Poster presentations

Background MSMs and Trangendered persons are often described as difficult to reach. Using a Community Systems Strengthening Framework, the ISEAN-Hivos Program provides regional HIV interventions for MSM and Transgender communities in Malaysia, Indonesia, Philippines and Timor Leste. Aside from capacity building for MSM and TG Community Based Organizations (CBOs), a key initiative of the Program is the allocation of competitive small grants that support local projects of community organisations related to HIV-AIDS prevention.

Methods Through the Stop AIDS Now Fund (SAN Fund), the Program announced an open call for applications. An evaluation was conducted based on the initial response of the communities to the grants process and how it served as another venue for them to learn about improved organisational functions.

Results As a requirement for grant application, they developed their strategic plans and organisational documents. The CBOs also had to develop a feasible proposal that can be implemented within the timeline and budget. The early strategic evaluations of this competitive small grants scheme have shown that:

- 1. The communities can work together to improve their own organisational structures and functions;
- 2. Quality proposal may be produced, with some technical
- 3. Creativity was encouraged based on the open nature of kind of project to be proposed;
- Community members learned about fund management at a smaller scale and the requirements for effective management of grants.

Conclusions These results from the early evaluation of the Program's competitive small grants scheme have provided evidence that initial seed funding, once provided in the bigger context of providing technical assistance for organisational/fund management, is a good catalyst for further increasing the participation of MSM and TG communities in their local and national responses to HIV-AIDS. This approach may well lead to improved community participation in working with service providers towards better health outcomes on HIV-AIDS and STI.

P4.136 | WOMEN'S SOCIO-DEMOGRAPHIC DRIVERS TO SEXUAL **MULTI-PARTNERSHIPS IN RURAL TANZANIA**

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Background Indulgence in sexual multi-partnerships (SMP) intensifies risks to sexually transmitted infections including HIV. In Tanzania where HIV/AIDS is more prevalent among women than men and consistent condom use is low, identifying drivers to SMP is pertinent for scheming feasible HIV/AIDS interventions.

Objectives

- 1. To establish prevalence of SMP and
- 2. Identify women's socio-demographic characteristics associated with SMP in Rufiji, Kilombero and Ulanga districts in

Methods Data were collected cross-sectionally in Rufiji, Kilombero and Ulanga districts in Tanzania in 2011 on 2,643 sexually active women ages 15+ years. We used Chi-square for testing association between SMP and each of the explanatory variables and finally used logistic regression for multivariate analysis.

Results Number of sexual partners reported ranged from 1 to 7, with 7.8% of the women reporting multiple partners (> 1) in the past year. Sexual multi-partnerships among women was more likely among those ever married than currently married (OR = 2.88, 95% CI 1.75-4.74), single than currently married (OR = 2.28, 95% CI 1.52-3.42) and Muslims than Christians (OR = 1.51, 95% CI 1.04–

2.18). On the other hand, SMP was less likely among women who were older than younger (OR = 0.96, 95% CI 0.94-0.98), educated at primary level than uneducated (OR = 0.64, 95% CI 0.42-0.98) and educated at secondary/higher levels than uneducated (OR = 0.23, 95% CI 0.11-0.47), Ndengereko than Pogoro (OR = 0.43, 95% CI 0.20-0.93) and Ngoni than Pogoro (OR = 0.47, 95% CI 0.23-0.94) ethnic groups. District of residence and socioeconomic status were not significant.

Conclusion Sexual multi-partnerships is an extant risky behaviour among women in rural Tanzania and varies significantly by age, marital status, education, religion and ethnicity. HIV/AIDS control programmes in the country should take these variables into consideration in designing fruit-bearing interventions for a HIV-free world.

P4.137

SOCIAL NETWORK FACTORS AND HIV SEROSTATUS AMONG AFRICAN AMERICAN MEN WHO HAVE SEX WITH

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Background Social network analysis is a useful method to assess infectious disease transmission and the amount, type, and sources of social support. The current study compared social network characteristics of African American men who were HIV positive to those who were negative

Methods Study participants were 229 African American men who have sex with men (MSM) who completed a baseline social network assessment for a pilot intervention in Baltimore, Maryland.

Results Almost half (48%) were HIV positive. Using multiple logistic regression modelling, statistically significant network differences (p < 0.05) were found between HIV positive and negative in the number of kin and non-kin who were aware of that they were MSM, injection drug users, network members who use the internet to find sex partners, mean trust in network members, and network members who were full-time students.

Discussion These findings suggest that although there are many similarities between the networks of HIV positive and negative African American MSM, differences do exist in the social and sexual network characteristics. A larger number of HIV positives as compared to negatives know about their same sex behaviour, which may be utilised for providing support; however, positive have more injectors in their network, which could lead to greater HIV transmission.

P4.138

THE INTERNAL CONSISTENCY OF SEXUAL PARTNERSHIP HISTORIES REPORTED BY YOUNG PEOPLE IN RURAL **TANZANIA**

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Background Detailed sexual partnership histories are frequently collected, yet data quality is rarely reported. We present data on internal consistency of partnership reports among youth in Tanzania, and assess the usefulness of specific questions.

Methods In 2007/8, sexual behaviour and biological samples for STIs were collected from 13,814 15–30 year olds in 20 communities, in Mwanza, Tanzania. Using a face-to-face questionnaire, participants were asked: number of sexual partners (ever, last year, last 4 weeks); new partners in the past year; detailed questions about last 3 partners in the past year, including dates of first and last intercourse. We examined response consistency and, using STI and pregnancy results, assessed the validity of the question 'Have you ever had sex?'