

Results Cognitive group therapy based on schema focused approach decreased maladaptive schemas in the experimental group compare to the control group. Subsequently depression was decreased in the experimental group compare to the control group.

Conclusion This study showed that Schema Therapy is an effective treatment for depression in special populations. Life of people living with HIV, particularly in prisons, is full of emotional deprivation, defects and damage; these reasons can cause conditions which is lead to depression. ST through modulation maladaptive schemes could reduce depression in prisoners living with HIV.

P4.41 EFFECT OF HIV RELATED STIGMA ON UTILISATION OF SKILLED BIRTH ATTENDANTS BY HIV POSITIVE WOMEN IN NIGERIA; A SYSTEMATIC REVIEW

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Introduction HIV/AIDS-related stigma is recognised as a major barrier to utilisation of health facilities for delivery by pregnant women living with HIV/AIDs and an impediment to prevention of mother to child (PMTCT) of HIV. Greater comprehension of contextual factors that specifically reduce HIV-positive women's access to maternity care is essential. This paper reviews the existing research literature on AIDS stigma experienced by HIV positive pregnant women in Nigeria with the objective of documenting the current status of research, highlighting major findings and identifying key gaps remaining.

Methods Fifteen publications were identified after a structured search of six electronic databases for published literature between 2000 and 2016 that potentially contained data on HIV-related stigma, utilisation of skilled birth attendants and delivery outcomes. We used the method of meta-synthesis to summarise the findings from the qualitative studies.

Results Stigmatisation experienced includes exclusion from maternity services, termination of appointment, abuse, disrespect, maltreatment, negative attitudes and hostility amongst others. There is increasing concern about health care workers reluctance to care for and treat HIV positive pregnant women. This is further exacerbated by weak health systems and poor legal and ethical framework. HIV positive pregnant women are reluctant to deliver their babies in a health facility with a skilled attendant due to the risk being labelled HIV positive. This avoidance could contribute to obstetric complications and avoidable maternal deaths.

Conclusion Interventions should be introduced to reduce HIV-related stigma. Training health workers on the elements of psychosocial care and avoiding stigmatising behaviour is important. Research exploring linkages between HIV related stigma and maternity services uptake are largely missing and need to be prioritised. In addition, more research is needed to advance conceptual understanding of stigma within the cultural context of Nigeria.

P4.42 KAP STUDY AND PREVALENCE OF HIV AND SYPHILIS IN HONDURA'S PRIVATE FREEDOM PERSONS

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Introduction According to the STI/HIV/AIDS Department's has recorded a total of 32 573 cases Accumulated of which 22 737 are cases of Advanced Infection and 9836 are asymptomatic HIV. The only previous study of persons deprived of liberty (PPL) was in 1999, which included three cities in Honduras and 2095 people were recruited, the majority of which were men. The prevalence of syphilis was 1.8%.

Methods A cross-sectional study, which used systematic random sampling by clusters, each penal centre gave a proportional share of its population. The universe of persons deprived of liberty consisted of 5813 men (3,531 TGUs and 2,282 SPS) and 430 women (346 TGUs and 84 SPS), who make a total of 6159. The protocol was approved by the Bio-medical Research Committee of the National Autonomous University of Honduras (CEIB).

Results Regarding HIV sero-prevalence, 1.9% (95% CI, 0.8–4.2) of HIV-infected men compared to 0.6% (CI 95%, 0.0–3.4) of women, however, men Of SPS 2 in 3.3% (IC 95%, 0.9–8.2) of HIV compared to 1.0% (95% CI, 0.1–3.5) in TGU men, whereas TGU 2 women were 0.8% (95% CI, 0.0–4.5) and women of SPS 0.0% (95% CI, 0.0–8.8), ie no cases were found in the study sample, however this does not mean that there is no HIV in them. The incidence of syphilis (using as a criterion RPR posi2vo confirmed by TPPA) was 1.5% (95% CI, 0.3–4.3) in TGU men compared to 3.3% (95% CI, 0.9–8.2) in SPS men, While in TGU women it was 0.8% (95% CI, 0.0–4.5) compared to 7.5% (CI 95%, 1.6–20.4) of SPS women.

Conclusion HIV prevalence is higher in San Pedro Sula than in Tegucigalpa, as is the incidence of syphilis, but the highest of all is the prevalence of cumulative syphilis, which implies that there is unprotected sex and high risk. Also, while most know where to perform the HIV test only half were performed and the syphilis test less than a third. One-third of men and women suffered from discrimination and PPL discrimination, with verbal attacks (threats, scoldings, humiliations) among the 2p of attacks, and less than one-twentieth reported this discrimination.

P4.43 SOCIO-ECONOMIC STATUS OF MEN ENGAGING IN AGE DISPARATE SEX: A SECONDARY ANALYSIS OF NATIONALLY REPRESENTATIVE DATA IN SOUTH AFRICA

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Introduction Studies have highlighted the increased risk in contracting HIV for young women who engage in age disparate sexual partnerships. However, there is a dearth of evidence about the socioeconomic profile of men who engage in these types of sexual partnerships. This study focuses on men who engage in age disparate sex and specifically whether there are socioeconomic-status (SES) asymmetries between those