P4.085 ASSESSING COMMUNICATION ON SEXUAL AND REPRODUCTIVE HEALTH ISSUES AMONG HIGH SCHOOL STUDENTS WITH THEIR PARENTS, BULLEN DISTRICT BENISHANGUL GUMUZ REGION, NORTH WEST ETHIOPIA

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Background “Adolescents “and “young people “are defined by WHO as the age group 10–19 years and 10–24 years, respectively. The health threats for adolescents today are predominantly behavioural rather than biomedical and more of today’s adolescents are involved in health behaviours with potential for serious consequences. Hence, it is important to understand the exposure of school students to sexual and reproductive health knowledge and skills at different places including home.

Objective To assess the level and factors influencing communication between school students and parents on sexual and RH issues.

Methods A cross-sectional survey using self-administered questionnaire and supplemented by focus group discussion was conducted in January 2006 at Bullen preparatory and high schools in northwest Ethiopia.

Results A total of 412 young people participated in the study. Of these, 284(68.9%) were males and the rest 29.1% females About 13% of the respondents were sexually active.

School was mentioned as the most common source of information for sexual and reproductive health issues followed by friends. Three hundred sixty two (88%) respondents believed that it is important to discuss sexual and reproductive health issues/matters with parents. However, only 119 (28.9%) of them discussed on two or more SRH topics with their parents. A high proportion of both male (78%) and female (72%) students preferred to discuss sexual and reproductive health issues with peers compared to less than 27% who prefer to discuss with parents.

Conclusions Although the majority of the students think discussion on sexual and reproductive health issues is important, they prefer to discuss with peers as this makes them more comfortable. Thus, it is essential to improve the sexual and Reproductive Health knowledge of school students to enhance peer influence positively and improve parent student communications through targeted family life education activities among students and parents.

P4.086 CT TEST RESULTS AMONG PARTICIPANTS OF THE CHLAMYDIA SCREENING IMPLEMENTATION (CSI) AND ITS ASSOCIATION WITH SEXUAL BEHAVIOUR CHANGE

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Objective To assess the association between chlamydia (CT)-test results and subsequent sexual risk behaviour change in a register based Chlamydia Screening (CSI) programme consisting of four screening rounds.

Methods All participants in the CSI programme, who had completed questionnaires and corresponding CT-test results in ≥ 2 rounds, were included. Measurements in round four were excluded, because of low participation rates. Sexual risk behaviour parameters contained the use of condoms, number of partners and having casual, concurrent or new partners. Generalised estimating equations (GEE) were used to assess the influence of the test result on the change in sexual risk behaviour in the subsequent round. Analysis were adjusted for sexual preference, having a steady or casual partner, age and number of rounds participated.

Results Of 9360 included participants, 80.5% (n = 7536) and 19.5% (n = 1824) completed CT-testing and questionnaires in respectively

two and three rounds. Across all rounds, a significant difference in change of sexual risk behaviour could be found: participants who tested CT-positive in the previous round more often reported reduced risk behaviour (more use of condoms with a casual partner (32.1% vs 24.1%, p = 0.018), less having sex with a casual partner (21.7% vs 15.3%, p = 0.001), lower number of sex partners (38.5% vs 24.7%, p < 0.001), less having sex with concurrent partners (15.3% vs 8.9%, p = 0.005) and less having new sex partners (21.0% vs 16.3%, p = 0.010)) compared to participants who tested CT-negative in the previous round. No significant difference in change of the use of condoms with a steady partner (p = 0.926) was found between participants who tested positive and participants who tested negative in the previous round.

Conclusion Sexual risk behaviour change was associated with previous CT-test results. Participants who tested CT-positive more often positively changed their sexual risk behaviour compared to participants with a negative test result in the previous round.

P4.087 ARE BELGIAN STUDENTS BEING TESTED FOR SEXUALLY TRANSMITTED INFECTIONS, AND WHY (NOT)?

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This research investigated to which extent students are tested for sexually transmittable infections (STIs). We also explored their motivations for getting tested (or not), as well as their knowledge and attitudes on STI-testing.

An online questionnaire was completed by 2274 students (between 19 and 23 years old), following a bachelor education in Leuven (Belgium).

The majority of the students (77%) had sexual intercourse without a condom, during six months prior to the study. Within this group, a minority of 31% were tested on STIs at least once in their lifetime. A significant positive relationship existed between worrying about having contracted an STI and taking an STI test. Even within the subgroup of worried students (16%), only a minority did get tested (36%).

A majority of students considered it “likely” to contract an STI when having unprotected sex with a new sex partner. An STI was expected to be painful, shameful, and even “terrible”. Most students desired more information on STI testing.

Significant differences existed between men and women in key disadvantages of getting tested on STIs. Young women were reported embarrassment during the test and aversion for inspection of their genitals and/or questions about their sex life. Female respondents attached more importance to the gender of the doctor being female.

Young men were more bothered by practical issues, like the time and money an STI test would require. Male respondents attached less importance to an STI test as long as symptoms were absent.

We conclude that a substantial proportion of the students that would benefit from an STI test, do not get tested. More support to overcome practical and emotional barriers against STI-testing is required. There was a gender difference observed in the kind of support needed.

P4.088 UNPROTECTED CASUAL SEXUAL CONTACT COMMON WITH BOTH LOCAL AND WESTERN PARTNERS AMONG DUTCH LONG-TERM TRAVELLERS TO (SUB)TROPICAL COUNTRIES

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Background Casual sex among travellers is common. It is unknown whether travellers use condoms differently with local versus western casual partners when visiting HIV endemic areas. We determined the number of casual sexual partners and consistency of condom use among Dutch long-term, non-expatriate travellers to (sub)tropical regions according to the ethnicity of their casual sexual partners, and estimated the incidence of HIV and syphilis on their return.

Methods A prospective mono-centre study of Dutch long-term travellers ≥ 18 years, attending the Public Health Service travel clinic in Amsterdam (2008–2011) and travelling to any (sub)tropical country for ≥ 12 and ≤ 52 weeks, was conducted. Travelers reported their travel purpose, duration, destinations(s), number and nature of sexual contacts while travelling: ethnicity, gender, partner type (steady/casual) and consistency of condom use with each partner. Analyses were conducted using Poisson regression (generalised estimating equations to account for multiple partnerships). Blood samples, taken before and after travel, were tested for HIV and *Treponema pallidum* antibodies.

Results There were 552 respondents and 11671 person-weeks of follow up (median age: 25 years, 36% male, median travel time: 20 weeks, 45% for work/study). Post travel, 34% ($n = 190/552$) reported ≥ 1 casual sexual partner, men a median of 3 (range: 1–8) and women 2 (range: 1–7) partners. Of 462 casual sexual partnerships, 42% ($n = 192$) were with local partners at travel destination. Equally, 39% of partnerships with western and local partners were unprotected. Single travellers (IRR_{steady partner(ref)}: 2.2, 95% CI: 1.2–4.0) and those on holiday (IRR_{work/study(ref)}: 1.9, 95% CI: 1.2–3.0) had more unprotected casual sex. Partner's ethnicity was not significant in predicting condom use. No HIV or syphilis seroconversions were recorded.

Conclusion Unprotected casual sex was common among Dutch long-term travellers, occasionally with multiple local partners in HIV-endemic regions. Single travellers and those travelling for holiday purposes were most at risk. These groups should be advised on the need for safe sex while abroad.

P4.089 REDUCE THE RISK AND VULNERABILITY TO HIV

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Background Before the people can reduce the risk and vulnerability to HIV, individuals and communities must understand the urgency to the epidemic. They must be given basic facts about HIV/aids, taught set of protective skills and offered access to appropriate services and products.

Methods A cross sectional community based survey have been conducted between January 2011 to April 2011 by interview of 419 heads of the households regarding the knowledge of HIV transmission means in Accra, Ghana

Results Out of the interviewed 419 household heads, 287 (68.5%) were females. 36%, 28% and 34.3% were in the age group of 40+, 31–40 and 15–30 respectively. The findings revealed that only 21 (5%) of study participants mentioned four ways of HIV transmission (unprotected sex, mother to child, sharp materials and blood transfusion). On the other hand, 63 (15%) mentioned any three of the above route of transmission, whereas the majority, 209 (50%) and 86 (20.5%) mentioned two and one means of HIV respectively. On contrary about 40 (10%) of interviewed heads of house hold mentioned hardly any of the transmission means. Males were about 2.4 times more likely to mention unprotected sex as one means of transmission than females

Conclusion In general, knowledge of residents of Medina in the capital town of Ghana about HIV transmission and prevention means was low. Appropriate HIV/Aids education means ought to be tailored to residents

P4.090 REMINDERS REMAIN THE BEST CLIENT DRIVEN ADHERENCE COPING STRATEGY FOR THOSE TAKING LIFELONG ON ANTI RETRO VIRAL THERAPY (ART)-THE AIDS SUPPORT ORGANIZATION (TASO) OPERATIONAL RESEARCH FINDINGS

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Background For one to register ART success, good adherence is of utmost importance. With Art paradigm shift clients face a number of challenges in the long term that requires long term strategies for success.

A study to assess the major ART adherence coping strategies among clients enrolled on treatment with a four years and above experience was conducted.

Method This was a cross sectional study by design using semi structured questionnaires. Data was analysed using logistic regression model. Convenient sampling targeting a total of 400 TASO clients aged 18 years and above, with over four years experience on ART first line Regimen.

Results A total of 400 clients were interviewed and 43% coped by using reminders, 0.3% by their times of brushing their teeth, 7.5% by before and after morning and evening prayers, 1% by counsellors support, 9.5% by their medicine companions and 38.8% had this as a habit.

Conclusion Majority of the clients use reminders for good adherence in the long term. Baseline adherence preparation is very important since it directly leads to development of positive adherence habits.

P4.091 SEXUAL ATTITUDE, CONDOM USE AND ACCESS AMONG YOUNG REFUGEES IN ORU REFUGEE CAMP NIGERIA

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Background Act of violence committed against young girls in refugee camps may increase susceptibility to HIV and this is due sexual gender-based violence such as psychological abuse and discriminatory practises. The girls are forced to have sex with boys without condoms because of lack of household and decision making power. This Study explored the perception, knowledge, access and consistent use of condoms among young refugees and we hypothesised that there exit a significant relationship between them.

Methods Adolescent refugees ($n = 187$, 13–19 years of age) from simple and stratified sample in Oru Refugee camp completed a self-administered questionnaire and focus group discussion was conducted differently for boys and girls between October and December 2008. We performed the analysis using SPSS and frequency distribution was also used.

Results The study shows that 52.4% of the respondents are female and 47.6% of them are Male. 56.7% of the refugees know of a place where one can get condom still about half of the girls did not use condom at their last sex because their partner will not allow and also because of discrimination. Chi-square test was used to compare their access to condom and use of condom which shows a significant relationship between them (Chi value = 39.724, DF = 1, P value = 0.000 < 0.05).

Conclusions The result shows that the young refugees are at risk of getting infected with HIV especially the female ones. The focus group shows that half of the female refugees reported that their partner will not allow them to use condom. The young girls need to be empowered on how to negotiate condom use with their partners. It is also necessary to achieve behavioural change communication