** The knowledge level seems to be low and misconceptions about the routes of transmission were common. It is recommended that strategies for adolescents AIDS risk reduction be developed in Bangladeshi high schools.

**Disclosure of interest statement** There is nothing to declare.

**P03.19 SCREENING FOR SEXUALLY TRANSMITTED INFECTIONS IN ADOLESCENT GIRLS AND YOUNG WOMEN IN MOMBASA, KENYA**

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**Introduction** As adolescents and young women become sexually active, they are at risk of adverse reproductive health outcomes including sexually transmitted infections (STIs). We assessed feasibility and acceptability of STI screening among 15–24 year-old women in Mombasa County, Kenya.

**Methods** Participants were recruited from three high schools and one university. Study staff conducted informational sessions. Students interested in participating were given informed assent/consent forms to take home, and asked to visit our clinic for STI screening. During clinic visits, participants completed a self-administered questionnaire and provided a urine specimen to test for *Neisseria gonorrhoeae*, *Chlamydia trachomatis*, and *Trichomonas vaginalis* using the Hologic Aptima Detection System.

**Results** Between August 2014 and March 2015, 463 high school and 165 university students collected assent/consent forms. Of these, 293 (63%) from high schools versus 158 (95%) from university attended clinic for STI screening ( $p < 0.001$ ). Of the 153 (34%) who reported any history of insertive vaginal sex, 76 (50%) reported condom use, and 31 (20%) reported hormonal contraceptive use at the last sex act. Twenty-six (5.8%) students had STIs (7 [1.6%] with *N. gonorrhoeae*, 16 [3.6%] with *C. trachomatis* and 3 [0.7%] with *T. vaginalis*). Older age (OR 1.28;

95% CI 1.07–1.53), reporting vaginal sex (OR 5.89; 95% CI 2.42–14.36), non-penetrative sex (OR 3.47; 95% CI 1.56–7.75), alcohol use (OR 3.34; 95% CI 1.26–8.87), smoking (OR 5.82; 95% CI 1.12–30.37), chewing khat (OR 3.19; 95% CI 1.27–8.01), and being at university rather than high school (OR 4.58; 95% CI 1.94–10.79) were associated with increased likelihood of STI ( $p \leq 0.05$ ). Condom use was protective (OR 0.32; 95% CI 0.11–0.94).

**Conclusion** There was considerable demand for STI screening, and a substantial burden of STIs was observed. These findings support the need for reproductive health interventions to reduce adolescent risk for STIs, pregnancy, and their complications.

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### P03.20 "HIGH RISK FACTORS AND THEIR ASSOCIATION WITH SEXUALLY TRANSMITTED INFECTIONS AMONG ASYMPTOMATIC PREGNANT ADOLESCENTS"

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**Background** Adolescents are at high risk for sexually transmitted infections (STIs) because of their high risk behaviour and physiological susceptibility. The present study aimed to find out prevalence of high risk factors and their association with STIs among asymptomatic pregnant adolescents.

**Methods** This was a cohort study conducted in the Department of Obstetrics and Gynaecology, Vardhman Medical College and Safdarjung hospital in association with Dr B. R. Ambedkar Centre for Biomedical Research, University of Delhi. A total of 320 asymptomatic adolescent pregnant women willing to participate in the study protocol were enrolled. A detailed history including sexual, marital, obstetric, personal and clinical details was taken. After clinical examination, cervical and high vaginal swabs were collected for testing by PCR technique for *Chlamydia Trachomatis*, *Neisseria Gonorrhoea* and *Trichomonas Vaginalis* infections. The data hence collected was analysed to find out prevalence of high risk factors and their association with STIs.

**Results** Out of 320 women enrolled in the study, 41 (12.81%) tested positive for one of the 3 STIs tested. Most of the subjects were 19 years old (76.56%), belonged to urban area (80.94%), were from low income group (82.81%), had not been to high school (70%) and 78.13% had at least one high risk factor for STIs. Among the high risk factors for STIs studied, 31.87% had age <18 years at the time of first sexual intercourse, 75.94% had never used any contraception, 1.87% had history of tobacco or alcohol use, 7.81% had past history of vaginal discharge. Out of these high risk factors for STIs only past history of vaginal discharge was significantly associated with presence of STIs,  $p = 0.0001$ .

**Conclusion** The high risk factors for STIs are present in more than 3/4<sup>th</sup> of pregnant adolescent women and past history of vaginal discharge is significantly associated with STIs.

### P03.21 BE SAFE. STAY WELL: FOUR VIDEOS TO EDUCATE INTERNATIONAL STUDENTS ON SEXUAL HEALTH AND STAYING SAFE IN AUSTRALIA

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**Background** In recent years there has been a considerable growth in the international student population in Australia driven primarily by university study and vocational training. Studying and living in a new country can bring a range of social challenges, and international students have shown to have limited understanding on sexual health within an Australian context. Following consultation and focus testing with international students and health professionals, the Sexual Health and Blood-borne Virus Program (SHBBVP) have developed a collection of videos titled "Be Safe Stay Well" aimed at providing students with an understanding of sexual health and the health care system in WA.

**Methods** Three focus groups were conducted with a total of 36 international students representing 22 different countries. Students reported wanting to know more about sexual health, safe sex and STIs. It was identified that having a resource providing sexual health information would be useful for the target group. In collaboration with the WA Department of Health's Communications Directorate and an external production company, the four videos titled "Be Safe. Stay Well" were developed.

**Results** The videos use animation and kinetic typography to appeal to an international audience whose first language is not usually English. They have been spoken by young people from a range of countries to ensure authenticity. Videos topics include: The importance of safe sex, Discussing STIs, Health service costs, and Sex and the law.

**Conclusion** The videos were promoted and have been well received by a number of tertiary education institutes, youth and student organisations and sexual health agencies. The videos were promoted via social media, through relevant websites, newsletters and distributing promotional cards and posters. Conclusions on the effectiveness of the videos will be discussed once preliminary evaluation data is obtained from Google Analytics and the target audience.

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### P03.22 INFECTION PROTECTION: THE DEVELOPMENT OF AN INTERACTIVE, ONLINE GAME TO EDUCATE YOUNG PEOPLE ABOUT SEXUAL HEALTH AND RELATIONSHIPS

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**Background** Get the Facts (GTF) is a website which provides information on sexual health and relationships to young people aged 13–17 years. In 2014, GTF ran a game design competition which resulted in the addition of an innovative sexual health education game titled Infection Protection added to the website. The use of games for learning is recognised as an innovative and engaging method of communicating important information to young people. It provided the opportunity for young people to deliver sexual health education to their peers using an interactive and engaging format.