Social and behavioural aspects of prevention poster session 6: Men who Have Sex with Men

**P2-S6.01** SOCIAL, BEHAVIOURAL CHARACTERISTICS, AND SEROPREVALENCE OF HIV INFECTION AMONG MEN WHO HAVE SEX WITH MEN (MSM): ABOUT 92 CASES COLLECTED IN A COMMUNITY MEDICAL CENTER NAMED CENTRE OASIS “OF ASSOCIATION AFRICAN SOLIDARITÉ (AAS), OUAGADOUGOU, BURKINA FASO

Background Like many African countries, the issue of sex between men in Burkina Faso remains taboo and is often the cause of social exclusion. Our objective in this study was to determine social and behavioural characteristics and seroprevalence of HIV infection among MSM in Ouagadougou.

Methods A questionnaire (closed questions) written by the medical team at Centre Oasis was submitted to the MSM. Our sample of 92 consisted of MSM who frequented the center and some who did not. Data were collected by medical staff and peer educators. They were: Social, Behavioural, The results of HIV serology.

Results The average age of MSM surveyed was 28.6 years with extremes of 18 and 56 years. MSM were predominantly students with a proportion of 34.2%, 21.7% were traders, 2.2% were unemployed. More than half of respondents were single (54.8%). 22.8% were married. 78.3% of MSM had had sex with a woman. 2/3 of all MSM were living with a common-law wife, and 20.7% were legally married. More than half of respondents were single (54.8%). 22.8% were married. 78.3% of MSM had had sex with a woman. 2/3 of all MSM were living with a common-law wife, and 20.7% were legally married. More than half of respondents were single (54.8%).

Conclusion In our study, it appears that the MSM community in Ouagadougou is highly vulnerable given the high rate of HIV seroprevalence and its marginalisation. Targeted interventions for the recognition of support are needed to help sustain the achievements of the national fight against HIV.

**P2-S6.03** ABSTRACT WITHDRAWN

**P2-S6.04** NEEDS ASSESSMENT ON STI PREVENTION SERVICES AMONG MEN WHO HAVE SEX WITH MEN WITH HIV IN GUATEMALA CITY, 2010

Background STI prevention and support services for MSM living with HIV in Guatemala are limited. The aim of this study was to collect information on STI risk among MSM living with HIV to inform the development of integrated prevention and care services for this population.

Methods As part of a qualitative study with MSM in Guatemala City, nine MSM living with HIV were purposely selected and interviewed in March 2010. Interviews addressed STI-related risk behaviours, experiences with HIV/STI services, social network characteristics and life after HIV diagnosis. Participants were recruited through referral from NGO representatives, key informants, clinic staff and other participants. In-depth interviews were recorded and transcribed and field notes were incorporated into the transcriptions. Multiple readings of the transcripts, key themes were identified and a codebook was developed. Codes were applied using the qualitative software Atlas.ti. Data was further analysed using analytic memos and discussions with research team.

Results Despite reporting HIV-related risk behaviours, including multiple, concurrent sexual partners, inconsistent condom use, and alcohol and drug use, most participants did not report an STI infection after their HIV diagnosis. Attitudes towards current HIV/AIDS treatment services tended to be favourable, especially among those who compared them to earlier treatment experiences, and participants described preferences for a one-stop venue for sexual health services. Participants were generally not familiar with STI services and identified several barriers to access including insufficient information on STI, lack of confidentiality and fear of discrimination, and fear of being stigmatised.