Methods  In order to reduce stigmatisation and increase uptake of HIV screening and treatment services at three clinics in Northern Nigeria, the MSH PrO-ACT project implemented the following interventions

- Amalgamation of clinic space to ensure that HIV positive clients are attended to at the same clinic as other patients.
- Training of health care providers on patient confidentiality protection.
- Ensured that the same doctor attends to all patients irrespective of their HIV status.
- Blood samples for all patients visiting the laboratory are collected at the same phlebotomy point irrespective of their HIV status.
- Initiated focus group discussions on stigmatisation within the community and health facilities to promote a change in attitude towards PLWHA.
- Initiated support group meetings for PLWHA in order to encourage open discussions on stigma and partner disclosure.

Results  At the end of twelve months, 12,436 (Male-3,616, Female-8,820) clients were counselled and tested for HIV and the number who accessed laboratory services for CD4 count monitoring increased from 53.8% to 93.3%. The number of partner testing also increased from 35% to 68%. In addition, health worker attitude towards PLWHA improved significantly as workers now report a stronger belief in patient confidentiality protection.

Conclusion  Integration of HIV related services into existing health systems has helped reduce stigmatisation of PLWHA. However, a lot more still needs to be done in enlightening and equipping health care providers in the fight against stigma in rural communities.

P4.126 | AVAILABILITY OF SERVICES FOR Discordant COUPLES TO PREVENT HIV AND STIs


Introduction  A survey was conducted in the three regions of Russia, Orel, Bryansk and Voronezh from 2008 to 2012. 64 HIV-negative partners living more than a year in a HIV discordant-couple relationship were enrolled in the survey. The main purpose of the survey was to assess the disparities of medical services for discordant couples over a four year period.

Method  survey/questionnaire. Participants were collected from a social networking structure and support groups.

Results  The majority of the discordant couples did not receive complete health services. 72% of the discordant couples had consultation for prevention of HIV transmission with their gynecologists, but only 38% had consultation about family planning. The medical providers can generally advice on common HIV prevention, but are not equipped with specialty advice and communication tools. For example, 86% of discordant couples tell their gynecologists that they use condoms. When speaking openly with peer-consultants, the expression of condom use decreased to 23%.

Today, 74% of them have ceased to be discordant because the HIV negative partner seroconverted. Out of the 74%, 13% of the relationships ended.

In general the Russian health care system has difficulties training professionals about HIV prevention and treatment. Not only are doctors not trained with comprehensive information, but communication is limited. The average conversation with a doctor is only 12 minutes. Only 47% of discordant couples have the opportunity to go to the doctor for important recommendations once a week. Only 26% of the couples had the possibility to access emergency medical advice. Services are critical at the moment of an immediate engagement with a risk behaviour.