commonly made in certain types of popular music and dance among black Caribbeans, changing norms of relationships in an era where you can “order sex via app”, peer pressure, and a normalisation of concurrency on social media, especially among men.

Conclusion Among black Caribbeans, the different types and contexts of concurrent partnerships can have implications for STI prevention. Awareness of being in a concurrent partnership could potentially facilitate uptake of interventions including condom use, partner notification, and reduce the risk of re-infection. In addition, such interventions should address broader sociocultural factors influencing risk behaviour including the impact of media.

P4.23
EGOCENTRIC SEXUAL NETWORK CHARACTERISTICS OF MEN WHO HAVE SEX WITH MEN (MSM) AND TRANSGENDER WOMEN (TW) RECENTLY DIAGNOSED WITH SYPHILIS AND/OR GONORRHOEA/CHLAMYDIA (GC/CT) IN LIMA, PERU: NETWORK PATTERNS AS ROADMAPS FOR STI PREVENTION INTERVENTIONS

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Introduction Endemic rates of STIs like GC/CT and syphilis in Peru are only partially explained by individual behavioural or biological factors. Characterisation of sexual networks of MSM/TW with syphilis and/or GC/CT can provide critical data to inform prevention efforts.

Methods We enrolled 917 MSM/TW as screening for 2 STI control trials in Lima, Peru. We surveyed demographics and sexual identity, role, and 30 day network characteristics (number/gender of sexual partners, partner type, and frequency of anal/vaginal intercourse) and tested for syphilis (RPR >1:16) and oral, rectal, or urethral GC/CT (TMA). Differences in egocentric network characteristics were analysed with Chi-square and Kruskal-Wallis tests.

Results Approximately 38.7% (n=355) of subjects had a new STI diagnosis (Syphilis: 97 [10.6%]; GC/CT: 161 [17.6%]; Syphilis-GC/CT Co-infection: 49 [5.3%]). MSM/TW with GC/CT were younger (median age+IQR: 25 [22-30]) than those with syphilis (28 [23-34]) or no STI (28 [24-35]). STI-negative subjects were more likely to identify their sexual role as active (insertive; 24.8%) than men with syphilis (10.8%) or GC/CT (14.7%). MSM/TW with GC/CT reported greater median numbers of all partners (3 [2-5]) and of casual male or transgender partners (2 [0-4]) than those with syphilis (2 [1-5] and 1 [0–2], respectively) or no STI (2 [1-3] and 1 [0–2]). Both GC/CT and syphilis were associated with the number of partnerships involving receptive anal intercourse (RAI; 2 [1-4] and 2 [1-13]) compared with STI-uninfected subjects (1 [0–2]). No differences were noted in the number of partnerships with condomless RAI or number of female partners.

Conclusion Egocentric network characteristics of MSM/TW with GC/CT and/or syphilis demonstrated progressive increases in network size, number of casual partners, and frequency of RAI when comparing no infection vs syphilis vs GC/CT +/- syphilis co-infection. Detailed understanding of network patterns, along with individual and partnership characteristics, will inform public health responses to HIV/STIs among Latin American MS.

P4.24
SWIPE LEFT ON DISEASE: THE EFFECTS OF CONTEXTUAL FACTORS AND DATING APP USAGE ON SEXUAL RISK BEHAVIOURS AMONG YOUNG ADULTS

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Introduction With the rise of social media and smartphones, millennials increasingly report meeting their romantic partners through mobile dating apps. Yet there is concern that this may also be the reason behind increases in sexually