

Network, literature research, workshops and interviews for the recording of a documentary video.

### Results

- Four workshops carried out in 4 Brazilian states.
- 4,000 initial copies made of a video to showing that candomblé religion is a field of knowledge that can offer productive ideas concerning the promotion of health, cultural resistance and development of public health policies.
- Campaigns coordinated with the *terreiros* for reducing stigmatisation and discrimination, promoting the right to healthcare and civil rights, and improving the quality of life of those living with HIV/AIDS.

**Conclusion** The importance of STD/AIDS prevention, not only through government policies but also by taking into consideration the knowledge, teachings and care provided in the “*terreiros*”, and by recognising their contribution to the physical, psychological and spiritual health of the participants, based on talks by “the people of the saint” (povo de santo) religious leaders, and their songs, myths and proverbs, all contributing to the promotion of health and STD/AIDS prevention.

### P5.047 HIV/AIDS PREVENTION IN THE SLUMS OF DELHI, INDIA: TARGETED INTERVENTIONS

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India has been at the centre stage of global economic growth in the recent years. It has made an impact in urban India with visible signs; however, vast parts of metropolitan India still remain underdeveloped and impoverished. Large numbers of people live in difficult conditions and are deprived of basic healthcare in many urban quarters, especially the western suburbs of Delhi, which have large slum areas. These slums have a high percentage of migrant workers with low levels of awareness on HIV/AIDS. Although the HIV prevalence is low, yet in terms of individuals infected, the slums are home to a very large and rapidly growing number of people living with HIV.

Cygnus Medicare, a newly emerging healthcare organisation dedicated to providing world class healthcare in resource-limited settings, has been working in Delhi and Haryana for last several years with a strong public health approach. It runs seven fully equipped hospitals where poor people are treated at subsidised rates and special programmes are held which focus on education of high risk groups, including commercial sex workers and migrant workers on HIV. STD Clinics are held on Sundays, benefitting over 12000 people in last 3 years. A large number of awareness camps and activities are organised. The entire medical team periodically goes through trainings and orientations focusing on education and prevention of HIV/AIDS.

The organisation also has an outreach component of service delivery, through which remote slum areas are regularly visited by mobile medical vans to provide curative, diagnostic and educational services to the community.

The response and acceptance to the programme so far has been very positive. Over the last three years, there has been a large increase in the number of people attending the clinics and camps.

### P5.048 REACHING WOMEN THROUGH THE INTEGRATION OF HIV TESTING INTO PUBLIC SERVICE SITES: EXPERIENCES FROM THE DEPARTMENT OF MOTOR VEHICLES AND INCOME MAINTENANCE CENTER IN WASHINGTON, DC

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**Background** Washington DC has an estimated HIV prevalence rate of 2.2% and only 50% may be aware of their infection. Using

large volume public service venues may promote HIV testing and directly increase access to HIV testing, thereby increasing the number of residents who know their HIV status. Family and Medical Counseling Service, Inc. (FMCS) implemented a novel programme to provide HIV testing at the Department of Motor Vehicles (DMV) which provides driver's licence and automobile tag services to over 150,000 residents annually. In 2011, we replicated this programme model in the Income Maintenance Center (IMC), the government office that provides residents with public benefits including financial assistance and health insurance.

**Methods** Dedicated project staff discusses the importance of HIV testing and offer the test to everyone awaiting DMV and IMC services. HIV testing is conducted in private offices inside the DMV and IMC, and all who test positive are immediately referred to care. We present data describing the HIV testing outcomes from the programme.

**Results** From October 2010 to October 2012, 247,055 individuals were offered an HIV test, 23,111 (9%) accepted, 21,283 (93%) were tested, and 113 (0.5%) were positive. The majority of those tested were women 14,667 (69%) between the ages of 23–40 (5,463 or 37%). Of those tested, 33% (7,023) were first time testers. Women accounted for 54% (3,792) of all first time testers.

**Conclusions** Conducting HIV testing in high volume non-clinical settings, such as the DMV and IMC, is a feasible strategy to engage women in HIV counselling and testing services, including those who have never tested before. Expansion of this programme model to similar public service sites may be necessary to increase access to HIV testing services, encourage routine screening and increase the percentage of individuals in the general population who know their HIV status.

### P5.049 CREATING ONLINE COMMUNITIES OF PRACTISE TO SUPPORT UPTAKE AND SUSTAINABILITY OF EVIDENCE-BASED HIV/STI PREVENTION PROGRAMMES

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**Background** Online communities of practise have the potential to address multiple barriers to the broader dissemination and maintenance of evidence-based HIV/STI interventions. Addressing these barriers is critical to narrowing the gap between what researchers have identified as best practises and what gets delivered in communities to curb the spread of disease. Yet there are few models grounded in implementation science that are useful for guiding the development of online communities that can support high-impact HIV/STI prevention.

**Methods** The APPLES dissemination model is used to identify goals and specific objectives of an online community of practise; this integrated theoretical model focuses on achieving adoption/adaptation; priority population identification and penetration; longevity; evaluability, and sustainability. A case example is used to discuss how the APPLES model can guide development of an international online community of practise.

**Results** Drawing on the APPLES model, key components of an online community to promote high-impact condom distribution were identified. These include: (1) Knowledge and skills-building to address specific APPLES goals and objectives, such as identification and outreach to the highest-risk, highest-impact population segments; (2) Knowledge-sharing and network engagement to identify implementation solutions over the life course of intervention delivery; and (3) Online expert coaching and technical assistance. Components are matched to multimedia activities that encourage both individual learning and community engagement. Challenges to marketing and maintenance are also considered in the development

process, and built-in analytics are used to monitor and improve services provided.

**Conclusion** Carefully-designed online communities of practise can bring practitioners together to learn and share across geographic boundaries and without incurring the costs of face-to-face meetings. They are consonant with adult learning and professional development strategies that underscore the importance of participation not only in initial training events, but also the value of ongoing coaching, technical assistance, and peer network support.

**P5.050 STD PREVENTION ONLINE: A NETWORKING WEBSITE FOR STD/STI PROFESSIONALS**

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**Background** STDPreventionOnline. Org (STDPPO) is an online professional networking web site for the sexually transmitted diseases/infections (STD/STI) work force, including researchers, clinicians, epidemiologists, disease intervention specialists, and programme managers. The site was developed by the Internet and STD Center of Excellence, originally funded by a grant from the U.S. Centers for Disease Control and Prevention and currently sponsored by the American Sexually Transmitted Diseases Association. The site was conceived as a two-way clearing house of current STD/STI information and resources, where members can both download and upload information in a variety of formats, including text, graphics, audio/video formats as well as post blog and forum entries. Membership to the website ([www.stdpreventiononline.org](http://www.stdpreventiononline.org)) is free.

**Objective** To describe current users and usage of STDPPO.

**Methods** Descriptive statistics were obtained from embedded website metrics and Google Analytics©.

**Results** Since its inception in 2007, the site has registered 3,587 users; the site's monthly newsletter has over 4,100 subscribers. The predominance of members (92%) live/work in the United States; however a substantial number (387 as of February 2013), are non-US users with 52 countries represented. Most members (58%) work in STD/STI programmes in state/local health departments, 13% in community or private clinics, 11% in a university setting, 8% in federal government, and 8% in community organisations. During 2012, the site logged 8,240 site visits and 32,462, respectively 158 and 624 per week. To date 1,142 resources have been uploaded to the site which were downloaded 44,517 times, an average of 39 downloads per resource. Topics related to Internet use and online interventions are particularly popular, followed by clinical slide sets and podcasts.

**Conclusion** During the 5 years of its existence, STDPPO has demonstrated to meet a need in the STD/STI professional community for an interactive, two-way, clearing house of STD/STI-related information.

**P5.051 "THERE ARE A MILLION SCENARIOS TO CONSIDER": HEALTH CARE PROVIDER PERSPECTIVES ON INTERNET-BASED TESTING FOR SEXUALLY TRANSMITTED INFECTIONS, HIV, AND HEPATITIS C IN BRITISH COLUMBIA**

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**Background** Online health interventions are integrated within existing systems of sexual health care, however, their perception by

health care providers is rarely considered. We sought to understand the opinions of health care providers working in sexual and reproductive health of *GetCheckedOnline* (GCO), a new internet testing programme for STIs, HIV and Hepatitis C in British Columbia, and how they perceived it integrating with their future practise.

**Methods** In 2012, one investigator conducted six focus groups with a total of 49 participants (21 nurses, 12 physicians, 16 other staff); observers in each group took notes, supplemented by audio recordings where possible. Participants were presented with the GCO model and questioned about perceived risks, benefits, utility, and impact on/integration with their practise. Focus group notes were thematically analysed using NVivo and findings validated with observers.

**Results** Focus group participants described GCO as an inevitable evolution within and complement to the current system of care, where the benefits of shifting locus of control to patients, addressing testing barriers, and increasing engagement in care may be offset by perpetuating existing inequities for some groups. Participants discussed the potential for personal harm (e.g., anxiety at receipt of positive results, misunderstanding of limitations of tests) and clinical harm related to provision of inadequate/sub-standard clinical care. However, they also indicated that they were likely to integrate GCO with their own practise, under certain scenarios (e.g., referral of low-risk clients or triage of people seeking testing appointments).

**Conclusions** Providers expressed favourable opinions of internet testing in general and support for GCO. Concerns about potential harms (many of which participants acknowledged existed within the current clinic-based testing system) were generally offset by the perceived benefits of the service. Participants also provided many suggestions for mitigation of potential harms, which have been incorporated into the GCO programme where possible.

**P5.052 KNOWLEDGE AND AWARENESS OF CERVICAL CANCER, HUMAN PAPILLOMAVIRUS (HPV) AND HPV VACCINES AMONG MEDICAL STUDENTS**

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**Background** Cervical cancer is one of the leading causes of morbidity and mortality among the gynaecological cancer worldwide. Therefore, medical students in developing countries like INDIA should have sound knowledge about this disease. In this study we aim to access the current knowledge amongst medical students about cervical cancer, HPV and HPV vaccines.

**Methods** A cross-sectional, questionnaire based survey was conducted among 355 medical students during October 2012 to Jan 2013 in the tertiary medical care hospital. Out of 355 medical students, 129 students (36.33%) were from preclinical stage (I MBBS) belongs to group I, 148 students (41.69%) from paraclinical stage (II MBBS) belongs to group II and 78 students were from clinical stage belongs to group III (III MBBS onwards).

**Results** Out of 355 medical students, 326 participants (91.83%) were aware that virus is the causative agent of cervical cancer. The 218 participants (61.4%) knew about the route of cervical cancer transmission. The most common risk factor reported by 185 (52.11%) participants was poor hygiene. The 66 participant reported most common presenting feature was bleeding per vaginal (18.59%). The results showed that 263 students (74.08%) were unaware about the proper route of HPV vaccine administration. They are also unaware about HPV vaccines availability, vaccine dosing schedule, target age group, manufacturers and vaccine preparation technology.